

Tim Omundson:

The day I actually had the stroke, I was in an airport flying, trying to get back to LA. At the moment I was actually in the restroom and I was trying to screw a cap onto a bottle of water with my left hand, and I noticed then that my left hand cramped up and it just wouldn't move. My left leg collapsed out from under me and I was down on the ground. Two guys in the restroom helped me stand up. Within seconds I collapsed again. The next thing I know, I was out in the waiting area sitting in a chair. So these guys obviously got me out there.

Tim Omundson:

So I was sitting in a chair in the gate, and I knew I was in the wrong gate area, and that my gate was actually to the left. So I kept trying to stand up and walk to the left. But every time I'd take a step, my leg wouldn't hold me and I just kept collapsing. I think about nine times I went through that little dance of standing up and walking, and people hanging over me and shouting. Eventually I think some paramedics were in the airport. I just remember questions of saying my name, and what year it was, and who the president was and where I was. Well, very quickly they got me to a great hospital in Tampa, Florida.

Tim Omundson:

My family flew in. I eventually had a craniectomy, it's where they took off half my skull so my brain could swell. Like it does. Then I was in that ICU for weeks before I was eventually flown out to California, where I began my rehab in a hospital there in Los Angeles.

Speaker 2:

The American Stroke Association is proud to be a relentless force on a mission for longer, healthier lives. In our pursuit of that mission, we're having some amazing conversations along the way. These are the voices of the relentless.

Carey Pena:

You just heard a powerful story directly from stroke survivor Tim Omundson, who knows firsthand what it means to overcome. Although stroke survivors can continue to make progress in their recovery for years following their stroke, rehabilitation during the first three months is especially critical. This period is considered The Golden Time, when neuro-plasticity enables the brain to adjust to the damage that's been done, and to learn new ways of doing things.

Carey Pena:

Unfortunately, during the COVID-19 pandemic, recent stroke patients may be going without rehab during this important time, and other survivors may also be foregoing helpful therapy. This podcast focuses on questions that stroke survivors and their families may have about rehabilitation during this pandemic.

Carey Pena:

Hi everyone, I'm Carey Pena. Here's more now about Tim's journey. Tim Omundson is an actor known for his supporting roles such as Sean Potter on the CBS television series Judging Amy, Eli on the syndicated series Xena: Warrior Princess, Kane in Supernatural, and more.

Carey Pena:

In late April 2017, he suffered a major stroke. He spent weeks in the intensive care unit in Tampa, and later was moved to a rehab hospital back in Los Angeles for intensive physical therapy. He then moved to a residential living facility where he relearned independent living skills.

Carey Pena:

Tim's latest role is as Gregory, the neighbor on the hit show *This Is Us*, who is recovering from a stroke. And releasing on July 15th, Tim stars in *Psych 2: Lassie Come Home*, in which his character will also be recovering from a stroke.

Carey Pena:

Tim, thank you so much for joining us today.

Tim Omundson:

It's my pleasure. Thank you.

Carey Pena:

It's a pleasure to speak with you, sir, and I'm so glad that you are doing well and able to share this story of inspiration. Was it hard for you to come to grips with the reality of your situation? That must have been so shocking.

Tim Omundson:

It was shocking. I always think ignorance is bliss because I didn't quite know, until I was really living in it, how bad it was. It was a massive stroke. It took out my left leg, my left hand and arm. And through the whole process, again, I didn't really know anything about stroke or recovering. I just knew that I couldn't really move or walk, and right from the beginning, my attitude was kind of like, well that sucks that happened. Nothing I can do about it now, other than... Actually the only thing I could do about it, I knew was to continue to move forward. And right from the get go I said that a pity party wasn't going to help me get better. So I kept going back to the line from *Shawshank Redemption* of, get busy living or get busy dying. That was my mantra through my whole recovery process.

Carey Pena:

You just quoted one of my absolute favorite lines from any movie ever.

Tim Omundson:

It's a great one.

Carey Pena:

I love you even more now, Tim. Can you take us through the process? I mean, you're so inspiring. You had to relearn a lot. Can you talk to us about that process, and what has been the biggest struggle in that regard?

Tim Omundson:

The biggest struggle still is the pace of my walk. I'm continually trying to strengthen my walk and make it faster and stronger and have more stamina, so I can go longer distances. Then my eyes, it was also affected by the stroke. It affected the optical nerve. So I've got a bit of a vision break, the left side of my

peripheral vision. So I've had to relearn a lot of things that constantly scan it left. I had what's called a left side neglect where I would basically forget that my left side existed.

