

Today, treatments are available that may dramatically reduce a stroke's devastating effects—but they must be provided within a few hours of the onset of a stroke.

Therefore, **if you experience any of stroke's warning symptoms, call 911 and get to the hospital IMMEDIATELY!**

STROKE WARNING SIGNS

- Sudden one-sided weakness, numbness, paralysis
- Sudden trouble seeing in one or both eyes
- Sudden confusion, trouble speaking or understanding
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden severe or unexplained headache

For program information or how to set up a screening, call **336-713-5052**.

For current information about events please visit our web site **www.ncstroke.org**

We are funded by community donations and foundation grants. To make a tax-deductible contribution to the NC Stroke Association, please call 336-713-5052 or mail a check to the address below.

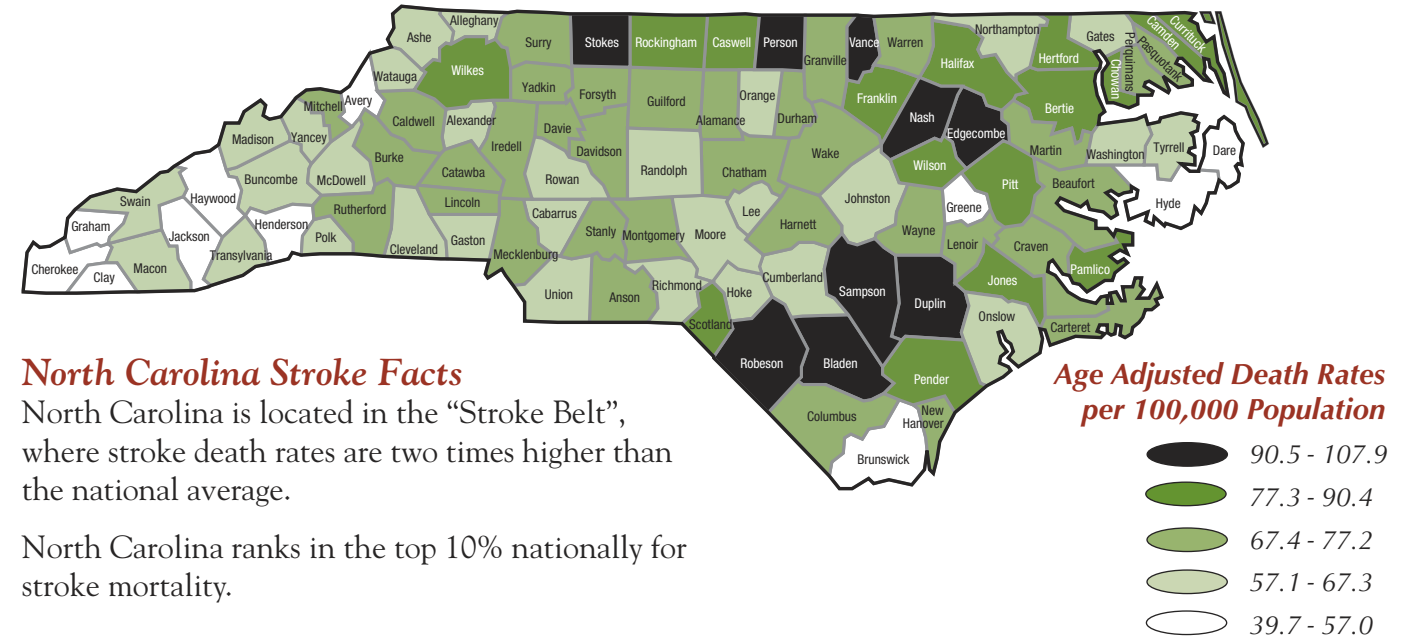
North Carolina Stroke Association

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The North Carolina Stroke Association is a member of Community Health Charities of North Carolina and will be participating in their SECC fall fund drive. **You can support the North Carolina Stroke Association by using our designation code of 1029.**



