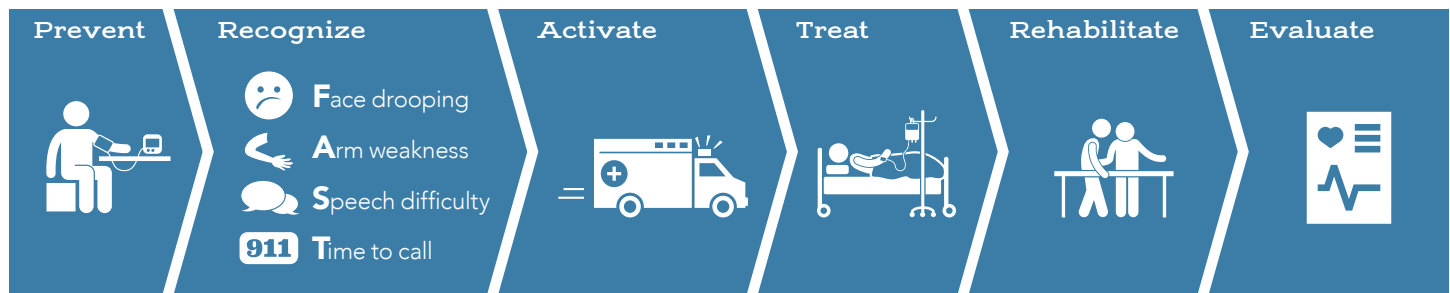


STROKE IN WASHINGTON

Stroke is the 6th leading cause of death and a leading cause of disability

STROKE SYSTEMS SAVE TIME & LIVES

Well-coordinated systems are efficient and get patients to treatment fast, saving lives, reducing disability, and lowering costs for rehabilitation and long-term care.



Patients who arrive by EMS get assessed and treated faster than those who arrive by private vehicle.

11 mins



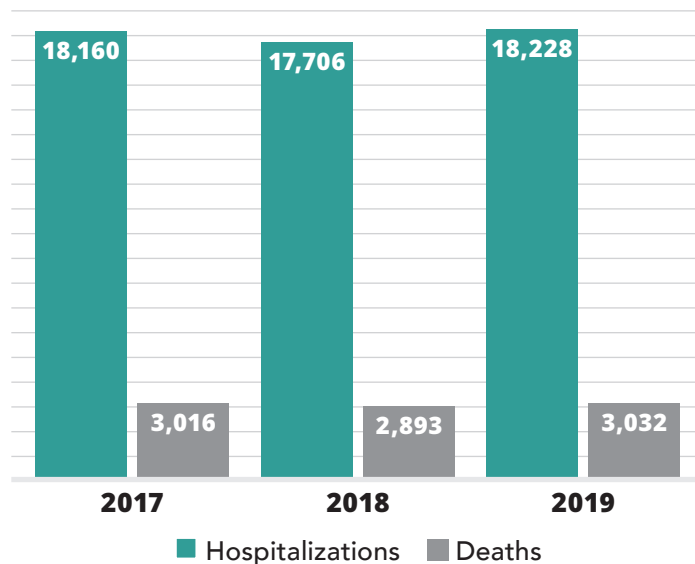
vs.

23 mins

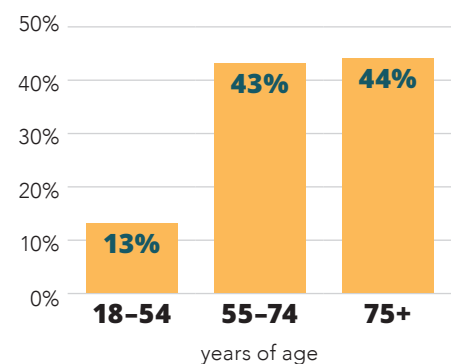


Time to CT scan

STROKE HOSPITALIZATIONS & DEATHS



2019 Hospitalizations due to Stroke



Most strokes happen to people over 60, but studies show an increase in stroke hospitalizations among younger adults, ages 18-54.

There is life after stroke!

- » Rehabilitation helps survivors regain mobility, strength, and confidence.
- » Support groups help survivors and their caregivers adjust after stroke.

STROKE IS . . .

PREVENTABLE

80% of strokes may be prevented by:

- » Managing blood pressure
- » Controlling cholesterol
- » Reducing blood sugar
- » Being active
- » Eating well
- » Maintaining a healthy weight
- » Not smoking

High blood pressure is the leading cause of stroke.

LIFE-CHANGING

Stroke can affect a person's ability to speak, see, think, walk, go to the bathroom, eat, read, drive, work, have sex, relate to others, and be independent.

It can lead to **depression, dementia, and caregiver burden.**



2 million brain cells

may be lost for every minute someone is having a stroke.

COMMON



1 in 4 people worldwide over the age of 25 will have a stroke.



Every 40 seconds someone in the U.S. has a stroke.

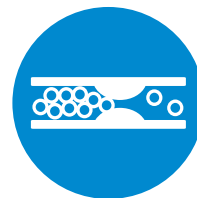
TREATABLE & TIME-CRITICAL



Fast treatment means less brain damage, better outcomes and reduced costs.



Clot-busting drug should be administered within 4.5 hours of stroke onset to reduce long-term effects from stroke.



Clot removal treatment can benefit some patients and limit disability from stroke if done within 24 hours of stroke onset.

References

- » Washington State Department of Health, Center for Health Statistics, Death Certificate Data, 2000–2019, Community Health Assessment Tool (CHAT)
- » "About Stroke," American Stroke Association, 2020, www.stroke.org/en/about-stroke
- » Comprehensive Hospital Abstract Reporting System (CHARS), Washington State Department of Health, Center for Health Statistics 2010–2019
- » Saver, J.L. (2006). *Time is brain - Quantified*. *Stroke*, 37 (1), 263-266. www.ncbi.nlm.nih.gov/pubmed/16339467
- » "American Stroke Month," American Stroke Association, 2020. www.stroke.org/en/about-the-american-stroke-association/american-stroke-month
- » American Heart Association, *Get With the Guidelines Acute Stroke Registry*, 2015-2019
- » George MG, Tong X, Bowman BA. *Prevalence of Cardiovascular Risk Factors and Strokes in Younger Adults*. *JAMA Neurol*. 2017;74(6):695–703. doi:10.1001/jamaneurol.2017.0020
- » *Global, Regional, and Country-Specific Lifetime Risks of Stroke, 1990 and 2016*. *N Engl J Med* 2018; 379:2429-2437 DOI: 10.1056/NEJMoa1804492. www.nejm.org/doi/full/10.1056/NEJMoa1804492
- » Virani SS, Alonso A, Benjamin EJ, Bittencourt MS, Callaway CW, Carson AP, et al. *Heart disease and stroke statistics—2020 update: a report from the American Heart Association*. *Circulation*. 2020;141(9):e139–e596.



DOH 346-115 May 2021

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.

This information was supported with funding from the Paul Coverdell National Acute Stroke Program from the Centers for Disease Control and Prevention.