



## Cognitive impairment after Stroke

Stroke symptoms often include cognitive impairment. Cognitive deficits may manifest in different ways including confusion, memory problems, decreased mental ability, impulsiveness, distractibility, impaired judgement, executive dysfunction, and anosognosia (patient's inability to recognise his/her impairment).

**Confusion** – The Stroke survivor may appear disoriented, have short term memory loss, or demonstrate bizarre or unusual behaviour. Confused patients will have problems sustaining a meaningful conversation. Sometimes a patient may appear confused but actually have Aphasia (a speech disorder where the patient can have difficulty producing or comprehending speech).

**Memory Problems** – Memory loss after a Stroke is not uncommon. It can present as an inability to learn and recall new information or remember and retrieve long term memory. Sometimes the loss is subtle, and a caregiver may not notice memory problems until the patient attempts more complicated activities of daily living. Ideas to help the Stroke patient with memory deficits, include establishing a standard daily routine, keeping frequently used items in a designated place, and making a memory notebook for important information.

**Impulsiveness** – The impulsive Stroke survivor will not think before acting and can have trouble with impulse control. Impulsiveness is most common in survivors that have experienced a frontal lobe or right brain Stroke. Safety may be compromised because the patient may try to do activities that he or she is incapable of doing (i.e. driving, cooking, walking without assistance, etc.).

PLEASE TURN OVER



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Caregivers may think that their loved one is trying to maintain independence, when in fact the patient's impulse control has been impaired. Impulsiveness can also cause inappropriate behavioural responses such as sudden anger, yelling, crying or rude remarks.

One can help the impulsive Stroke survivor by creating a safe environment and thinking ahead in terms of needs. For example, keep needed items in reach such as the phone or TV remote. Schedule regularly planned meals and toileting breaks to keep the patient from attempting to cook or go to the bathroom without assistance. Also, keep dangerous or tempting items out of sight and reach (sharp knives, matches, car keys, etc.)

**Distractibility** – After a Stroke, one may present with distractibility or decreased attention span. It may be difficult to concentrate on one subject. This can make rehabilitation challenging because attention is necessary for listening to instructions and completing rehab exercises.

**Impaired judgement** – As a result of cognitive deficits, the Stroke survivor may present with impaired judgement. It is imperative that individuals with poor problem-solving skills and impaired judgement have supervision at home to avoid injuries and accidents.

**Executive dysfunction** – Executive function consists of the ability to plan, organise, monitor one's behaviour, and stop/start tasks. When the executive system is impaired, one may present with disorganisation, inability to plan ahead, social inappropriateness, poor insight regarding their disability, and inability to correct their mistakes.

<http://www.Stroke-rehab.com/cognitive-impairment.html>