

Stroke Recovery: Living with Disability After a Stroke

They call themselves the dynamic duo. They are stroke survivors. Reed Harris had a stroke on the left side of his brain. Bill Orlikowski's stroke was on the right side.

"We're each half a brain and together we make a full brain."

Bill and Reed are Stroke Peer Visitors. They offer something few others can: an understanding of exactly what stroke survivors are going through.

"We both had strokes too, 8 years ago."

Reed has a communication deficit called Aphasia. Bill's challenge is Cognitive Deficits, especially with his memory.

So, how's your therapy doing?

"Therapy is fine. Actually, it's very tiring, but I know it's good for me."

"Exactly. It's well worth it, I'll tell you."

The dynamic duo offers encouragement to stroke survivors at Atlanta's Glancy Rehabilitation Center. Across town, new stroke survivors are starting their journey in acute care at Grady Memorial Hospital.

"In the very earliest stages of a stroke, there's ongoing injury to the brain, and the sooner we can treat that patient and stop the ongoing damage the more likely they are to recover from the stroke."

A drug known as tPA, when given within 3 to 4 1/2 hours of the start of symptoms of a stroke due to a blood clot, can help reduce long-term disability.

"We can also go in with special catheters that go into that blockage and open up the blockage directly by taking out the blood clot that's blocking the artery."

In the first hours and days after a stroke, it's difficult to predict how a survivor is going to do. The severity of effects varies from person to person. The types of deficits also vary depending on the part of the brain that's injured.

Survivors may experience problems with movement, language, memory, thinking, vision, or balance. Changes in behavior and emotions are also common after a stroke.

"We had a stroke just like you did."

For Reed, one of the lasting effects is numbness and tingling on his right side.

"Clumsy, very clumsy. Numb. It's very clumsy."

But he hasn't let that stop him from pursuing his hobby of do-it-yourself home projects. Having a stroke will change your life but working with a dedicated healthcare team can help restore function, improve your quality of life and make daily living easier. It starts with your neurologist.

"The role of the neurologist, who is the brain specialist, is to make an accurate diagnosis of the problem and then to assess what immediate treatment needs there are and also how to prevent another stroke."

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At the same time the rehabilitation team is working with the survivor and the family to map out a plan for recovery.”

The rehabilitation team may include: A physical therapist, who works on improving the patient’s movement; An occupational therapist, who focuses on activities of daily living; And a speech therapist, who helps with problems related to communication and swallowing.

“I see the therapists as a coach or a trainer as they work with the patient on a one to one basis giving them feedback and providing them support as they work through the recovery process.”

The team’s goals in the hospital are to stabilize the survivor, prevent ongoing damage and keep the stroke from getting bigger. Many survivors are able to leave the hospital fairly quickly. But the thought of leaving can be overwhelming, especially for caregivers. Reed’s wife, Mary, says doctors were ready to release him from the hospital just 3 days after his stroke.

“I thought to myself ‘Oh dear God what do they mean discharge?’ Yea, he’s sitting up. He’s able to eat. He can communicate a bit but he’s not ready to go home.”

The healthcare team advised Mary that Reed should be transitioned to a rehabilitation center.

“The decision to go to an inpatient rehabilitation setting or use outpatient therapy really is a team decision. It depends on the amount of injury, how much of a deficit there is, whether or not they can participate in their rehabilitation. Family makes a huge difference in this decision process. Where is the survivor going to go after rehabilitation? Can they go home? Do they have the support at home? What is their home environment like? Is it safe?”

It’s been seven years since Bill and Reed began volunteering for the peer visitor program called Sharegivers, which is run by the American Stroke Association. They visit more than 200 survivors a year.

“Concentrate on the good things, the things that you can do, not the things that you can’t do.”

“Life is good.”

To learn more about rehabilitation after a stroke, watch Stroke Recovery: Navigating Physical and Occupational Therapy.