



<http://www.strokenetwork.org/>

November 2003

Welcome to the November issue of StrokeNet. In North America fall has arrived. Days are crisp, leaves are turning and we just finished the holiday of Halloween where costumed children go door-to-door trick or treating and receive treats from their neighbors.

As we get ready for even colder days, we celebrate in this newsletter. Steve has had a busy month and writes about several items including the establishment of a new message board. David Ray's Stroke Club had a birthday party.

Joe Flasher writes about Anticoagulant And Antiplatelet Agents Used In Strokes. Read about Pets for Stroke Survivors and how they aid in recovery. Jeanie Hiatt contributes a poem. The website review is of The Cardiovascular Disease website of the America Heart Association. Bios are of Jean Kirshenbaum and Dave Hinds.

Have a good read.

Lin Wisman, Editor
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Organization Highlights

By Steve Mallory

The month of October has brought major changes to the organization. The leaves are almost completely off the trees but that's not what I'm talking about. Let me start at the beginning of the month.

- We completed our 2nd annual golf tournament fundraiser. The affair was at least equal in size to the event last year. That means that funds in our bank account are sufficient for another year. Even though our funds are sufficient I would like to do more this than we did last year. Hopefully, we can organize a few more fundraisers each year.

- We have made our selection and Lin Wisman is this years Mentor Award winner. Lin received a plaque and a flower arrangement as a token of the organization's appreciation. Winners for this award are selected from staff but can be selected from the general membership, too! Let me know if you are performing mentor functions so your name can be added to the hat for next year. You can read about our Mentor Program at <http://www.strokenetwork.org/support/mentor.htm>. Lin sent me a letter thanking me for the award and explaining how rewarding it has been helping other stroke survivors and thus improving her own state of mind. She does a fantastic job here, doesn't she?

- The middle of the month brought donations from our organization to a local hospital in my home state of Maryland. We have started a community Outreach Program called Computer Therapy. We donated three brand new computers to the Stroke Ward there. Two will be dedicated to stroke survivors and one for stroke caregivers. The idea is to show the survivor and caregivers, specifically the ones without access to a local stroke support group upon hospital discharge, that support exists on-line and how to find our web site. This has to be a Godsend to many of those whom are usually left on their own. The hospital staff was extremely excited by the idea. I will be playing a big role; personally, to make sure that the program is properly implemented and maintained. Hopefully, we will be expanding this idea across the country in the coming years. It could come to your home state. Send me your feedback about this concept.

- The end of the month brought us a new message board and a rearrangement of the membership registration system. No longer will members get confused about what seems like double and triple registrations. You only need to register once and then

you can automatically access the message board. Better yet, the chat room links to the message board and you need not login to the chat room if you want to enter from the board. Just click the link and you are in. The message board even keeps track of what other members are in the chat room

- o And, we have our own organization calendar, now. All events and organization activities will be maintained on the calendar. The link to the Organization Calendar is on the message board. You have to check out this message board to see the improvements for yourself! You might want to wait until Tuesday, though.
 - o The old membership database is being converted this weekend to allow everyone who was a prior member to be able to access the new system. I'm told that chances are good that the old database can be converted. They are not positive but think it is very probable. The conversion will be implemented some time Monday so by Tuesday you should no for sure.
 - o The new board has several new forums, including one for Pediatric Stroke Caregivers. We don't have many members with this situation but it is certainly a critical problem for those mothers and fathers with this situation. My heart goes out to anyone with this dilemma.
- I should mention that we have somebody new on staff. Several of you already know Anne Kenyon, from New Zealand. She is caregiver to her mother, whom we know as Mum. Anne will be a chat host in addition to our existing chat host, Slack.
- One of the final changes for the month is that we are getting a new mailing list email address. The primary reason for this change was to go to a much shorter email address. It's changing from STROKECAREGIVERS@SUPPORT.STROKENEWORK.ORG to support@strokecaregiver.net. The change will be finalized early next week.

So, hopefully you can see how busy I can be when my health is good! August and September were terrible months for me. I still have serious

problems with my neck. I began Physical Therapy this week and will be getting my neck worked on twice/week. I heard that insurance companies have reduced the maximum allowed visits. Can we get one of our Therapists to email Lin with the facts on this situation?

Steve Mallory
President & CEO
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Life in New Zealand with a Stroke

By David G. Ray

October saw the Lower Hutt Stroke Club's birthday party. We invited the Widows and Widowers singing group to entertain us. This group of elderly folk put on an extremely polished and entertaining show, fast moving and very much enjoyed by members of the club. Although they have performed for us before each show is different. Following the entertainment we had our usual afternoon tea. Two weeks later the members of the club were taken on a bus trip to Otari Reserve, where New Zealand native plants and flowers were on a beautiful spring display. Our members really enjoy these outings. The grounds are wheelchair friendly and elderly walkers are able to walk around the displays.

