



PHYSICAL EFFECTS OF STROKE

FATIGUE

Feeling extremely tired after a Stroke is very common. Those affected indicate that this may go on for quite a long time. Even young people feel fatigued for at least 6 months after a Stroke, so it is important to allow yourself plenty of time to rest and not feel bad about it.

NEGLECT

A common consequence of a Stroke affecting the **right side** of the brain is neglect. The person affected by Stroke does not take note of, or perform actions, within space to the **left** of their body midline. Neglect may be accompanied by paralysis on the left side, or may occur when there is no paralysis. The symptoms of neglect usually improve as recovery continues.

The right hemisphere of the brain is primarily concerned with the non-verbal world. The most important function of the right side of the brain is the understanding of space. We need it to find our way around, position our bodies relative to other objects, draw, read, write and build things. Since every Stroke, and every person, is different, neglect can vary in type and severity. It may also occur in those whose Stroke occurs on the left side of the Brain.

MOVEMENT

Effect on movement depends on the nature and severity of the Stroke, the person's age, weight and the presence of medical complications. Paralysis, muscle weakness, reduced perception of body position, and sensory awareness may occur as a result of Stroke. Consequently, rehabilitation programmes concentrate on sensory as well as movement re-education. There are many techniques involved, which vary according to the nature of the Stroke. Members of the Stroke Team, particularly the physiotherapist, will teach these techniques.

POSITION AND TRANSFERRING

Placing a paralysed limb in the correct position will assist the person to be more comfortable. Lying on one's side is a good resting or sleeping position. An affected arm should be supported on a pillow. If a leg is the problem, another pillow placed between the knees will help. Sheepskins are useful for comfort and protection. Bed covers should be loose. Do not pull a person up to a sitting position by their paralysed arm. This may cause the shoulder to dislocate. A firm mattress and attention to bed height make it easier to get in and out of bed.

PLEASE TURN OVER



Physical Effects



BALANCE, STANDING AND WALKING

Paralysis of limbs is the most visual sign of Stroke, which will cause difficulty with standing and walking. A person's balance may also be impaired by Stroke, leading to walking and standing difficulties. A person may not realise that their foot is in an awkward position when sitting or standing, or may not leave adequate space when walking around a piece of furniture.

The physiotherapist will advise the best techniques on mobility and show you, if necessary, appropriate aides, such as a frame or a four-pronged stick.

COMMUNICATION

Communication involves many parts of the brain and a Stroke can affect speaking, understanding, reading or writing. Common speech problems following Stroke may be:

Aphasia

Is a generic term describing a number of difficulties a Stroke survivor may have with communication. The extent of the Aphasia ranges from very mild to severe. However, a person with aphasia may be able to communicate their wishes through writing or gestures.

Dysarthria

Means slow or slurred speech, stemming from weakness of the muscles in the tongue or voice box.

Dysphasia

Means a person has a problem expressing or understanding speech, resulting from Stroke. They may have difficulty naming objects, finding the right words, expressing an idea in words, speaking fluently, repeating, understanding simple instructions, or following the thread of a conversation or television programme.

Reading, writing and basic mathematics skills may be impaired. Reading may also be affected by disturbances of vision, such as:

- An inability to see one half of the page.
- Eye movements resulting in inability to smoothly scan the lines on a page.

Writing may be difficult for someone with a weak arm, but they often manage by holding the pen in the other hand.

For more information, see the "What is Aphasia" or "Aphasia Facts" Information Sheets.

