

## THE STROKE AID SOCIETY

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## NEWSLETTER- JANUARY/FEBRUARY 2013



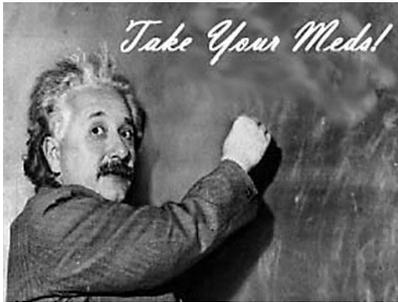
### NEWS FROM STROKE AID

- We are pleased to welcome Ken Boxall as our new driver. He has already proven to be a trusted and reliable member of our team.  
Thank you to Andrew Winters who recommended Ken for the position and for helping Ken to learn the ropes.
- On the 5 February 2013, Dr Edda Holl came to our group at Paterson Park to inform us about and demonstrate Qigong.  
Qigong is a health promoting exercise which originates from Traditional Chinese Medicine.
- On the 20<sup>th</sup> February, Sylvia Birkhead (South Rand Group) presented a talk on Stroke Aid at Moffat View for Queenshaven's Outreach Programme.
- Good news, we have been informed that we will be receiving some money from the Lotto (2011 Application). Together with the money raised from selling Christmas Cards and Diaries and the money donated by Hope Promotions who hosted 2 shows on our behalf, we have enough money to keep us going until the end of the year.
- **May is Stroke Awareness Month.** We are hoping to market Stroke Aid by talking on Chai FM and organizing a Workshop in May 2013.
- **Please take note:** Paterson Park group will be **closed on 26<sup>th</sup> March 2013** for Passover.

## WHAT'S NEW IN THE TREATMENT/PREVENTION OF STROKE

### PTSD in Stroke Survivors May Hamper Secondary Prevention

In a study published online, on the 7 January 2013 in the British Journal of Health Psychology, new research suggests that Posttraumatic Stress Disorder (PTSD), a common phenomenon after stroke, may significantly hamper secondary prevention efforts and impair recovery because of survivors' **lack of adherence to medication regimens**.



Investigators at Columbia University Medical Center in New York found that 65% of stroke survivors with PTSD failed to adhere to treatment vs 33% of their counterparts without PTSD.

According to author Ian M. Kronish (MD, PhD), too many stroke survivors are not compliant with their treatment, even though their adherence to post-stroke treatment regimens is one of the most important components of reducing the risk of a future stroke.

#### **PTSD is common after Stroke**

Frequently PTSD is a consequence of an acute life-threatening event, including having a stroke. PTSD is estimated to affect up to 18% of stroke survivors.

#### **Unpleasant Reminder**

The study included 535 participants recruited between March 2010 and January 2012. Patients were 40 years or older (mean age, 63 years) and had had at least 1 stroke or transient ischemic attack in the previous 5 years.

Patients were asked about PTSD symptoms, medication adherence, and beliefs or concerns about medications.

Compared with stroke patients without PTSD symptoms, patients with PTSD were more ambivalent toward medication, were more concerned about its potential long-term effects, and complained about the way medication disrupted their lives. In addition, PTSD was associated with an increased belief in the general harm and overuse of medications in the medical system.

"We believe that these findings suggest that stroke survivors with PTSD do not see their medications as helpful, but rather as reminders of their stroke, and that they avoid taking them as a way to avoid thinking about their stroke," Donald Edmondson, PhD, said in a statement.

"We need to conduct further research to determine whether treating a stroke survivor for PTSD would alleviate medication concerns that lead to avoidance, or if additional interventions should be designed to address both issues," Dr. Edmondson added.

**Ref:** [http://www.medscape.com/viewarticle/778113?src=nl\\_topic](http://www.medscape.com/viewarticle/778113?src=nl_topic)

## **Grapefruit Juice and Medicine May Not Mix**



Grapefruit juice can be part of a healthful diet—most of the time. It has vitamin C and potassium—substances your body needs to work properly. It isn't good for you, however when it affects the way your medicines work.

Grapefruit juice and fresh grapefruit can however interfere with the action of some prescription drugs, as well as a few non-prescription drugs. This interaction can be dangerous, says Shiew Mei Huang, acting director of the Food and Drug Administration's Office of Clinical Pharmacology.

With most drugs that interact with grapefruit juice, "the juice increases the absorption of the drug into the bloodstream," she says. "When there is a higher concentration of a drug, you tend to have more adverse events."

Drinking grapefruit juice several hours before or several hours after you take your medicine may still be dangerous, says Huang, so it's best to avoid or limit consuming grapefruit juice or fresh grapefruit when taking certain drugs.

Examples of some types of drugs that grapefruit juice can interact with are:

- some statin drugs to lower cholesterol
- some blood pressure-lowering drugs
- some anti-anxiety drugs
- some anti-arrhythmia drugs
- some antihistamines

**\*\*\* Grapefruit juice does not affect all the drugs in the categories above.**

Ask your pharmacist or other health care professional to find out if your specific drug is affected.

### Tips for Consumers

- Ask your pharmacist or other health care professional if you can have fresh grapefruit or grapefruit juice while using your medication. If you can't, you may want to ask if you can have other juices with the medicine.
- If you must avoid grapefruit juice with your medicine, check the label of bottles of fruit juice or drinks flavored with fruit juice to make sure they don't contain grapefruit juice.
- Seville oranges (often used to make orange marmalade) and tangelos (a cross between tangerines and grapefruit) affect the same enzyme as grapefruit juice, so avoid these fruits as well if your medicine interacts with grapefruit juice.

This article appears on FDA's Consumer Updates page, which features the latest on all FDA-regulated products. Page Last Updated: 07/17/2012

**Ref:** <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm292276.htm>

## JUST FOR LAUGHS



### ADVICE FROM A VERY WISE ASIAN DOCTOR

**Q: Doctor, I've heard that cardiovascular exercise can prolong life. Is that true?**

A: Heart only good for so many beats, and that it...Don't waste on exercise. Everything wear out eventually. Speeding up heart not make you live longer, it like saying you extend life of car by driving faster. Want to live longer? Take nap.

**Q: Should I reduce my alcohol intake?**

A: Oh no. Wine made from fruit. Brandy distilled wine, that mean they take water out of fruity bit so you get even more of goodness that way. Beer also made of grain. Bottom up!

**Q: How can I calculate my body/fat ratio?**

A: Well, if you have body and you have fat, your ratio one to one. If you have two body, your ratio, two to one.

**Q: What are some of the advantages of participating in a regular exercise program?**

A: Can't think of single one, sorry. My philosophy: No pain...good!!

**Q: Aren't fried foods bad for you?**

A: YOU NOT LISTENING!! Food fried in vegetable oil. How getting more vegetable be bad?

**Q: Will sit-ups help prevent me from getting a little soft around the middle?**

A: Oh no! When you exercise muscle, it get bigger. You should only be doing sit-up if you want bigger stomach.

**Q: Is chocolate bad for me?**

A: You crazy?!? HEL\_LO\_O!!! Cocoa bean! Another vegetable! It best feel – good food around!

**Q: Is swimming good for your figure?**

A: If swimming good for your figure, explain whale to me.

**Q: Is getting in shape important for my lifestyle?**

A: Hey! "Round" is shape!

**And remember....**

***Life should NOT be a journey to the grave with the intention of arriving safely in an attractive and well preserved body, but rather to skid in sideways- Chardonnay in one hand- chocolate in the other- body thoroughly used up, totally worn out and screaming "WHOO-HOO, what a ride!!"***

Until next time, cheers for now.

Sharlene