This month I wish to continue telling you about our holiday around the South Island. In last month's newsletter we had reached Fox Glacier. We had stayed there the night; in fact we were to stay two nights. At Fox Glacier is the beautiful Lake Matheson. Enid walked to the top of the Lake. I was unable to although I was able to walk to the beginning of the lake. It is a beautiful lake and is most photographed. From visiting the lake we went to look at the Fox Glacier. Enid climbed ahead of me to the best view of the glacier and to her surprise I climbed up the trail after her. It was a steep climb but I was determined to get up there to have a look at the wonderful view. A few miles further on over a very wintry and hilly road to Franz Joseph glacier. Both glaciers have receded over the years but they are still a beautiful site.

From the glacier areas we continued up the west coast stopping at the many lakes for a coffee or to take photographs. We stopped also at the town of Hokitika, which is famous for the annual Wild Food Festival where you can taste such delicacies as Hu Hu Grubs, unmentionable parts of sheep, etc. Hokitika is also well known for its active craft markets and glass blowing and such. A few miles

past Hokitika is the town of Greymouth where we stayed the night. The West Coast is known for its heavy rain and we awoke the following morning to a real West Coast downpour. It continued to rain hard until about the middle of the day. By the time we had reached the town of Collingwood, our destination for this day, the sun was out again.

In the next newsletter I hope to finish the story of our journey around the South Island.



Anticoagulant and Antiplatelet Agents Used in Stroke

By Joe Flasher

An important issue following an ischemic stroke is to find out why the stroke occurred and prevent another. Your doctor may recommend using medications to help reduce your risk of having another transient ischemic attack (TIA) or stroke. Drugs that decrease the likelihood of ischemic stroke include anticoagulants and anti-platelet agents.

Anti-platelet drugs make your cells less "sticky" and less likely to clot. Platelets are cells in the blood that initiate clots. The most frequently used anti-platelet medication is aspirin. Your doctor may recommend a dose from 81 mg. (baby aspirin) to 325 mg. Some aspirin are coated to not dissolve in the stomach but rather the small intestine and thereby, preventing the stomach problems seen with aspirin. Whether you use a brand name such as Bayer, Aspirin, or Ecotrin is a matter of personal preference. Your doctor may consider prescribing Aggrenox which is a combination of low-dose aspirin and Dipyridamole which is another anticoagulant to reduce blood clotting.

If aspirin doesn't prevent TIA's or you can't take aspirin, your doctor may prescribe another anti-platelet drug such as Clopidogrel (Plavix) or Ticlopidine (Ticlid). There are other drugs used but these are the ones most commonly prescribed.

Anticoagulants affect the clotting system in a different manner than do anti-platelet medications. These drugs include Heparin and Warfarin (Coumadin). Heparin is a fast acting drug and is used over a short period of time in the hospital. Slower acting Warfarin is used over a longer time frame. These drugs have a profound affect on blood clotting and therefore require that you work with your doctor in monitoring their use.

There are many things to be aware of when taking anticoagulants. You must tell other doctors or dentists that you are taking anticoagulants. Never take aspirin unless your doctor tells you to. You must discuss with your doctor the medications you are taking before taking any other medicine such as vitamins, cold medicine, sleeping pills or antibiotics. Make sure your family knows how you take them and carry medical ID with you at all times.

If you take anticoagulants as they are prescribed for you, normally you will not have many problems but you should let your doctor know if any of the following occur:

- Your urine turns pink or red.
- Your stools turn red, dark brown or black.
- You bleed more than normal when you are menstruating.
- Your gums bleed frequently.
- You have a very bad headache or stomach pain that doesn't go away.
- You get sick or you feel faint or dizzy.
- You often find unexplainable bruises or blood blisters on your body.

Once again, whether you take brand names of the above drugs or the generics it does not matter. However, you don't want to be switching back and forth between brand and generics. Stay with whatever brand you start out with and your blood levels will be more regular and predictable. Take the brand that is most economical and agrees with your body.



Pets for Stroke Survivors

By Lin Wisman

I was sitting at my computer the other day when my cat Cleopatra jumped on my lap. In her opinion it was time for me to quit working and give her my full attention. I was busy. So I gently put her down on the floor. She, of course, loudly protested. But, after a few minutes she walked over to a chair, jumped on it and proceeded to take a nap.

