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## For Immediate Release

### FACT SHEET - STROKE & STROKE CENTERS

#### STROKE FACTS

##### What is a stroke?

Stroke is a very serious problem that develops when there is an interruption in the flow of blood to the brain. Also known as cerebrovascular accidents or "brain attacks", there are two main types of strokes. If a blood vessel is blocked by clots or other particles, it is called an ischemic stroke. If a blood vessel breaks and bleeds, it is called a hemorrhagic stroke.

Blood carries oxygen and nutrients to the brain. When blood flow to part of the brain stops, that part of the brain starts to die within minutes. The dying cells then release chemicals that can damage other cells. The effects of a stroke depend on which part of the brain is starved of blood and for how long. Because of this, it is very important that anyone showing symptoms of a stroke (see below) get medical treatment as soon as possible.

Related to strokes are episodes called transient ischemic attacks (TIAs). A TIA (often called a "mini stroke") is caused by a short interruption in blood flow to the brain. The effect, though, is only temporary, and symptoms last less than 24 hours. However, a TIA can be an important

warning sign because about one third of people who have a TIA will have a stroke in the future. Anyone who experiences a TIA should see their doctor immediately to learn about special steps (including possible medications and surgery) that can decrease the risk of a future stroke.

##### How common are strokes?

Stroke is the third leading cause of death, after coronary heart disease and cancer. Each year there are about 750,000 strokes in the US, and strokes kill over 150,000 Americans each year. Over 15% of people who have had a stroke die within 30 days, and 15-30% of people who survive a stroke are permanently disabled.

##### Who is at risk for having a stroke?

Anyone can have a stroke, but most people who have strokes are over the age of 55. Strokes affect both men and women. African Americans tend to be at highest risk, but people of all races and ethnicities suffer from strokes.

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THE PASSION TO LEAD

## How can you prevent a stroke?

There are many things you can do to reduce your risk of stroke:

- don't smoke
- keep your blood pressure under control
- stay physically active
- if you have diabetes, treat it
- eat a healthy diet that focuses on fruits, vegetables, and whole grains
- maintain a healthy weight
- keep your blood cholesterol under control
- avoid illegal drug use

## Who should be screened?

For people without symptoms, screening tests for predicting stroke are limited, but worth doing. Your doctor may do an exam to listen for partial blockage of the vessels in your neck that supply blood to your brain. If you have any symptoms of blocked blood vessels or special risk factors, your doctor may want to do other tests to study the vessels. Anyone who develops such symptoms (see below), should see a doctor immediately.

People of all ages should be periodically screened for risk factors of stroke: diabetes, high blood pressure, poor blood cholesterol levels and overweight/obesity.

For information about stroke screenings available through Overlook Hospital's Community Health department, call 908-522-5355.

## What are the symptoms of a stroke?

Sudden changes in your strength or sensation could indicate a transient ischemic attack or a stroke. If you experience any of the symptoms below, see a doctor immediately. Every minute is important when it comes to limiting damage and saving brain cells.

Symptoms of stroke:

- Sudden weakness or numbness in your face, body, arms or legs, especially if only one side is affected
- Sudden loss of vision or problems seeing in one or both eyes
- Sudden confusion, inability to speak or understand what others are saying
- Sudden dizziness, instability or inability to stand, walk or coordinate movement
- Sudden severe, unexplained headache

## STROKE CENTERS

A Comprehensive Stroke Center provides a higher level of care than a Primary Stroke Center.

### What is a Primary Stroke Center (PSC)?

Primary Stroke Centers provide initial, acute care and administer tPA and other acute therapies safely and efficiently. PSCs can admit patients if an in-patient stroke unit is on site.

A PSC must provide the following services:

- 24/7 CT scan with patients scanned within 20 minutes of arrival
- 24/7 acute stroke team that can see a patient within 15 minutes of patient arrival in ED
- Rapid lab processing
- Written protocols & order sets

(more)

- Telemetry beds
- Neurosurgical services or ability to refer to another site within two hours
- Acute care rehab services
- Community Outreach
- Tracking of patient outcomes and maintain quality improvement activities
- Designated stroke unit

**What is a Comprehensive Stroke Center (CSC)?**

Comprehensive Stroke Centers provide care for complex stroke patients and provide advanced treatments such as coils and stents in the brain. A CSC provides trained specialists in key areas, such as neurology, neurosurgery, neuroradiology, etc. A CSC provides all the capabilities of a PSC in addition to the following:

**Clinical staff**

- Vascular neurology
- Vascular neurosurgery
- Advance practice nurse
- Diagnostic neuroradiology
- Vascular surgery
- Interventional neuroradiology
- Rehabilitation physician
- Rehabilitation therapists
- Staff stroke nurse(s)

**Diagnostic capabilities**

- MRI with diffusion
- MRA
- Digital cerebral angiography
- Transcranial Doppler
- Carotid duplex ultrasound
- TTE and TEE

**Optional diagnostic capabilities**

- MR perfusion
- CT angiography
- CT perfusion
- Xenon CT
- SPECT
- PET
- MR spectroscopy

**Recommended surgical and interventional capabilities**

- Carotid endarterectomy Clipping of IC aneurysm
- Placement of ventriculostomy
- Placement of intracranial pressure transducer
- Endovascular ablation of IAs/AVMs
- Surgical evacuation of hematomas/SDHs

**Optional surgical and interventional capabilities**

- Angioplasty/stenting of extracranial/intracranial arteries
- Intra-arterial lytic therapy

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Recommended infrastructure

- Stroke unit
- Intensive care unit
- OR staffed 24/7
- IR coverage 24/7
- Stroke registry

Optional infrastructure

- Stroke clinic
- Air ambulance
- Neuroscience ICU

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