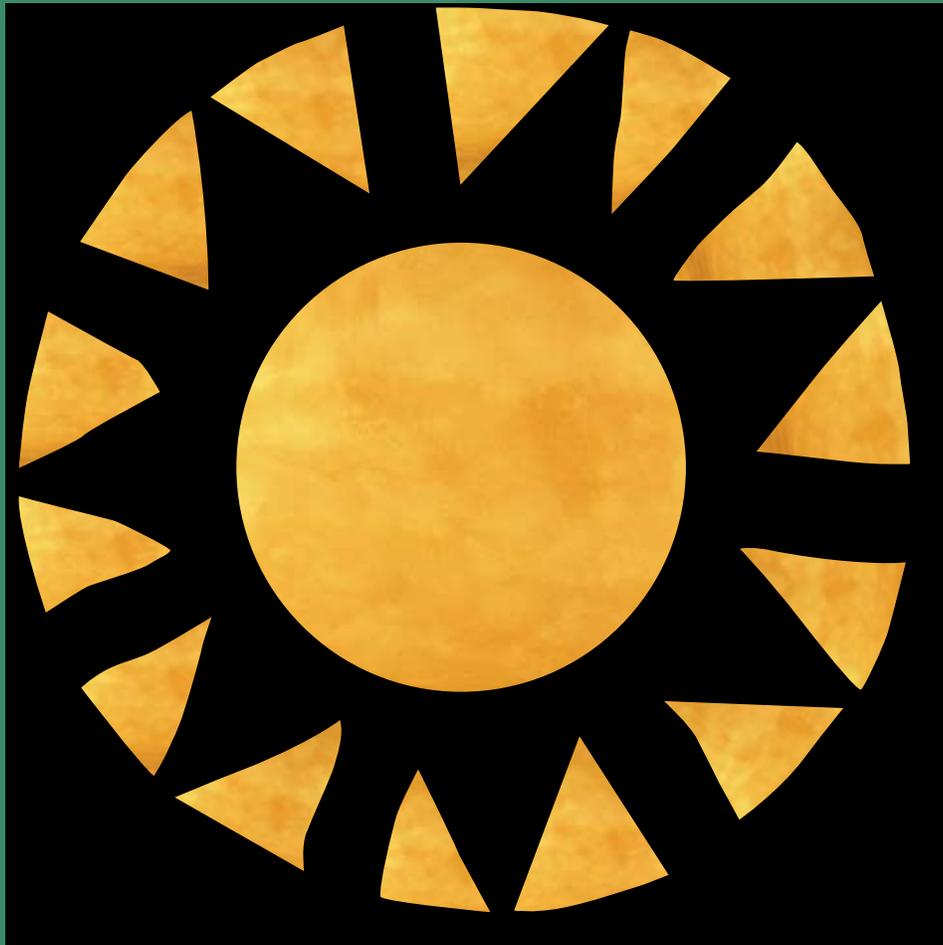




American Heart Association | American Stroke Association

POWER TO END STROKESM

You are the Power



Power To End Stroke

A Guide To Help African Americans Fight Stroke

Did you know...

The burden of stroke is greater among African Americans than in any other group. In fact, blacks have almost twice the risk of first-ever stroke compared with whites, and blacks 35–54 years old have four times the relative risk for stroke.

But there is hope. You have the power to fight stroke — and win! By following these three simple steps, you can help protect yourself against stroke.

- Reduce your stroke risk factors.
- Recognize the stroke warning signs.
- Respond quickly to a stroke emergency.

I'm Strong.

What is a stroke?

Stroke is a type of cardiovascular disease. It occurs when a blood vessel that carries oxygen and nutrients to your brain gets blocked or bursts. When that happens, the affected part of your brain doesn't get the blood it needs. In minutes, it starts to die.

The two main types of stroke are ischemic (is-KEM-ik) and hemorrhagic (hem-o-RAJ-ik). Clots that block an artery cause ischemic strokes. Ischemic stroke is the most common type, representing almost 90 percent of all strokes. Hemorrhagic, or bleeding, strokes are caused by burst blood vessels in the brain.



