



Patient & Family Guide

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Recovery After a Mild Stroke



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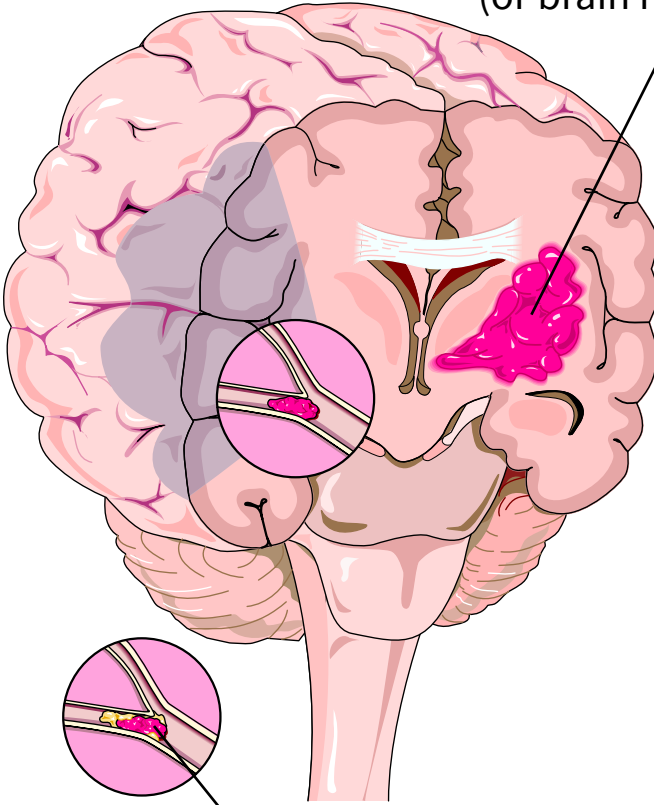
What is a mild stroke?

A stroke happens when there is a loss of blood flow to the brain. This causes brain cells to die. Your symptoms after a stroke will depend on where your brain was damaged and the size of the damaged area.

The blood supply to the brain can be cut off in 2 ways:

- › A blood clot forms on or in the wall of a blood vessel and stops blood from getting to part of the brain. This is called an **ischemic stroke** (or brain infarct). About 8 out of 10 strokes are ischemic.
- › A blood vessel bursts, causing bleeding in and/or around the brain. This is called a **hemorrhagic stroke** (or brain hemorrhage).
- Talk with your doctor or nurse about the type of stroke that you had.
- Your stroke might have been called mild because you can still look after yourself and do your daily activities. When you get home, you may see some of the symptoms described in this pamphlet.

Hemorrhagic stroke
(or brain hemorrhage)



Ischemic stroke (blood clot on
or in the wall of a blood vessel)

What are some of the common symptoms after a mild stroke?

Fatigue (tiredness) or low energy

- You may be more tired. Sometimes activities that did not make you feel tired before your stroke may tire you out now.
- Common symptoms:
 - › Feelings of low energy or sleepiness
 - › Trouble concentrating
 - › Making mistakes
 - › Irritability (grumpiness) and/or mood swings
 - › Headaches
- Things that may help:
 - › Take short rests or naps when needed.
 - › Try to get a good night's sleep.
 - › Try to take breaks between activities that make you tired.
 - › Slowly build up your activity to a level that works for you.
- If symptoms get worse, it may be a sign that you are pushing yourself too hard.

- If your fatigue gets in the way of what you need to do each day, ask your primary health care provider (family doctor or nurse practitioner) to refer you to an Occupational Therapist.

Depression or low mood

- You may feel sad or worried after a stroke. The difference between sadness and depression is that with depression these feelings stay with you and get in the way of your ability to manage your everyday activities.
- Depression is very common after a stroke. It affects as many as 1 out of 4 people. It is important to know the signs of depression and to get help early because it can affect your overall well-being and recovery.
- Common symptoms:
 - › Feeling sad for long periods of time
 - › Feeling hopeless or helpless
 - › Not feeling hungry or interested in eating
 - › Not feeling interested in doing things that you usually like to do
 - › Trouble sleeping
 - › Lack of energy
 - › Trouble concentrating
 - › Irritability

- Things that may help:
 - › Meeting with a psychologist or a counsellor
 - › Medications that will help your mood
 - › Physical activities (like gardening or walking)

Changes in behaviour and personality

- You may also see changes in your behaviour and personality.
- Common symptoms:
 - › Doing things without thinking them through
 - › Becoming irritable or frustrated
 - › Getting stuck on one thing and having a hard time seeing someone else's point of view
 - › Getting upset in situations that would not have bothered you before
- You may notice these changes more often when you are tired.

- Things that may help:
 - › Talk with family and friends about these changes. Talk about what you can do together to make things easier.
 - › Be honest. Explain to others that these changes are part of your stroke.
 - › Have a daily routine.
 - › If you feel irritated or upset, take a break and relax. Sometimes a few minutes are enough to get control of your emotions.