Tim Omundson:

So I went from the California Rehab Institute in Los Angeles to, eventually I was moved to this residential facility in Encino. I likened it to a halfway house for people with brain injuries. And they would take me out grocery shopping, then I'd have to come back and try and cook my own meals and navigate around the kitchen and do laundry and things like that. It was a very specific day when I went from, I know I was in a wheelchair for a long time, but I was finally cleared to be able to stand up at the kitchen counter and brush my own teeth without someone standing right next to me. I just remember what a big day that was. My journey has been full of little baby steps like that.

Carey Pena:

Tim, you have obviously been relentless in pursuing rehabilitation since your stroke three years ago. So what was your initial rehabilitation regimen? Can you tell us about that?

Tim Omundson:

In the first hospital I was in, I remember I would have physical therapy pretty much every day. They would come get me the wheelchair and roll me down to the physical therapy gym, where you're strapped in this frame on wheels, and you could slowly start manipulating your legs, or they would help me manipulate my legs to move down the hallway. So it was really about just trying to get my legs moving again. And then at one point they used electrotherapy on a bike. So as the pedals would move forward, the electrodes would fire and fire my muscles, just to start rebuilding that pathway to train my muscles, how they're supposed to work. And now the ongoing therapy's still, I'm back at almost on a daily basis now that it's reopened, daily physical occupational therapy work on my arm, a lot of cognitive therapy and speech therapy.

Carey Pena:

Let's talk more about how you have been able to continue your rehab during the COVID pandemic. Have you been doing some virtually?

Tim Omundson:

When the first lockdown happened, I was mostly doing teletherapy with my regular therapists. They knew me and knew what I could do. We would set up a little gym in my house. And walking, I could walk along this side of my couch to hang on to that if I needed to. And there's various exercises I was physically capable of doing. So even if I'm not, there's exercises for my legs I can still do at the house by myself. I have a treadmill here. So I'm trying to walk every day, and just an ongoing stamina building and muscle building, or just trying to really work that neuroplasticity as much as I can.

Carey Pena:

How are you staying positive?

Tim Omundson:

That's always the tough one. I think the main thing is I have two daughters that I really try and... We sat them down when this happened, and it didn't just happen to me. It happened to my entire family. My

wife, Alison has been a huge part of my recovery in her support, and is now my main caregiver, which has got to be incredibly difficult.

Tim Omundson:

So we set our girls down right when this happened and said, look, we don't know how this happened, but hopefully we can try and find a lesson of this, which is bad things happen to people, and life's going to throw you a curve ball, but you don't let it define you. And the message is to pick yourself up and keep moving forward. So I really try and stay positive for them, so they're seeing me always trying to move forward.

Tim Omundson:

But yeah, sometimes I do get down. I was lucky to have a bit of psychotherapy early on. There was counseling at my clinic. I was raised by people who didn't complain, and I just always keep in mind how much worse it could be. I mean, I have friends that are so much sicker than me in various ways. And I have friends who have gone through cancer and even just much more horrible diseases than that. So I know it could always be worse. The fact that I can still speak and I didn't lose my memories was really something I would always gravitate towards. And there's a lot of things I can't do, but I try and focus on what I can do. And getting back to work was a huge help in that.

Carey Pena:

I want to talk to you a little bit about that before we bring on our doctor expert for the show. Your career has continued to flourish beautifully, and you've been portraying stroke survivors, a big acting role. So can you tell us about the roles and why this is so important to you?

Tim Omundson:

The most important thing, and for me to be able to get back to work, because again, like I said, my kids, and for them to see that I'm not defined of sitting around in a wheelchair, I'm still able to do what I've always done.

Tim Omundson:

I've been a professional actor since, I think I was 21 years old. So I've been doing it a long time, and really just trying to get back to work. And these roles, playing the stroke survivor and bring awareness to stroke survival and recovery was hugely important to me. In fact, I was talking to my neurologist last week about it and he said how under-represented stroke survivors are on camera. We see a lot of cancer. We see a lot of heart attacks and other things. We rarely see stroke survival portrayed on TV.

