



THE STROKE AID SOCIETY

P O BOX 51283, RAEDENE, 2124
PBO No. 9300531845

OFFICE TELEPHONE: 011 728 2292

Acting Chairman: Ms Kim Lewitte, BSC (OT) Cell: 083 302 9156

Office Manager/PRO: Mrs Sandra Colombick Tel: 011 728 2292

Secretary: Ms Sharlene Zinman Tel: 011 728 2292

strokeaid@telkomsa.net / sharlenezinman@gmail.com

www.strokeaid.co.za

NEWSLETTER: NOVEMBER - DECEMBER 2014

NEWS FROM STROKE AID

As this year comes to an end, I would like to take this opportunity to wish all our Members and Friends a superb Festive Season.

Best wishes for the New Year, may you be blessed with health, happiness and prosperity.

If you are travelling, travel safely.

We look forward to seeing you again, in the New Year.

A few words from Sandra Colombick (Manager/PRO)



“So much can change in a year, so as I wish you all a healthy and peaceful journey into 2015, may I say let us summon the same spirit and be pro-active in all our undertakings together with our loved ones and all whom we come into contact with.

G-d’s richest blessings.”

Stroke Aid will be reopening on Tuesday, 13th January 2015.



This article was published in the **North Eastern Tribune** Week ending, **21st November 2014.** Page 5

Dr Jennifer Watermeyer leads a spirited discussion at a Stroke Aid Society meeting.

Stroke Aid Society

LAURA BYRNE
laurab@caxton.co.za

THE Stroke Aid Society offers essential rehabilitation, support and social interaction for stroke victims, their families, and carers. “Young or old, thin or fat – it happens,” said Sandra Colombick, public relations officer to the non-governmental, non-profit organisation, which provides community support to stroke sufferers, their families and carers, through a range of vital services from physical therapy to counselling and advice.

Colombick herself attends the organisation’s weekly meetings at Paterson Park Recreation Centre, where stroke victims gather for cognitive work, physical therapy, group exercise and, perhaps most importantly, the opportunity to socialise comfortably.

Transport to and from meetings is provided, along with refreshments, and sessions often feature a guest speaker and other entertainment. Similar sessions are held weekly at the Soweto Aged Home and the South Rand Hospital.

In a morning’s session, the few members not deterred by pouring rain gathered in the Paterson Park hall, darkened by electricity outages. Dr Jennifer Watermeyer, a speech therapist and senior lecturer at Wits University, led the group in reading and discussing a tongue-in-cheek article about ‘Generation Y yuppies’, today’s young professionals. The

reading was accompanied by voluble comment from participants, who range in ages from 39 years upwards, and much laughter.

The social support and interaction that stroke survivors receive at such sessions creates an important sense of wellbeing and normality, according to Colombick, who explains that in addition to weekly sessions, the organisation runs workshops for audiologists and caregivers, and visits retirement homes to raise stroke awareness.

While the Stroke Aid Society receives essential support towards its running costs from the National Lottery Distribution Trust Fund, it is also dependent on the generosity of the public for survival.

As is often the case, transport is one of the heaviest costs, and the organisation hopes to raise funds for a bus to transport stroke victims to and from support sessions. With an end-of-year function rapidly approaching, Colombick is also searching for a donor to sponsor refreshments for all three Stroke Aid Society groups, who will gather on 9 December for a morning of festive entertainment.

Details: 011 728 2292;
strokeaid@telkomsa.net; www.strokeaid.co.za

[Find North Eastern Tribune on Facebook to tell us about the most useful source of stroke support for you or a loved one.](#)

WHAT'S NEW IN THE TREATMENT/PREVENTION OF STROKE



NEW AHA/ASA GUIDELINE ON PRIMARY STROKE PREVENTION

- **New oral anticoagulants in patients with atrial fibrillation (AF)**
- **Home blood pressure monitoring in patients with hypertension**
- **Smoking cessation**
- **Non- oestrogen oral contraceptives for women experiencing migraine with aura**
- **The Mediterranean diet for all patients.**

These are among the new recommendations for primary prevention of stroke released by the American Heart Association (AHA) and American Stroke Association (ASA).

These updated guidelines were published online on the 28th October 2014 in *Stroke* (medical journal published monthly on behalf of the American Heart Association).