Prior to a stroke, many people experience a TIA (transient ischemic attack). This is a “mini-stroke” or “warning stroke.” TIAs can occur days, weeks or even months before a major stroke. TIAs occur when a blood clot temporarily clogs an artery, and part of the brain doesn’t get the blood it needs. The warning signs are the same as for stroke (see page 14); but they occur and disappear relatively quickly, usually in less than five minutes. Unlike a stroke, when a TIA occurs, the blood clot resolves itself and there’s no permanent damage.

When a stroke occurs and part of your brain dies from lack of blood flow, the part of the body it controls is affected. Strokes can cause paralysis, affect language and vision, and cause other problems.

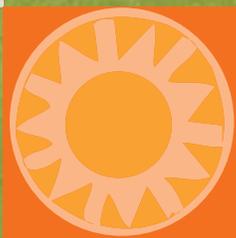
Hi!

Am I at risk for stroke?

Several factors increase the risk for stroke. The more risk factors you have, the greater your chance of having a stroke. You can’t control some factors, but you can modify, treat or control others to lower your risk.



Proud. I'm Proud.



I'm Real.

Real.

What are the risk factors I can't change?

Age

Strokes can happen to people of any age, even children — especially those with sickle cell disease. But the older you are, the greater your risk for stroke.

Sex

More men than women have a stroke each year. But at all ages more women than men die of stroke. In 2002, more than 11,000 black females and 7,800 black males died of stroke.

Family history and race

If a parent, grandparent, brother or sister has had a stroke, your risk of having one is greater. African Americans' risk for stroke is up to four times higher than for non-Hispanic whites. This is due in part to the increased rates of high blood pressure, diabetes and obesity among blacks.

Previous stroke or heart attack

If you've had a stroke, you're at a much higher risk for having another one. If you've had a heart attack, this also raises your risk for having a stroke.

Power.



What risk factors can I control or treat with my doctor's help?

You can change most of the conditions below through diet and exercise. Others may need medication. Your best defense is knowledge. Talk to your doctor to find out if you have any of these health risks. Then work together to develop a plan that's right for you.

High blood pressure

High blood pressure is the most important risk factor for stroke. It's often called the "silent killer" because it usually has **no symptoms**. It affects 40 percent of African-American men and women over age 20.

Have your blood pressure checked at least once every two years — and more often if you have a family history of high blood pressure, stroke or heart attack. Then remember your numbers. Compare your results with the chart below.

Blood Pressure (mm Hg)	Normal	Prehypertension	High
Systolic	Less than 120	120–139	140 or higher
Diastolic	Less than 80	80–89	90 or higher

If your readings are in the prehypertension or high-range areas, work with your doctor to lower your blood pressure. You may also need to take medicine. Be sure to take it as instructed. If you have side effects, talk to your doctor before you stop taking it.



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Smoking

Smoking cigarettes puts you at much greater risk for having a stroke. Constant exposure to other people's tobacco smoke also increases your risk — even if you don't smoke. If you're a woman who uses birth control pills and smokes, your risk is even higher.

The bottom line is this: If you don't smoke, don't start. If you do smoke, quit! When you stop smoking — no matter how long or how much you've smoked — your risk of stroke drops.

Diabetes

Diabetes is a fasting plasma glucose (blood sugar level) of 126 mg/dL or more measured on at least two occasions. It can be controlled, but it still increases your risk for stroke. About 2.7 million African Americans, or over 11 percent, have diabetes.

People with diabetes often also have high blood pressure and high blood cholesterol, and are overweight. This increases their risk for stroke even more. If you have diabetes, work with your doctor to manage it.

Carotid or other artery disease

The carotid arteries in your neck supply blood to your brain. A carotid artery narrowed by fatty deposits may become blocked by a blood clot.

Peripheral artery disease is the term for narrowed blood vessels that carry blood to leg and arm muscles. If you have peripheral artery disease, you have a higher risk of carotid artery disease, which raises your risk of stroke.