Tim Omundson:

So I was just very lucky that I happen to work for people who were incredibly supportive and still really rallied around me, Dan Fogelman being one of them. He created This Is Us, and Dan and I had worked on a show called Gallavant before that. So he had said to me that as soon as I was physically able, he was going to try and find me something on This Is Us. And honestly, I thought, I can't imagine that ever happening. Well, maybe I could be a guy in an office in a wheelchair, never thinking that would be ambulatory or actually acting and doing scenes on the show with other actors. And then sure enough, one day he texted me and said, I think we're ready. Or I hear you're physically ready. And I'm thinking about writing a guy deep in recovery from a stroke, so that I can take care of any of the issues of mobility. And I'm just incredibly lucky that I had people around me like that.

Tim Omundson:

And then Psych 2: Lassie Come Home. So Psych was a show that's on for eight years, has a really lovely fan base. The actors and creatives on that show are dear friends of mine and completely rallied around me. The first movie they did, our creators spent 70 hours hold up in a room together, rewriting the entire movie so I could be in the first one. And then once as I continued to get stronger, they wrote the sequel Psych 2. They named it Lassie and my character is called Lassie on there. So it's Psych 2: Lassie Come Home. And the whole movie is really about my recovery. My character gets shot and has a stroke on the operating table. So the movie takes place in a recovery center, not unlike where I was living, doing my independent living skill stuff. And I could not have even imagined having the support of a group like that. My cast and my crew, in fact most of my original crew from the series came back for the movie, which was incredibly emotional for all of us. So I'm blessed that I'm surrounded by amazing support.

Carey Pena:

That is a huge part of the journey. And Tim, I can't thank you enough for all you're doing to inspire people to continue moving forward. And thank you so much for joining us for this interview today.

Carey Pena:

I do want to bring in now our expert, Dr. Alyssa Charbonneau. She was appointed as chief medical officer at Encompass Health in June of 2015. Prior to that, she served as medical director at New England Rehabilitation Hospital in Portland, Maine. Dr. Charbonneau received her doctor of osteopathic medicine from New York College of Osteopathic Medicine. She is board certified by the American Board of Physical Medicine and Rehabilitation. Doctor, thank you very much for being with us.

Alyssa Charbonneau:

Thank you for having me, and what an inspirational story we just heard from Timothy. And he's just obviously done an amazing job with his fortitude and continued rehabilitation. And I wish him the best of luck.

Tim Omundson:

Thank you very, very much.

Carey Pena:

And I would love for you to react, we're going to dive in here. I have a lot to ask you about, but I would first just love to get your thoughts on how important it is to see him on TV and in the movies, as a stroke survivor. What kind of inspiration does that lend to thousands of people across the country and the world?

Alyssa Charbonneau:

Exactly. As Timothy explained so articulately, many of our especially younger patients who are of working age, who have a stroke, their identity is really tied up in their jobs and their occupation, or things that they enjoyed doing before. And those are the goals that we set with them in rehabilitation when we start out after a stroke, is what are your goals? What would you like to accomplish in rehabilitation? And for a lot of people, it's getting back to those things that they love, and for many people getting back to work. And I think setting that example as an actor who is not only really

portraying a character who's had a stroke, but is actually in real life still recovering from a stroke, is incredibly inspirational. And I'm sure it resonates with, as you said, thousands of people that have the opportunity to see Timothy's work.

Carey Pena:

And doctor, you have such a long and distinguished career specifically focused on rehabilitation and helping people live the best possible life. So I want to ask you first, why is rehabilitation as soon as possible after a stroke important to a survivor's recovery?

Alyssa Charbonneau:

Well, one of the things that we know about recovery from a stroke is that there is a critical period of neuroplasticity, which is the brain's ability to create new connections where there has been damage from a stroke. And that the early period after a stroke is really, really crucial for helping the brain to establish those connections again. And by repetition and doing things over and over again in rehabilitation, that's how we create these new pathways for the brain to follow. So because of that, it's really very important for stroke survivors to get into rehabilitation as soon as possible. And in some cases, we are able to even start doing rehabilitation in the acute hospital, even in the intensive care unit for patients who have had more severe strokes. And the literature really has borne out that the earlier you start with that intervention for rehabilitation, the better the functional outcomes are in the longterm, and the reduced mortality and morbidity because of that as well.

Carey Pena:

Stroke patients and their families may be understandably concerned about going to an inpatient rehabilitation facility, or a skilled nursing facility during this time. Can you talk about how patients are being kept safe at these types of facilities right now?