Over the years, there have been numerous advances in preventing stroke, including medications to control blood pressure and lipids, anticoagulants for at-risk patients with AF, smoking cessation programs and changes in diet and physical activity level, write the authors, led by James F. Meschia, (MD, Professor and Chair, Neurology, Mayo Clinic, Jacksonville, Florida).

** (AF) **Atrial fibrillation** is a disorder of the rhythm of the heart.

Atrial Fibrillation

One of the most important changes, Dr Meschia said, is the expansion of the recommendation for oral anticoagulants to include agents other than Warfarin for patients with nonvalvular AF who are at acceptably low risk for haemorrhagic complications (besides prescribing Warfarin, other options now include Dabigatran, Apixaban, and Rivaroxaban).

"We are now recognizing the important role of the novel oral anticoagulants as an alternative to Warfarin," he told *Medscape Medical News*. "Not that they are superior, but we recognize that there is sufficient evidence to recommend them as an alternative for stroke prevention."

He stressed that "by no means are we saying that everyone needs to stop their Warfarin and switch; what we're basically saying is that people now have options, and legitimate options."

Home Monitoring

The committee added several new recommendations pertaining to hypertension.

One is **self-monitoring of blood pressure**.

"There's now a more explicit acknowledgement that home blood pressure monitoring is useful," said Dr Meschia. "This is important for a lot of reasons," including that it "empowers patients" and can lead to better blood pressure control, he said.

"It's an acknowledgment that the automated cuffs are getting better and are more reliable and that with advancing technology, there are going to be greater and greater opportunities to monitor health variables and fitness variables," he added.

Importantly, the committee decided to retain the target systolic blood pressure of 140 mmHg, regardless of age. "That's a little controversial," said Dr Meschia. "Some folks had recommended perhaps that in older individuals, that goal could be liberalized."

Other recommendations relating to hypertension are regular blood pressure screening and appropriate treatment of patients with hypertension, including lifestyle modification and pharmacologic therapy and annual blood pressure screening and health-promoting lifestyle modification for patients with prehypertension.

Women with Migraine

The updated document has new recommendations on migraine. The experts recommended smoking cessation in women with migraine headaches with aura and that these women use alternatives to oral contraceptives, especially those containing oestrogen.

Mediterranean diet

Another new recommendation advocates for following a Mediterranean diet that is supplemented with nuts. Other dietary recommendations are to reduce intake of sodium and increase intake of potassium, and to follow the DASH-style diet, which emphasizes fruits, vegetables, low-fat dairy products and reduced saturated fat.

Overweight and Obesity

The new guideline defines overweight and obesity on the basis of body mass index (BMI). The committee recommended weight reduction to lower blood pressure in patients who are overweight (BMI of 25 to 29 kg/m²) and obese (BMI over 30 kg/m²).

Body Mass Index (BMI) is a simple index of weight-for-height that is commonly used to classify underweight, overweight and obesity in adults. It is defined as the weight in kilograms divided by the square of the height in metres (kg/m²).

Smoking cessation

In the category of cigarette smoking, the committee deemed that community-wide or state-wide bans of smoking in public spaces is reasonable for reducing the risk for stroke.