I got to thinking after I finished what I was working on, maybe I shouldn't have been so quick to put her on the floor. After all she gives me a lot of attention and pleasure. Why shouldn't I do the same for her? Now don't get me wrong. I do give her a lot of attention. However, I always want to give on my timeline, which does not always coincide with hers.

Having a pet is a responsibility, but it has great rewards. Cleo is always there for me. She gives me lots of pleasure. I enjoy watching her play. I enjoy brushing her. She enjoys being brushed and enjoys it when I take time to play.

There are studies, which say that interacting with a pet is good for both your health and the pets. It has been proven, for example, that interaction with a pet can lower your blood pressure. (I would not recommend substituting a pet for blood pressure medication, but the pet won't do any harm.)

Taking care of a pet expands the stroke survivor's responsibilities. It also forces them outside of their own problems. The pet's care can become a focus. She has to be feed each day. Her water bowl must be changed. Dishes must be washed. Messes cleaned up. In the case of a cat, the litter box policed.

Some jobs, which are simple for able-bodied people, may prove difficult for the stroke survivor. I have found some ways around obstacles. For example, her food and water are in my bathroom. That way I can change the water without having to carry it. It would be difficult for me to carry a small container of water even a few feet. I bought an electronic litter box. Twice a week I have to empty the waste container and every six weeks the litter has to be replaced. The box cuts back the time and energy I have to spend. The every six-week chore is a big job. I discovered that purchasing expensive litter means less cleaning. (With other litters I had to clean every four weeks rather than six.) Less litter is used so I suspect the actual cash layout is about the same.

I brush her each day, which she really enjoys. This also means getting rid of cat hair. This eliminates many hairballs and therefore there are fewer messes to clean up. I bought a small basket to place her toys in. That way they can be found (most of the time) and everyone knows that when they find a toy on the floor it can be picked up and placed in the basket. There are some toys, which she is able to get out of the basket on her own. Others take the assistance of someone with hands.

Cleo is great fun. She also is great comfort. When I am not feeling well, she jumps up and takes a nap lying on my stomach. Not only do I enjoy her 101-degree heat, but also I just enjoy having her close by. She really tries to please. That adds to the enjoyment.

I would recommend that if you are looking for a pet some care be taken. Methods for procuring depend on the pet you have in mind and where you live. Are you only interested in a pure bred? What about a mixed breed? Do you want an adult or a puppy or kitten? Should you use an agency or the want ads? Do the research and know what you want ahead of time.

Cleo is a rescued cat. She was estimated to be 1 - 2 years old when she came to live with me. That means I avoided the kitten stage which is cute but has it own unique problems. I obtained her through an organization that only deals with rescued animals. I paid a fee, but it insured that she was spayed, healthy and had all her shots. I decided to get a cat partly because I would have a difficult time walking a dog because of poor balance. For some people walking a dog is just what they need to encourage walking. And don't forget the option of fish - they make fewer messes. The disadvantage is that they are hard to cuddle.

I would definitely recommend a pet for the stroke survivor. Just be sure to plan how you or a family member will care for its needs. The pet will give far more than it takes.



Poem
by Jeanie Hiatt

My life changed over night,
Forever, it seems.
Change is not bad when
You hold on to your dreams.

One of my dreams is
I will walk again.
Better then the day before.
You hold on to your gains.

Two of my dreams are,
I will truly sing
With words of prayer.
You hold on to angels' wings.

My God promises to me
A plan, so it seems.
You see He is faithful,
I'm holding on to my dreams.

Cardiovascular Disease website of the America Heart Association

This month we are featuring the Cardiovascular Disease website of the America Heart Association. Located at <http://www.americanheart.org/presenter.jhtml?identifier=1200011>, this site is devoted to education. Come here to learn more about Heart issues. Warning signs for both heart attack and stroke are listed.

Cardiovascular disease is named public enemy number one. This site helps individuals by giving data that is not widely known. They announce the launch of a US nationwide campaign, Go Red for Women, to raise awareness of heart disease for women.

Life style changes are recommended and questions to ask your doctor are included. An online forum is also available. Ecards, screen savers and wallpaper are included.

There is an opportunity to sign up online for several programs free of charge. You can choose a program, which will provide you with regular additional information. There is also a 12-week exercise program, Choice To Move. The instructions are online. Although created with woman in mind, men are also encouraged to participate. Stroke and heart attack survivors are also encouraged to join.

This site is helpful for those who want more information. It may also prove an appropriate location to share experiences and learn from others.

WEBSITE REVIEWER NEEDED.

Are you interested in writing for StrokeNet? The position of Website Reviewer is open. The reviewer is responsible for choosing a website to review each month and to write the review. Please contact the editor, Lin Wisman, Lwisman@strokenet.biz if you are interested.



