

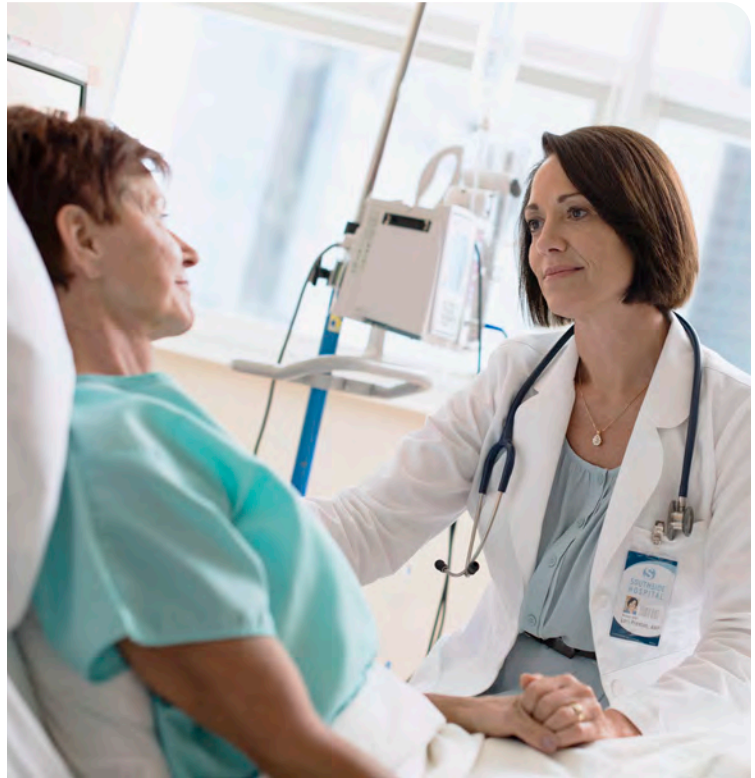


let's talk about

Complications After Stroke

Preventing complications from your stroke is a key goal of your health care team. Some complications result from injury to the brain due to the stroke. Others occur because of a change in what you're able to do — for example, being unable to move freely can lead to pressure ulcers, or “bedsores.”

Be sure to tell your health care team about any medical, emotional or functional problems you have been having since your stroke.



What are common complications of stroke?

The most common complications of stroke are:

- **Brain edema**, or swelling of the brain.
- **Pneumonia**, a lung infection that can be caused by not being able to move freely due to the stroke and by swallowing problems. Things “going down the wrong pipe” can be inhaled into the lungs, causing the infection.
- **Urinary tract infection (UTI) and/or bladder control problems**, a UTI can occur as a result from having a catheter placed to collect urine when the stroke survivor cannot control bladder function.
- **Seizures**, caused by abnormal electrical activity in the brain. These are common in survivors of larger strokes.
- **Clinical depression**, which can appear as unwanted emotional and physical reactions to the changes and losses that occur with stroke. Depression is a treatable condition and can be common after stroke and may be worse for someone who had depression before the stroke.
- **Pressure ulcers**, arise from the inability to freely move and adjust position causing continuous pressure on areas of the body, creating sores on the skin.
- **Limb contracture**, caused when muscles in the arm or leg shorten, or contract, due to inactivity or inability to move.
- **Spasticity**, or muscle contractions that create tightness and stiffness, makes the muscles very difficult to stretch out. Without treatment, muscles can freeze into an abnormal and even painful position.
- **Shoulder pain**, arising from lack of support of an arm due to weakness or paralysis. This happens when the affected arm hangs, pulling on the shoulder.
- **Deep venous thrombosis (DVT)**, or blood clots that form in veins of the legs because of the lack of movement from stroke.

(continued)



What can be done?

Your health care team can prescribe various types of treatments to help stroke complications:

- Treatment includes medical care and use of medications.
- Physical treatment involves a type of activity that may be done by you or by health care professionals. Types of treatment may include:
 - Range-of-motion exercises and physical therapy to avoid limb contracture, shoulder pain and blood clots.
 - Frequent turning while in bed to prevent pressure sores.
 - Proper nutrition.
 - Bladder training programs for bladder control problems.
- Swallowing therapy, respiratory therapy, and deep-breathing exercises can help decrease swallowing problems or breathing difficulty.
- Mental health treatment can include counseling or talk therapy and medication for depression. You also may be referred to a local stroke support group.



HOW CAN I LEARN MORE?

- 1** Call 1-888-4-STROKE (1-888-478-7653) or visit stroke.org to learn more about stroke or find local support groups.
- 2** Sign up for our monthly *Stroke Connection* e-news for stroke survivors and caregivers at StrokeConnection.org.
- 3** Connect with others who have also had an experience with stroke by joining our Support Network at stroke.org/SupportNetwork.

Do you have questions for your doctor or nurse?

Take a few minutes to write down your questions for the next time you see your health care professional.

For example:

What complications am I most at risk for?

What can I do to prevent complications?

MY QUESTIONS:

We have many other fact sheets to help you make healthier choices, manage your condition or care for a loved one. Visit stroke.org/LetsTalkAboutStroke to learn more.