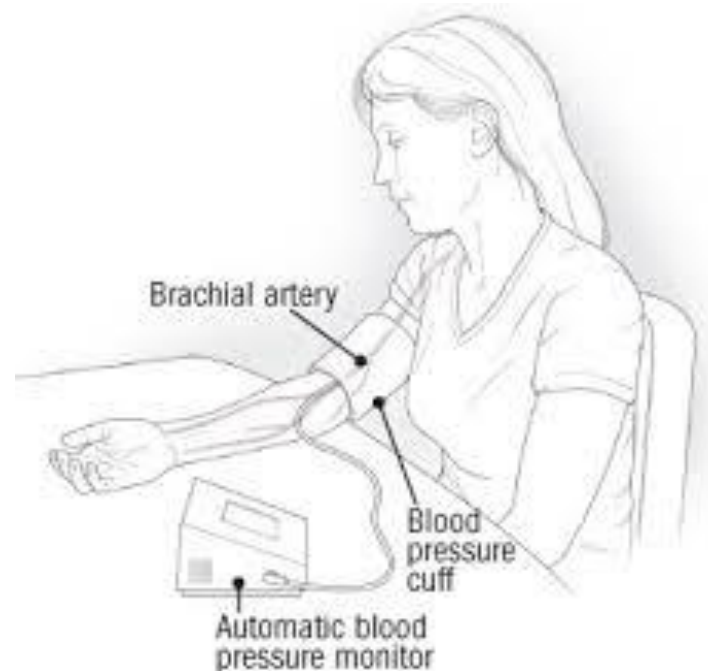
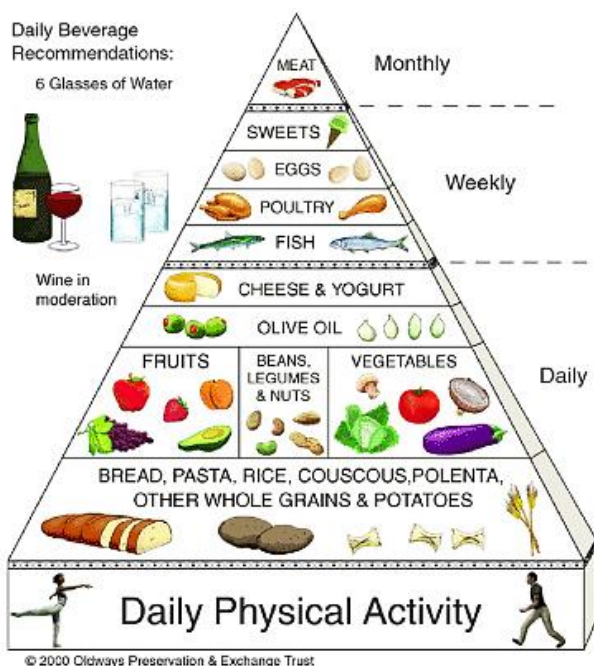
New/updated Guidelines

Because of its association with stroke risk, the committee recommended **screening for sleep apnoea** through a detailed history, including physical examination, polysomnography where indicated and structured questionnaires. The committee noted, however, that while treating sleep apnoea is reasonable, its effectiveness in preventing stroke is unknown.

Another new aspect of the updated guideline is that patients with asymptomatic carotid stenosis are encouraged to take daily aspirin and a statin. The previous guideline did not explicitly state this except in the perioperative and postoperative context.

According to background information in the guideline paper, about 795,000 Americans sustain a stroke each year, about 610,000 of them for the first time. This results in 6.8 million adult stroke survivors. Stroke is a leading cause of functional impairment. Six months after a stroke, 26% of those age 65 years and older are dependent on others for their activities of daily living and 46% have cognitive deficits. Effective primary prevention is the best approach for reducing the burden of stroke, said the authors. "Primary prevention is particularly important because >76% of strokes are first events," they write. "Fortunately, there are enormous opportunities for preventing stroke."

REFERENCE: <http://www.medscape.com>.



STROKE VICTIM CLIMBS 80 FLIGHTS FOR CHARITY

November 12, 2014



Doug Volland doesn't give up. Step after step, he quickly climbed and descended 80 flights of stairs at Harro East Athletic Club (USA) on Wednesday the 12th November 2014, hauling a weighted (20 pounds) backpack.

That's a lot of stairs for anybody, but the feat was especially meaningful for Volland. Four years earlier, he suffered a severe stroke that left the otherwise active man partially paralyzed and with limited speech.

An avid long-distance cyclist and marathoner before the stroke in 2010, Volland, now 56, spent several years in physical and speech therapy before he resumed weight-training several times a week. As he grew stronger and more confident in each step, Volland wanted to show the world that he wasn't limited, but that he merely faced a new set of challenges, said his wife, Jan. He wasn't expected to survive the stroke and spent three weeks in a coma. Not only did he survive, Volland has flourished.

"It's truly a message to stroke victims that you can still do extraordinary things," said his fitness trainer Ken Rex, who has been training Volland. "He's (an) inspiration for many of my clients. He doesn't know what failure is, only effort."

Volland adjusted his expectations, Rex said, but also understood that it all starts with his attitude.

Once an engineer, Volland continues with physical and speech therapy and despite being partially paralyzed on his right side, he remains a gourmet cook, drives and exercises regularly.