North Carolina Stroke Death Rates 1999-2003



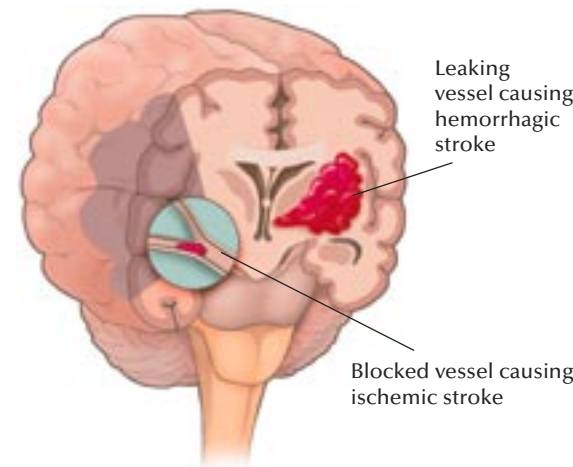
North Carolina Stroke Facts

North Carolina is located in the “Stroke Belt”, where stroke death rates are two times higher than the national average.

North Carolina ranks in the top 10% nationally for stroke mortality.

What is a Stroke?

Stroke is a brain attack that cuts off blood and oxygen to the brain. The brain controls our ability to speak, walk, breathe, and think. Most strokes are caused when blood clots, plaque, or fatty deposits block arteries—the path for blood and oxygen to the brain. Some strokes are caused when weak spots in the arteries rupture.



The Facts:

- Someone will suffer a new or a recurrent stroke every 45 seconds.
- Someone dies from a stroke every 3.1 minutes.¹ Stroke is the third leading cause of death and the leading cause of adult disability in the United States.³
- Each Year 700,000 strokes occur.² Among these occurrences 168,000 will die, 500,000 will have a first attack, and 200,000 will be recurrent.
- Nationally in 2004, the estimated direct and indirect cost of stroke exceeded \$53.5 billion
- Today there are 4.8 million stroke survivors.

¹Centers for Disease Control

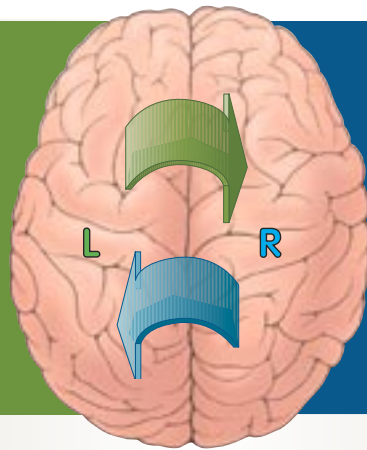
²National Stroke Association

³The North Carolina Heart Disease & Stroke Prevention Taskforce

LEFT-HEMISPHERE

Right side of body

- Verbal language
- Numerical skills
- Written language
- Reasoning
- Scientific functions



RIGHT-HEMISPHERE

Left side of body

- Artistic functions
- Creativity
- Music
- Insight
- Spatial orientation

Left-Hemisphere Stroke

The left hemisphere of the brain controls the movement of the *right side of the body*. It also controls speech and language abilities for most people. A stroke on the left hemisphere of the brain often causes paralysis on the right side of the body.

A left-hemisphere stroke may also cause aphasia, which is a term for a wide range of speech and language problems. Memory problems such as shortened attention spans, difficulty in learning new information and problems with concepts and generalization can also occur.