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Atrial fibrillation

In atrial fibrillation the heart's upper chambers quiver instead of beating effectively. This lets the blood pool and clot, raising the risk for stroke. If a clot breaks off, enters the bloodstream and lodges in an artery leading to the brain, a stroke results.

Other heart disease

Having coronary heart disease, heart failure, dilated cardiomyopathy (an enlarged heart), heart valve disease and some types of congenital heart defects also raise the risk of stroke.

Transient ischemic attacks (TIAs or "mini strokes")

TIAs produce stroke-like symptoms, but no lasting damage. They are strong predictors of stroke. Don't ignore a TIA — call 9-1-1 to get medical attention right away. Learn the signs of a stroke listed on page 14. They also apply to TIAs.

Certain blood disorders

A high red blood cell count makes blood clots more likely, increasing the risk of stroke. Doctors may treat this problem by removing blood cells or prescribing "blood thinners."

Sickle cell anemia is a genetic disorder that mainly affects African-American children. "Sickled" red blood cells are less able to carry oxygen to the body's tissues and organs. They also tend to stick to blood vessel walls, which can block arteries to the brain and cause a stroke.

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High blood cholesterol

A high level of total cholesterol in the blood is a major risk factor for heart disease, which raises your risk of stroke. Among non-Hispanic blacks age 20 and older, more than one-third of men and nearly half of women have total blood cholesterol levels over 200 mg/dL — a level at which the risk for heart attack and stroke increases.

High levels of LDL (“bad”) cholesterol and triglycerides (blood fats) can increase the risk of stroke in people with prior coronary heart disease, ischemic stroke or TIA.

A high level of HDL (“good”) cholesterol lowers your risk of heart disease and stroke. A low level of HDL cholesterol raises the risk of heart disease and stroke.

Know your cholesterol numbers by getting screened.

Compare your results to the chart below.

Cholesterol Level (mg/dL)	Desirable (low risk)	Borderline-High Risk	High Risk
Total cholesterol	Less than 200	200–239	240 or higher
LDL (“bad”) cholesterol	Less than 130*	130–159	160 or higher
HDL (“good”) cholesterol	40 or higher**	Less than 40	Less than 40

*People who have had an ischemic stroke or heart attack (or are at high risk for having one) may be advised by their doctor to keep their LDL level below 100 or, if they’re at very high risk, below 70.

**The higher the better – an HDL of 60 mg/dL and above is considered protective against heart disease.

If your readings are borderline or high-risk, work with your doctor to lower your risk for heart disease and stroke.



Physical inactivity and obesity

Get up and get moving. That's the message from the U.S. Surgeon General, who recommends 30 minutes or more of physical activity on most, and preferably all, days of the week. Being inactive, obese or both can increase your risk of high blood pressure, high blood cholesterol, diabetes, heart disease and stroke. Regular physical activity helps reduce your risk of heart attack, heart disease and stroke. So find an activity you love, grab a buddy, and stick to it. You'll like how good you feel!

Excessive alcohol

Excessive alcohol intake is associated with an increased risk of stroke as well as an increase in blood pressure. If you drink alcohol, do so in moderation. This means an average of one to two drinks per day for men and one drink per day for nonpregnant women.

Illegal drug use

Intravenous drug abuse carries a high risk of stroke. Cocaine use has also been linked to strokes and heart attacks. Some have been fatal even in first-time users.



RISK ASSESSMENT QUIZ

Check all the boxes that apply to you.
If you check two or more boxes, see your doctor for a complete assessment of your risk.

AGE

You are a man over 45 or a woman over 55 years old.

FAMILY HISTORY

You have a close blood relative who had a heart attack or stroke before age 55 (if father or brother) or before age 65 (if mother or sister).

MEDICAL HISTORY

You have coronary artery disease, or you have had a heart attack.

You have had a stroke.

You have an abnormal heartbeat.

Tobacco SMOKE

You smoke, or live or work with people who smoke every day.

CHOLESTEROL

Your total cholesterol level is 240 mg/dL or higher.

Your HDL ("good") cholesterol level is less than 40 mg/dL.

You don't know your total cholesterol or HDL levels.

BLOOD PRESSURE

Your blood pressure is 140/90 mm Hg or higher, or you've been told that your blood pressure is too high.