"To see him stretch himself, to challenge himself ... he's glowing more now than before his incident," Rex said. "His stroke is something that happened to him, but it's not a barrier."

Volland trained for about a month in Harro East's eight-story stairwell, knowing in part that his climb would raise funds for Foodlink, an agency he's supported for years. He was president of Foodlink's board of directors when his stroke occurred, his wife said.

Volland, who finished the 2,600-step climb in 75 minutes, said he felt "very good" about his efforts and thought it was the perfect opportunity to give back.

Volland hopes his steps will inspire other stroke victims to take on life from a new perspective. "Because life is different, it doesn't mean it can't be fulfilling," Rex said.

REFERENCE: <http://www.democratandchronicle.com/story/news/2014/11/12/doug-volland-foodlink/18939475/>



ON A LIGHTER NOTE ...

A CAREER ENDER FOR SOMEONE

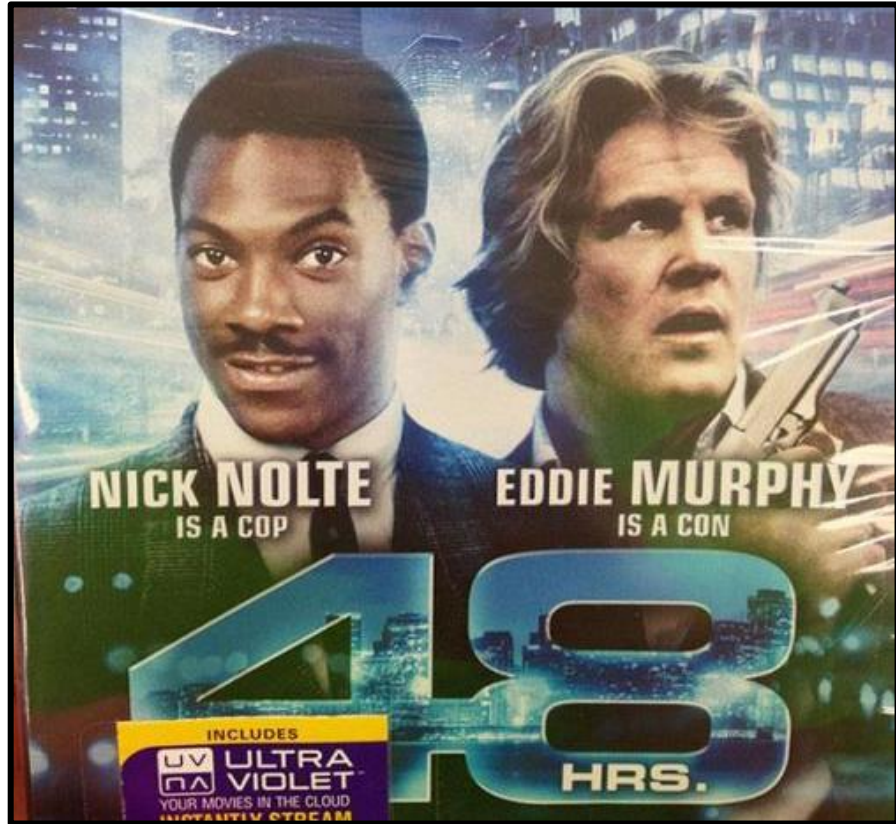
Submitted by: Sheila Haydock













REARRANGING LETTERS

Submitted by: Sandra Colombick

WORD	REARRANGE THE LETTERS
DORMITORY	DIRTY ROOM
PRESBYTERIAN	BEST IN PRAYER
ASTRONOMER	MOON STARER
DESPERATION	A ROPE ENDS IT
THE EYES	THEY SEE
GEORGE BUSH	HE BUGS GORE
THE MORSE CODE	HERE COME DOTS
SLOT MACHINES	CASH LOST IN ME
ANIMOSITY	IS NO AMITY
ELECTION RESULTS	LIES LET'S RECOUNT
MOTHER IN LAW	WOMAN HITLER
SNOOZE ALARMS	ALAS NO MORE Z'S
A DECIMAL POINT	IM A DOT IN PLACE
THE EARTHQUAKES	THAT QUEER SHAKE
ELEVEN PLUS TWO	TWELVE PLUS ONE

MIND BLOWN.

Shared by Grammarly



Until next year

Cheers
Sharlene

