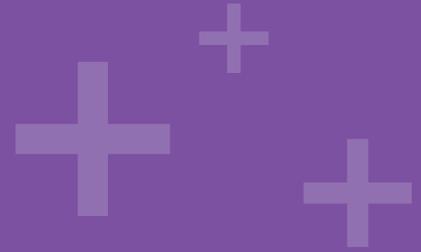




Your stay at the CVA Unit



You have recently been admitted to the CVA Unit at the Hôpital du Sacré-Cœur de Montréal, which is part of the CIUSSS du Nord-de-l'Île-de-Montréal. You will encounter a number of health-care professionals and undergo several tests. This leaflet will guide you through your stay at the hospital and make it easier for you to play an active role in your care.

1. What is a CVA?

A CVA, or cerebrovascular accident, is a sudden problem involving blood circulation to the brain. This leaves part of the brain without oxygen.

There are various types of CVA:

- Ischemic CVA: A clot blocks a blood vessel in the brain.
- Hemorrhagic CVA: A blood vessel in the brain ruptures, resulting in bleeding.

The consequences and recovery depend on several factors:

- The size, location and type of CVA;
- Your health prior to the CVA;
- Prompt medical attention;
- Early rehabilitation therapy, where indicated.

2. Who carries out the work in the CVA Unit?

Depending on your needs, you will encounter a number of health-care professionals who work as a team:

- Doctors
- Nurses
- Physiotherapists
- Occupational therapists
- Speech therapists
- Social workers
- Nutritionist

Their role is to conduct a comprehensive assessment of your health and functional ability following a CVA. This will make it possible to plan your discharge from the hospital and direct you to the appropriate services.

During your hospitalization, these health-care professionals will do the following:

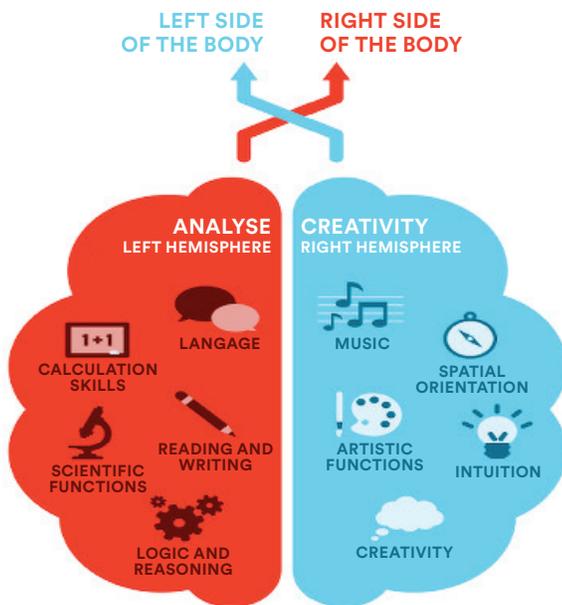
- Assess the condition of your brain;
- Stabilize your condition and provide the treatments you need;
- Answer your questions;
- Identify the possible causes of the CVA;
- Help you deal with CVA risk factors, such as high blood pressure, diabetes, cholesterol, smoking, etc.;
- Begin rehabilitation promptly (physiotherapy, occupational therapy, speech therapy, social work, clinical nutrition);
- Prepare your discharge from the hospital, taking into account your specific needs.

3. What are the potential problems?

Every CVA is different. The brain is divided into two parts that play specific roles, so a CVA may cause a sudden loss of various brain functions.

Here are some examples.

- Walking, remaining seated or standing, changing position in bed, manipulating objects, washing or making certain motions
- Swallowing
- Concentrating, remembering, being attentive, being organized or using judgment
- Feeling both sides of the body
- Recognizing seen objects
- Speaking, understanding, reading or writing
- Other problems: fatigue, reduced endurance, emotionality...



4. What are some common medical tests?

Brain scan

Radiological examination to reveal the size, location and type of CVA.

Carotid and cerebral angiogram

Completes the scan with the injection of a dye into the veins to show the arteries that leave the heart and transport blood and oxygen to the brain. This will also show a clot if there is one.