Biography: Jean Kirshenbaum

It was the Saturday of Memorial Day Weekend and we had gone to the movies.

When we came home, I fell asleep quickly, and in a few minutes I woke up with a bad case of the hiccups. I asked Gary, my significant other at that time, to get me some sugar, which has cured my hiccups in the past.

"I can't understand you; you're slurring your words." he said. I repeated it, yet he still didn't know what I meant. He also noted that I had a severe droop on the left side of my face, announcing, "I think you're having a stroke," he said. "I'm going to call 911."

"Don't be ridiculous, I'm just groggy from sleeping," I insisted, thinking to myself that he must be losing his mind; after all, I was just 55. "If you call 911, I'm never speaking to you again," I hollered. That he understood. He hollered back: "If I don't call 911, you may never speak to anyone again!"

I tried to get out of bed, but I couldn't stand and fell to the floor. That's when I realized he might be right. He put me back into bed, called 911 and we waited. The paramedics arrived in just a few minutes and took my vital signs. I felt fine. There I was, lying in my leopard print nylon nightgown, being lifted onto a gurney by two strong young people. We directed them to take me to Abington's emergency room, about 25 minutes away at normal speed. Although I had had a horrendously painful headache for the prior three days—worse than any migraine I had ever suffered, I felt just fine physically. But I was beginning to get scared.

It was after midnight when we reached the ER. The staff contacted the neurologist on call, Dr. James Cook, who, it seemed to me, was there in a flash. In the meantime, I went to radiology for a series of tests, including a CAT scan, which showed that I had had a stroke. When I asked Dr. Cook if the stroke were mild or severe, without hesitation he answered, "Severe." (Now, of course, I knew Gary was right.) There was damage to two thirds of the right hemisphere of my brain. After explaining the risks, Dr. Cook administered Tissue Plasminogen Activator (TPA). Amazingly, my symptoms disappeared. I was then admitted to the intensive care unit, where in the morning I suffered another stroke, and then spent the next 5

days being monitored. I also learned that the stroke had been precipitated by a dissection of my right carotid artery -- usually a fatal event.

Clearly, I probably wouldn't be alive to tell this story if Gary had not been familiar with the symptoms of a stroke. And if the hospital didn't have a stroke center capable of administering TPA and dealing with the event on an emergency basis. I consider myself one of the lucky ones. Although the stroke has left me with fatigue and low energy, I am back on the tennis court and leading a near-normal life. Not knowing what the future might hold for me (would I end up an invalid from a second stroke?), I suggested to Gary that he may want to move on. He wouldn't hear of it. Four months later, after being together for 12 years, Gary and I were married in a small wedding at our home.

This article was first published in "Touching Your Life," a publication of Abington Memorial Hospital, Abington, PA.



Biography: Dave Hinds

My name is Dave Hinds. I'm a 50-year-old man. I have been married for 28 great years to the love of my life, Nancy, and looking forward to

the next 28.

I had a major stroke in November 2000 that nearly took my life. It was a major bleed in the brain. I was in a coma on and off, for about two weeks. It was inoperable and the only thing they could do was to put a tube from my brain to my stomach so that if it ever happened again, the fluid buildup in

my brain would enter the tube, pass through my stomach, and dissipate.

The support and loving care I received, and still receive, from my wife, Nancy, Kyle, my nephew, and others, made all the difference to my physical and mental challenges. Thank god I have all of my cognitive skills intact, and I feel great but for the spasticity affecting my left arm and leg.

I can't begin to explain how important a good support team is. I have the best in my wife, Nancy, and in my friends in the Worldwide Dreambuilders business management group. This team has helped my wife and I continue in our pursuit of our dreams and goals for our lives and nothing puts a smile on my face, and a fire under my feet like a dream.

Nancy and my WWDB friends taught me that God never gives you more than you can bear and a winner is one that may fall a thousand times but always gets back up and keeps moving toward that goal and that dream.

Thank you again, Nancy, for sticking by me through the peaks and valleys. I couldn't possibly love you more. And thank you Marshall and all my upline and downline for the example of excellence you set and walk and for allowing me to walk with you.

If anyone would like to hear more of my story, or more about this great business that molds winners in life, contact me at 714-522-8929 or hindsr@wwdb.org

The Stroke Network is a registered 501(3)c non-profit organization. We are an on-line stroke support organization and is available to everyone worldwide. Since 1996 we have provided stroke support and information to nearly 10,000 people and to thousands of visitors to the site. The Stroke Network is the homepage for a network of several other smaller web sites owned by The Stroke Network Inc

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