Changes in thinking skills

- After a mild stroke, you may:
 - › be easily distracted.
 - › have a hard time paying attention.
 - › have trouble focusing on what someone is saying in a busy place like a restaurant.
 - › have trouble sticking with one task and find yourself jumping from one thing to another.
 - › have trouble with your memory, especially with new information. You might find that you forget important details like names, dates, appointments, taking your medicine, and turning off the stove.
 - › decide things without thinking through all the details.
 - › be less organized and it may take longer to get things done.

- Things that may help:
 - › Take away distractions around you (like radio or TV)
 - › Break tasks down into small steps
 - › Have a daily routine
 - › Leave extra time for problem solving
 - › Write things down. Use a day planner or organizer.

Trouble speaking

There are 2 reasons this happens:

1. Weakness of the muscles in the mouth or throat. This is called **dysarthria**. Speech will sound slurred.
2. Damage to the area of the brain in charge of language. This is called **aphasia**. It may be hard to understand what others are saying or it may be hard to find the words you want to say even though you **know** what you want to say. Writing or spelling can be hard for a person with aphasia.

- Things that may help:
 - › Slow down your speech by saying one word at a time.
 - › When the word is not coming to you, think of another word that is close to what you want to say and use that word.
 - › Gesture (point, wave, or move your body) or try to show what you want.
 - › **Do not** talk about important things when you are tired.
 - › Talk in quiet places.
- If troubles with your speech or language do not get better over time, ask your primary health care provider to refer you to a Speech Language Pathologist.

Changes in your sight

- Common symptoms:
 - › Loss of part of your vision (visual field)
 - › Double vision
 - › Blurry vision
- Seeing an eye doctor will help you learn what kind of visual problem you have. They can tell you if anything can be done to help.
- Problems with vision may get better over time.
- Vision problems may seem worse when you are tired.

Trouble walking

- Common symptoms:
 - › You may feel off-balance or clumsy.
 - › Your affected leg may feel heavy.
 - › You may find that you catch your toes on the floor.
- These problems could be because of changes in leg strength, balance, coordination, and/or your ability to feel things.
- Often these things get better over time, but if they do not go away, talk with your primary health care provider or a physiotherapist.

Trouble using your arm and/or hand

- You may:
 - › feel clumsy.
 - › drop things without knowing.
 - › take longer to do activities (like writing or cutting food).
 - › feel weak. Doing things like carrying a full laundry basket or taking out the garbage may be harder.
 - › find that your arm and hand get tired quickly.
 - › rely on your stronger arm and hand for many tasks.
- Things that may help:
 - › Use your weak arm and hand as much as you can for safe activities (where you will not get cut, drop something heavy, or hurt yourself in other ways).
 - › If troubles with your arm and hand stop you from doing the things that are important to you each day, ask your primary health care provider to refer you to an Occupational Therapist.

How a stroke can affect your sex life

- After a stroke, you may have trouble with sexual function (how your body reacts to sex).
- Common reasons for changes in sexual function:
 - › Fear that sex may cause another stroke — **there is no proof that this can happen**
 - › Not feeling good about yourself
 - › Depression, fatigue, or pain
 - › More or less interest in sex
 - › Trouble with positioning because of weakness
 - › Less vaginal lubrication
 - › Impotence (you cannot get or keep an erection) — this may also be caused by medication you are taking
- It may be hard to talk about this topic, but there may be things that can help. Talk with your primary health care provider about your questions and options.

Frequently asked questions:

How long will my symptoms last?

- Progress is different for each person recovering from a stroke.
- Most people do get better over time. How fast and how much you recover depends on your symptoms, the area of your brain affected, and how much damage there is.

When can I drive again?

- Whether you can drive safely may have been changed by your stroke.
- People who have had a stroke should not drive for **at least 1 month**.
- Depending on your recovery, it may be more than 1 month before you can safely drive again. Be sure to talk about this with your team in the hospital or your primary health care provider. You may be referred for a driving exam by an Occupational Therapist.

What is my chance of having another stroke?

- Each stroke is one of a kind. Your chance of having another stroke depends on many factors. Talk about this with your primary health care provider.

What can I do to prevent another stroke?

- Know what your blood pressure is and keep it under control.
- Stop or cut back on smoking.
- Take your medication(s) as prescribed.
- Manage your diabetes.
- Manage your cholesterol levels.
- Eat a healthy balance of foods that are low in fat and salt.
- Be physically active.
- Keep a healthy weight.
- Limit alcohol use.

Resource

Heart and Stroke Foundation

› www.strokebestpractices.ca

- Find health information about stroke including diagnosis, treatment, prevention, and other resources.
- Under 'Resources', choose 'Patient & Caregiver Resources' to find 'Your Stroke Journey: A guide for people living with stroke'.

What are your questions?

Please ask. We are here to help you.

Notes:

Looking for more health information?

Find this pamphlet and all our patient resources here: <https://library.nshealth.ca/PatientEducation>

Contact your local public library for books, videos, magazines, and other resources.

For more information, go to <http://library.novascotia.ca>

Connect with a registered nurse in Nova Scotia any time: call 811 or visit <https://811.novascotia.ca>

Learn about other programs and services in your community: call 211 or visit <http://ns.211.ca>

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The information in this pamphlet is to be updated every 3 years or as needed.