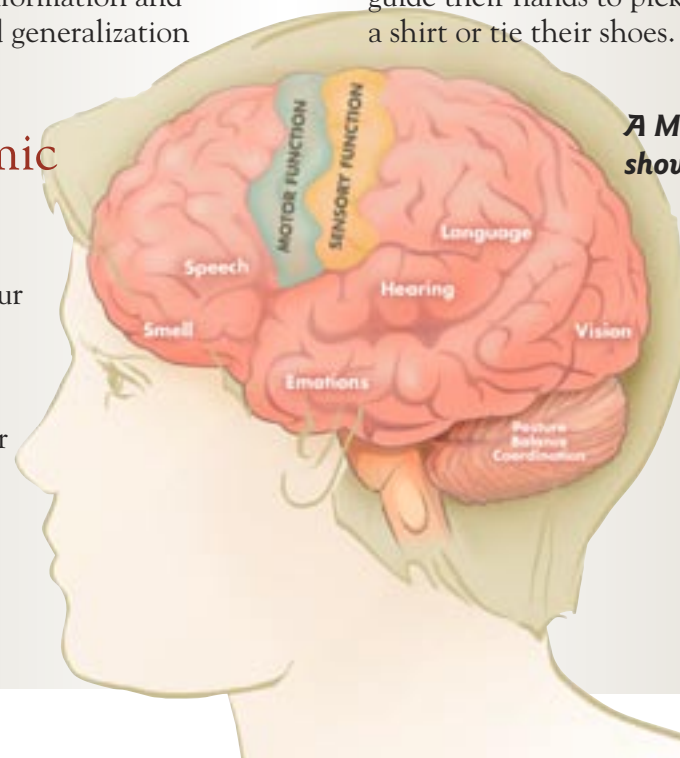
Right-Hemisphere Stroke

The right hemisphere of the brain controls the movement of the *left side of the body*. It also controls perceptual tasks, such as judging distance, size, speed or position and seeing how parts are connected to wholes.

A stroke in the right hemisphere of the brain often causes paralysis in the left side of the body. Survivors may have problems with their spatial and perceptual abilities that may cause them to misjudge distances or be unable to guide their hands to pick up an object, button a shirt or tie their shoes.

Transient Ischemic Attack (TIA)

These “mini-strokes” or “warning strokes” often occur before a major stroke. They are caused by a small blood clot finding its way to the brain and blocking a smaller blood vessel. Depending on where they occur, the TIA can have a noticeable, but temporary, effect or not be noticed at all.



A Map of the Brain showing areas of function.

Motor functions

- Hip
- Trunk
- Neck
- Arm
- Fingers
- Hand
- Face

Sensory functions

- Leg
- Trunk
- Arm
- Hand
- Face



What are the Major Risk Factors?

Stroke is largely preventable by treating medical disorders and changing unhealthy lifestyles. These stroke risk factors include:

- high blood pressure
- atrial fibrillation
- high cholesterol
- diabetes
- cigarette smoking
- heavy alcohol consumption
- carotid artery disease
- excess weight
- sedentary lifestyle

Stroke risk factors such as diabetes and hypertension have increased sharply and are not restricted to older adults. Stroke contributes to the country's health care crises and it is considered to be an epidemic that will continue as the baby boomers age.

Before a Stroke Strikes

The **NC Stroke Association Stroke Risk Identification Program** is designed to:

- 1) identify individuals who are at high risk of developing stroke;
- 2) review and counsel screening results with the participants;
- 3) provide participants with identified community medical resources for intervention treatment.

After a Stroke

The **NC Stroke Association Hospital Visitation Program** is designed to:

- 1) educate stroke survivors, their families, and their caregivers on post-stroke issues;
- 2) enlarge the NC Stroke Association's database of all visited stroke survivors;
- 3) identify post-stroke needs with a three-month telephone call the NC Stroke Association makes to all Stroke survivors we visit;

We screen people for:

- high blood pressure
- atrial fibrillation
- high cholesterol
- diabetes
- carotid artery disease
- lifestyle
 - excess weight
 - cigarette smoking
 - heavy alcohol consumption

The NC Stroke Associations' *Stroke Notes* newsletter provides ongoing stroke education to stroke survivors.

North Carolina Stroke Association

Created in 1998 and funded with a start-up grant from the Kate B. Reynolds Charitable Trust, NC Stroke Association has a mission to reduce the incidence and impact of stroke by changing the way stroke is viewed and treated. Our goal is to create stroke prevention, education and support programs that can be transported to communities across North Carolina.

The principal focus of our programs is on individuals who are in high risk groups as well as the medically underserved.

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Leading the Fight Against Stroke Across North Carolina

The North Carolina Stroke Association was created in 1998 with a start-up grant from the Kate B. Reynolds Charitable Trust. Its mission is to reduce the incidence and impact of stroke through screening and education. Its goal is to create stroke prevention, education, and support programs that can be transported to communities across North Carolina.

The North Carolina Stroke Association is creating partnerships and program sites with selected hospitals in regions throughout the state. Please visit our website at www.ncstroke.org for a current listing of hospital partnerships.