Alyssa Charbonneau:

Yes, absolutely. So one of the phenomena that we've seen as a result of the COVID pandemic is a reduced number of patients with stroke in the acute care hospitals. Now we know that obviously people are still having strokes, but what we think is happening is that people are avoiding going to the emergency room, or going to rehabilitation centers, because of COVID and their fear of catching the pandemic.

Alyssa Charbonneau:

So what we have done is worked very closely with our hospitals to make sure that we are following the CDC guidelines for reducing the risk of spreading the virus. We have reduced visitation to primary caregivers who need training to get a patient home after their rehabilitation. We also are screening anyone who enters the hospital. So whether that is a patient, a visitor, a vendor, or our staff, everyone is screened daily in terms of looking for symptoms of COVID, checking temperatures daily, and keeping a log of that. And we also are very diligent in terms of how we are cleaning our equipment and taking care of patients who need to be on isolation precautions so that they are not interacting or coming into contact with other patients. We have trained our staff in terms of infection control processes and procedures, so that we are reducing the risk of spreading the virus from staff to other patients. So those are just some of the examples.

Carey Pena:

Well, that's really comprehensive. Thank you for sharing all of that. If you could too, just tailing off of that answer, what kind of questions and resources should patients or family members ask when choosing a safe high quality rehab facility, especially since they're most likely not able to tour in advance?

Alyssa Charbonneau:

Yeah, so that's a great question. And the American Stroke Association has some wonderful resources for patients and their families who are looking for advice in choosing a rehabilitation setting. And a couple of those guides are called Life After Stroke guide, and the Making Rehabilitation Decisions guide, and those guides are available on the American Stroke Association website, which is stroke.org.

Alyssa Charbonneau:

And in addition to that, even though you may not be able to tour a facility, you can certainly ask questions, like what special precautions are you taking in your rehabilitation hospital to keep patients safe from COVID, and see what they are doing and how they answer that question. Also, are they cohorting, or putting patients with COVID-19 or patients with symptoms of COVID-19 in a particular unit or a separate wing of the hospital? How are they managing that to reduce the risk of infection? And also, we want to know how are they managing to keep their families connected with patients in rehabilitation?

Alyssa Charbonneau:

As Tim pointed out, family support is crucial in rehabilitation. And especially for patients who are recovering from something as significant as a stroke, and keeping them separated, not able to see their loved ones for a period of weeks while they're getting rehabilitation can have a very deleterious effect. So how are they compensating for that using technology like Zoom, or other means of making sure that patients can still be in contact and see their families, even if it's virtual? We have had some hospitals who are one level hospitals, where the families can come to the window of the patient's room and bring their pets and their grandchildren to see the patients through the window, basically. And that's been very uplifting for patients, and something that they really enjoy.

Alyssa Charbonneau:

So asking those kinds of questions and seeing what answers you get will really help you decide whether you're comfortable with your loved one going to that particular program.

Carey Pena:

How frequently are you testing the patients and staff for coronavirus?

Alyssa Charbonneau:

It's very variable right now, as you know, and I've been heavily involved with dealing with COVID-19 now since February. So the months are just going by. And as you know, it's a fluid situation. What's happening in one area of the country could be very different than what's happening in another area of the country. We are working with our local Departments of Health to make sure that they understand what we do in our rehabilitation hospitals, and making sure that we comply with their recommendations and the CDC recommendations. So when testing is done, the testing needs to be done for a good reason, and with an understanding of what the testing results mean. So routine testing is really not helpful on a regular basis, unless you're having an outbreak of the virus in your hospital and you need to

get a snapshot of what's going on in the facility at that time. Other than that, we are testing patients and staff when they develop symptoms, or when they have an exposure to someone who has tested positive.

Carey Pena:

Doctor, are you keeping patients diagnosed with, or with symptoms of COVID separate from other patients?

Alyssa Charbonneau:

Yes, we do. We have a range for patients who have COVID-19 or who are recovering from COVID-19 to be isolated in a different section of our hospital, or sometimes we've created a COVID-19 unit depending on the need in that particular area of the country, and what kind of patients we're getting referrals on from the acute hospital.

Carey Pena:

Is the data about patients and staff diagnosed with COVID or deaths from COVID made publicly available? I know a lot of folks wonder about that, if the data's kept private.

Alyssa Charbonneau:

Obviously there are HIPAA concerns with sharing that kind of data. We do not hide when we have a positive patient or staff in our hospital, but obviously we can't share specific details and we try to respect people's privacy with regard to that.