You don't know what your blood pressure is.

PHYSICAL INACTIVITY

You are active less than 30 minutes on most days of the week.

Excess BODY WEIGHT

You are 20 pounds or more overweight.

DIABETES

You have diabetes or take medicine to control your blood sugar.

REAL

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What steps can I take to prevent stroke?

By learning your risk factors, you can help prevent a stroke. Use the quiz on page 11 to learn where to focus your efforts. Then work with your doctor to reduce, control or prevent as many risk factors as you can. Studies show that treatments to reduce risk could decrease the number of strokes by as much as 80 percent, if used in the right situations.

Can a stroke be stopped?

In the past, doctors couldn't do much to help stroke victims. That's not true today. Now stroke doesn't have to lead to disability or death. The key is to recognize a stroke and get to the hospital immediately. The clot-dissolving drug tPA (tissue plasminogen activator) can reduce long-term disability if it's given within three hours after an ischemic stroke starts. (Ischemic strokes are caused by clots and are by far the most common type of stroke.)

Unfortunately, tPA isn't used as often as it could be because many people don't seek care quickly. Don't make that mistake. If you or someone near you has the warning signs of a stroke, call 9-1-1 immediately.



What are the stroke warning signs?

You and your family should learn the warning signs of stroke today. If you or someone you're with has any of these signs, a stroke may be occurring:

- Sudden numbness or weakness of the face, arm or leg, especially on one side of the body
- Sudden confusion, trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden, severe headache with no known cause

Not all of these warning signs occur in every stroke. If one does, don't wait. Get help immediately. Stroke is a medical emergency — call 9-1-1.

What are the key points to remember?

- **Reduce** your chances of having a stroke by learning the risk factors and working with your doctor to help reduce your risk.
- **Recognize** the warning signs of a stroke. Stroke is a medical emergency. Every second counts!
- **Respond** by calling 9-1-1 immediately if you or someone close to you is having warning signs of stroke. Then check the time. When did the first symptom start? You'll be asked this important question later.



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Where can I get more information?

The American Stroke Association and its partners can give you more information on how to reduce your risk factors, change your lifestyle and care for a loved one who's had a stroke. For more information, contact the resources listed below.

I'm strong.

You have the power to end stroke. Take control of your health today.

**American Association of
Diabetes Educators**

www.aadenet.org
(800) 338-3633

American Diabetes Association

www.diabetes.org
(800) DIABETES

American Heart Association

www.americanheart.org
(800) AHA-USA1

American Stroke Association

www.StrokeAssociation.org/power
(888) 4-STROKE

Black Women's Health Imperative

www.Blackwomenshealth.org
(202) 548-4000

**Centers for Disease Control
and Prevention**

www.cdc.gov/

Chi Eta Phi Sorority Inc.

www.chietaphi.com

National Black Nurses Association

www.nbna.org

**National Heart, Lung,
and Blood Institute**

www.nhlbi.nih.gov/health/index.htm

National Medical Association

www.nmanet.org

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Bye!



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National Center

7272 Greenville Avenue Dallas, Texas 75231-4596

StrokeAssociation.org

About the American Stroke Association

The goal of the American Stroke Association, a division of the American Heart Association, is to reduce disability and death from stroke through research, education and advocacy. In its 2005–06 fiscal year, the association spent more than \$157 million on stroke.

How Can I Get Involved?

You can help African Americans take steps to protect themselves, their loved ones and others in their community from the devastation of stroke. Get involved today in Power To End Stroke!

- Take the Pledge.
- Call **888-4-STROKE**.
- Visit **StrokeAssociation.org/power**.
- Go to the “Shop Power” Web site and order Power To End Stroke brochures, materials and merchandise online. For more information, log on to the Web site at **shoppower.org**



The *Sun*, a symbol of truth and light, represents radiance, providence, hope and suffusion. It captures the strength, resolve and soaring spirit of African Americans.



Bristol-Myers Squibb/Sanofi Pharmaceuticals Partnership is a proud national sponsor of Power To End Stroke.SM