Stroke: A Preventable and Treatable Catastrophe

The Growing Epidemic

Stroke is preventable

But rising globally

- Aging, unhealthy diets, tobacco use, and physical inactivity, fuel a growing epidemic of high blood pressure, high cholesterol, obesity, diabetes, stroke, heart disease and vascular cognitive impairment.
- Worldwide, stroke accounts for 5.7 million deaths each year and ranks second to ischemic heart disease as a cause of death; it is also a leading cause of serious disability, sparing no age, sex, ethnic origin, or country.
- Four out of five strokes occur in low and middle income countries who can least afford to deal with the consequences of stroke.
- If nothing is done, the predicted number of people who will die from stroke will increase to 6.7 million each year by 2015.
- Six million deaths could be averted over the next 10 years if what is already known is applied.
- Much can be done to prevent and treat stroke and rehabilitate those who suffer the devastating consequences of stroke.
JOIN FORCES TO PREVENT STROKE
THE SAME FEW RISK FACTORS ACCOUNT FOR THE LEADING
HEALTH PROBLEMS OF THE WORLD

but research about the common threat occurs in isolation from
other major chronic diseases.

The common risk factors, tobacco use, physical inactivity, and
unhealthy diet, contribute to stroke, heart disease, diabetes,
chronic lung disease, cancer, and pose a risk for Alzheimer’s
disease.

Therefore we need to:

- Co-ordinate the efforts of all disease-oriented organizations
  working to prevent the rise of these underlying risk factors.
ENSURE WHAT WE KNOW BECOMES WHAT IS DONE
PREVENTION IS THE MOST READILY APPLICABLE AND
AFFORDABLE PART OF OUR KNOWLEDGE

but prevention is neglected.

Therefore we need to:

• Encourage healthy environments to support healthy habits and lifestyles.

• Use effective drugs for both primary and secondary prevention. Regrettfully these drugs are neither accessible nor affordable in many developing countries, nor used optimally in developed ones.

• Discourage unproven, costly, or misdirected practices, which drain resources from more cost effective approaches.

• Educate health professionals at all levels through a common vocabulary, a core curriculum, on-line materials, long distance mentoring, and opportunities for learning in clinical practice settings.
RECOGNIZE THE UNIQUENESS OF STROKE
THE DIFFERENT TYPES OF STROKE, ISCHEMIC (BLOCKAGE OF ARTERIES), BLEEDING INTO (INTRACEREBRAL HEMORRHAGE) AND AROUND THE BRAIN (SUBARACHNOID HEMORRHAGE) HAVE SPECIFIC COURSES REQUIRING SPECIAL TREATMENT AND REHABILITATION.

Therefore, we need to:

- Study their causes and understand their mechanisms
- Organize skilled teams of physicians, neurosurgeons, neurointerventionalists, and rehabilitation specialists to deal with these special types of stroke.
RECOGNIZE, TREAT AND PREVENT VASCULAR COGNITIVE IMPAIRMENT

SUBCLINICAL (“SILENT”) STROKES OCCUR FIVE TIMES AS OFTEN AS CLINICAL (OBVIOUS) STROKES, AND MAY AFFECT THINKING, MOOD AND PERSONALITY.

Therefore, we need to:

- Recognize that vascular cognitive impairment (VCI) occurs commonly and at times hastens Alzheimer’s disease (AD)
- Manage the common risk factors for stroke, VCI and AD (tobacco use, high blood pressure, high cholesterol, physical inactivity, obesity and diabetes).
BUILD TRANSDISCIPLINARY TEAMS FOR STROKE CARE AND REHABILITATION
ORGANIZED STROKE CARE IMPROVES OUTCOMES

but remains the exception nearly everywhere.

Therefore we need to:

- Establish simple but comprehensive stroke units. Stroke units have long proven their worth, even in their most basic form.
- Encourage transdisciplinary teams to develop expertise and translate evidence into practice.
- Build a health care system that responds to the needs of each individual dealing with the impact of stroke and rejoining society.
ACTIVELY ENGAGE THE PUBLIC AROUND THE WORLD
THE PUBLIC, ACTING AS INDIVIDUALS, VOTERS OR ADVOCATES, CAN BEST INFLUENCE THEIR OWN FUTURE RISK AND CARE

but not enough is being done.

Therefore we need to:

- Increase awareness of the public, policymakers, and health professionals about the causes and symptoms of stroke. The symptoms of stroke are painless and at times transient – but sudden weakness or numbness in the face, arm or leg, sudden inability to speak or understand speech, loss of vision in one eye, or sudden loss of balance are as compelling an emergency as crushing chest pain or sudden, severe unusual headache.
- Send a unified, consistent message throughout the world: Stroke is a preventable and treatable catastrophe
Whereas; stroke is a global epidemic that threatens lives, health, and quality of life.

Whereas; much can be done to prevent and treat stroke, and rehabilitate those who suffer one.

Whereas; professional and public awareness is the first step to action.

We hereby proclaim an annual

WORLD STROKE DAY
WORKING GROUP

Vladimir Hachinski (Chair)
President, International Society for Behavioural and Cognitive Vascular Disorders, Vice-President, World Federation of Neurology
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Cape Town, the 26th of October, 2006
World Stroke Day Proclamation
Vladimir Hachinski

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