Carey Pena:

Let's talk about the emotional toll that this is taking, the pandemic on everyone in their own day to day life, but especially someone like Tim, who's going through a very difficult rehabilitation journey. What kind of emotional support do you offer?

Alyssa Charbonneau:

We are definitely looking into technology to help arrange for families to maintain contact with our patients. FaceTime or Zoom or WebEx platforms have enabled families to stay in touch and be in [inaudible 00:23:00]. We also permit families to bring articles from home that may make a patient feel more connected and comfortable, like photos or a favorite blanket even. Also having friends send cards and flowers to decorate the space is very helpful.

Alyssa Charbonneau:

And in terms of clinical support, obviously we can arrange for patients to have supportive counseling. And now with the increased availability of telehealth, we've been able to offer telehealth counseling and telehealth psychological support in certain cases where it's indicated and that's available as well. So that's really a great way to bring that resource into the hospital, despite what's going on with the pandemic.

Carey Pena:

Well, thank you so much for bringing that up, because telehealth is such a hot topic. So I want to just quickly touch on this. Telerehab, or virtual rehab, was being studied prior to the COVID-19 pandemic,

but its use is increasing during this public health crisis. So what should stroke patients and their families know about telerehab?

Alyssa Charbonneau:

There have been a few small studies about telerehab so far. So I think the jury is still out on how effective this is going to be for stroke survivors. While the initial results have been promising, I think more research is needed in that area. And telerehab is not really a great alternative for more intensive rehabilitation, for patients who really need that close contact, and that one-on-one work with a therapist. However, during this time of COVID, it is available for patients and their therapists to use telerehab out of necessity. And it can be helpful for patients who maybe don't have another alternative. Especially more in the outpatient arena, that is something that is definitely available and being used.

Carey Pena:

And just as we round things out here, if a stroke survivor is currently receiving physical therapy, either at home or on an outpatient basis, should they continue?

Alyssa Charbonneau:

Absolutely. The best thing to do for continued recovery is to continue with your rehabilitation program, and to take the necessary precautions to protect yourself from the SARS-CoV-2 virus, which is the virus that causes COVID-19.

Alyssa Charbonneau:

Now there have been in areas of the country where there's been a substantial outbreak, some outpatient rehabilitation centers have temporarily closed. And in those cases, maybe that's where you can meet with your therapist using telerehab until those outpatient centers open again. And certainly you can continue with your rehabilitation with home exercises and home program in between your visits with your therapist. So it's very important to keep moving and keep going and trying to make progress in whatever areas you're working on as a patient, and not to take too much time away from your rehabilitation so that you don't lose ground.

Carey Pena:

Dr. Charbonneau, thank you so much for all of your insight and your compassion in sharing that with the audience today. Tim has stayed with us on the line. So just as we close things out, I would love for you to just share a final few words or thoughts with him, and for all those who are walking in similar shoes.

Alyssa Charbonneau:

So Tim, I would like to say that I think you're an inspiration. I did not know about your personal story and your journey. And I want to thank you for sharing that with us, and with the audience. And I wish you continued good luck in your acting career. And as a big fan of Psych, I look forward to seeing your continued success with that show.

Tim Omundson:

Thank you so much. That's very kind of you to say. I'm really happy that I can still be here to help spread the good word.

Tim Omundson:

Alyssa, one point I want to make. I was 47, when I had my stroke. And I had always thought, I didn't realize that stroke was something that happens to young people. So it really threw me and all my friends for quite the loop. And I'm happy that I'm still around and able to, hopefully my story can help inspire others to keep walking their walk as much as they can.

Carey Pena:

Tim, I know that you already had a pretty solid fan base before this, but you gained a bunch more fans, me for one today. So thank you so much, continued success, and the best to you and your family. Because as you said, your wife has been your rock, and that's important to point that out.

Tim Omundson:

Yeah, she definitely is.

Carey Pena:

So thank you. I wish you both all the best. So glad to be able to share such valuable information that I'm sure stroke survivors appreciate. Again, our thanks to the doctor and to Tim for sharing this time with us.

Carey Pena:

And thanks to all of you for joining us, and remember to share this entire stroke and COVID-19 series with someone who needs it. Also, please remember, wash your hands often. Stay home as much as possible. Learn more at stroke.org, or call our stroke warmline. that is 1-888-4STROKES. (888) 478-7653. I'm Carey Pena. Take good care.

Speaker 2:

Thanks for joining us and keep listening. Your next episode is on the way. Stay tuned for more stories of the relentless.