

# Stroke

## Current Awareness Bulletin

January 2019

This Current Awareness Bulletin is produced by the Yeovil Academy Library to provide staff with a range of stroke-related resources to support practice. It includes recently published guidelines and research articles, as well as news and policy items.

## Cochrane



### [Very early versus delayed mobilisation after stroke](#)

-Peter Langhorne, Janice M Collier, Patricia J Bate, Matthew NT Thuy, Julie Bernhardt

Very early mobilisation (VEM) is performed in some stroke units and recommended in some acute stroke clinical guidelines. However, it is unclear whether very early mobilisation independently improves outcome after stroke.

16 October 2018

### [Recanalisation therapies for wake-up stroke](#)

-Melinda B Roaldsen, Haakon Lindekleiv, Ellisiv B Mathiesen, Eivind Berge

About one in five strokes occur during sleep (wake-up stroke). People with wake-up strokes have traditionally been considered ineligible for thrombolytic treatment because the time of stroke onset is unknown.

21 August 2018

### [Action observation for upper limb rehabilitation after stroke](#)

-Lorena RDM Borges, Aline BGS Fernandes, Luciana Protásio Melo, Ricardo O Guerra, Tania F Campos

Action observation (AO) is a physical rehabilitation approach that facilitates the occurrence of neural plasticity through the activation of the mirror-neural system, promoting motor recovery in people with stroke. 31 October 2018

### [Gamma aminobutyric acid \(GABA\) receptor agonists for acute stroke](#)

-Jia Liu, Jing Zhang, Lu-Ning Wang

Gamma aminobutyric acid (GABA) receptor agonists have been shown to have a neuroprotectant effect in reducing infarct size and improving functional outcome in animal models of cerebrovascular disease.

30 October 2018

### [Swallowing therapy for dysphagia in acute and subacute stroke](#)

-Philip M Bath, Han Sean Lee, Lisa F Everton

Dysphagia (swallowing problems), which is common after stroke, is associated with increased risk of death or dependency, occurrence of pneumonia, poor quality of life, and longer hospital stay.

30 October 2018

### [Activity monitors for increasing physical activity in adult stroke survivors](#)

-Elizabeth A Lynch, Taryn M Jones, Dawn B Simpson, Natalie A Fini, Suzanne S Kuys, Karen Borschmann, Sharon Kramer, Liam Johnson, Michele L Callisaya, Niruthikha Mahendran, Heidi Janssen, Coralie English, on behalf of the ACTIOOnS Collaboration

Stroke is the third leading cause of disability worldwide. Physical activity is important for secondary stroke prevention and for promoting functional recovery. However, people with stroke are more inactive than healthy age-matched controls.

27 July 2018

### [Blood pressure-lowering treatment for preventing recurrent stroke, major vascular events, and dementia in patients with a history of stroke or transient ischaemic attack](#)

-Thomas P Zonneveld, Edo Richard, Mervyn DI Vergouwen, Paul J Nederkoorn, Rob J de Haan, Yvo BWEM Roos, Nyika D Kruijt

Stroke is an important cause of death and disability worldwide. Since high blood pressure is an important risk factor for stroke and stroke recurrence, drugs that lower blood pressure might play an important role in secondary stroke prevention.

19 July 2018

### [Percutaneous vascular interventions versus intravenous thrombolytic treatment for acute ischaemic stroke](#)

-Haakon Lindekleiv, Eivind Berge, Karsten MH Bruins Slot, Joanna M Wardlaw

Most ischaemic strokes are caused by blockage of a cerebral artery by a thrombus. Intravenous administration of recombinant tissue plasminogen activator given within 4.5 hours is now standard treatment for this condition.

26 October 2018

### [Electromechanical and robot-assisted arm training for improving activities of daily living, arm function, and arm muscle strength after stroke](#)

-Jan Mehrholz, Marcus Pohl, Thomas Platz, Joachim Kugler, Bernhard Elsner

Electromechanical and robot-assisted arm training devices are used in rehabilitation, and may help to improve arm function after stroke.

3 September 2018

## Systematic Reviews



[Warfarin and the Risk of Death, Stroke, and Major Bleeding in Patients With Atrial Fibrillation Receiving Hemodialysis: A Systematic Review and Meta-Analysis](#) PubMed  
[Frontiers in pharmacology](#)2018 Full Text: [YDH](#)

Results suggested that it was necessary to prescribe warfarin for the prevention of ischemic events in hemodialysis patients with atrial fibrillation, but if these patients were already prescribed with other anticoagulants for the treatment of other co-existing diseases, then warfarin was not recommended.