Magnetic resonance imaging (MRI)

Radiological examination that allows for a more detailed look at the cerebral structures and helps to determine the extent of any brain damage.

Doppler ultrasound scan of the carotid arteries

Test that shows the blood vessels in the neck and nape in order to reveal any plaque that may be interfering with blood circulation.

Transthoracic echocardiogram (TTE)

Test for assessing the heart's functioning and examining all of its component parts, including walls, valves and natural cavities.

Holter monitor

Device that you wear for 24 to 48 hours to record the beating of your heart. The purpose is to detect any irregularity in heart rhythm (sometimes asymptomatic) that could cause a CVA.



5. What are the main treatments for a CVA?

Cerebral thrombolysis involves the injection of medication into a vein in an attempt to break down a clot that is blocking a blood vessel in your brain.

Thrombectomy involves the removal of a clot that is blocking a blood vessel in your brain. A catheter is inserted in the groin and threaded to the brain to trap and remove the clot.

Antiplatelet medication (blood thinners) is often administered after a CVA to prevent the formation of new clots. Other medication to control high blood pressure, blood sugar levels and cholesterol is sometimes needed to prevent a new CVA.

6. Some advice for your stay in the CVA Unit

- Ask a friend or family member to bring your personal effects.

For example:

- > Eyeglasses, dentures, hearing aids, clothing, closed shoes, a toothbrush, soap...
- Participate as fully as you can in the various appointments, within the limits of your capacities and endurance.
- Notify the nurse if you leave the CVA Unit for a few minutes to go to the cafeteria or elsewhere in the hospital. This is important for adhering to rehabilitation schedules.
- If a friend or family member brings you food or gives you something to drink, check with the nurse first to see if your condition allows it.
- Sit completely upright (90°) during meals.
- Take your rest periods as scheduled.

7. Orientation after your stay in the CVA Unit

Depending on the assessment of your situation, there are a number of possibilities:

Return home:

- Without support services: If you are not experiencing consequences that interfere with your everyday functioning.
- With support services: If your home environment meets your needs, a return home with assistance may sometimes be possible. In such a case, family members must have the capacity, availability and resources to attend to your needs. In order to ensure your safety and meet specific needs, the CLSC can provide equipment on loan (portable toilet, walker, etc.). If you have specific needs for follow-up care at home (dressings, injections, physiotherapy, etc.), this care will be provided by the CLSC.

Rehabilitation programs:

There are a number of criteria for determining whether you will take part in a rehabilitation program:

- Stable health condition;
- Cooperation and motivation with respect to rehabilitation;
- Sufficient endurance;
- Learning ability and capacity for improvement (observed progress);
- Likelihood of being able to return home to live with support from your inner circle, as required.

Depending on your needs and degree of autonomy, and the assistance that is available, treatments may be provided in a rehabilitation program that is carried out:

- in-house (at a centre, where you will sleep);
- on an out-patient basis (at a centre that you will visit from home several times per week).



Long-term care centre

Some people who have experienced a CVA do not qualify for rehabilitation. In such cases, and if a return to the home is out of the question, the person must be directed to a long-term care centre, where the available services will better meet their needs.

8. Do you need more information?

A CVA can be devastating for you and your inner circle. It is important to have realistic expectations, but also not to lose hope. Do not rush things.

After your discharge from hospital, you may have some worries or require additional information. We recommend the Heart and Stroke Foundation website:

www.heartandstroke.ca

- > Your health: Information
- > Publications
 - > Resources by region
 - > Life after Stroke Program

Also, you or a member of your family may suffer from anxiety, experience a renewed loss of interest or have ongoing feelings of sadness over a prolonged period. In such a case, it would be important to contact your family doctor, CLSC staff members (if known), the liaison nurse (where applicable) or the Heart and Stroke Foundation.

In the event of a recurring CVA, call 9-1-1 right away so that you can get to the hospital as soon as possible.

Sign of stroke

Face is it drooping

Arms can you raise both

Speech is it slurred or jumbled

Time to call 9-1-1 right away

Act **F A S T** because the quicker you act, the more of the person you save.

*With permission from the Heart and Stroke Foundation