### [Stroke Prevention in Patients With Atrial Fibrillation: A Systematic Review Update Effective Health Care Program \(AHRQ\)2018](#)

DOACs (specifically apixaban and dabigatran) demonstrate reductions in stroke events and reductions (apixaban) or similar (dabigatran) rates in bleeding events when compared with warfarin while rivaroxaban was similar in both benefits and harms with warfarin.

### [Early Post-stroke Depression and Mortality: Meta-Analysis and Meta-Regression](#)PubMed Central Full Text

Despite some limitations, our study shows the negative impact of early PSD on survival rates. Mechanisms underlying this association still need to be elucidated and several interpretations can be hypothesized

[Frontiers in Psychiatry](#)2018 Full Text: [YDH](#)

### [Action observation for upper limb rehabilitation after stroke.](#)

We found evidence that AO is beneficial in improving upper limb motor function and dependence in activities of daily living (ADL) in people with stroke, when compared with any control group; however, we considered the quality of the evidence to be low.

[Cochrane](#)2018 Full Text: [YDH](#)

### [Gamma aminobutyric acid \(GABA\) receptor agonists for acute stroke.](#)

This review provides moderate-quality evidence that fails to support the use of GABA receptor agonists (chlormethiazole or diazepam) for the treatment of people with acute stroke.

[Cochrane](#)2018 Full Text: [YDH](#)

### [Swallowing therapy for dysphagia in acute and subacute stroke.](#)

Moderate- and low-quality evidence suggests that swallowing therapy did not have a significant effect on the outcomes of death or dependency/disability, case fatality at the end of the trial, or penetration aspiration score.

[Cochrane](#)2018 Full Text: [YDH](#)

### [Percutaneous vascular interventions versus intravenous thrombolytic treatment for acute ischaemic stroke.](#)

The present review directly compared intravenous thrombolytic treatment with percutaneous vascular interventions for ischaemic stroke. We found no evidence from RCTs that percutaneous vascular interventions are superior to intravenous thrombolytic treatment with respect to functional outcome.

[Cochrane](#)2018 Full Text: [YDH](#)

### [Complex Left Atrial Appendage Morphology Is an Independent Risk Factor for Cryptogenic Ischemic Stroke](#)PubMed Central Full Text

In conclusion, the study results suggest that complex LAA morphology is an independent risk factor for stroke. The aberrant rheological phenomenon induced by complex LAA morphology could precipitate “cryptogenic” stroke as this study shows.

[Frontiers in cardiovascular medicine](#)2018 Full Text: [YDH](#)

### [Very early versus delayed mobilisation after stroke.](#)

VEM, which usually involved first mobilisation within 24 hours of stroke onset, did not increase the number of people who survived or made a good recovery after their stroke. VEM may have reduced the length of stay in hospital by about one day, but this was based on low-quality evidence.

[The relationship between social support and participation in stroke: A systematic review](#) [PubMed Central Full Text](#)

A positive relationship exists between social support and participation post-stroke. Health professionals need to include social support interventions when attempting to manage the individual with stroke holistically, as this will have positive effects on participation.

[African journal of disability](#) 2018 Full Text: [YDH](#)

[Advances in Stroke Prevention](#) [PubMed Central Full Text](#)

In recent years, there have been many advances in stroke prevention. Implementing them successfully requires dedication, perseverance, and intelligent interpretation of the evidence. It was estimated in 2007 that recurrent strokes could be reduced by 80% with a combination of lifestyle modification and medical therapy. [56]

[Journal of translational internal medicine](#) 2018 Full Text: [YDH](#)

[Electromechanical and robot-assisted arm training for improving activities of daily living, arm function, and arm muscle strength after stroke.](#)

People who receive electromechanical and robot-assisted arm training after stroke might improve their activities of daily living, arm function, and arm muscle strength.

[Cochrane](#) 2018 Full Text: [YDH](#)

[Triple versus guideline antiplatelet therapy to prevent recurrence after acute ischaemic stroke or transient ischaemic attack: the TARDIS RCT](#)

The incidence and severity of recurrent stroke or TIA did not differ between intensive and guideline therapy in 3070 (99.2%) participants with data [93 vs. 105 stroke/TIA events; adjusted common odds ratio 0.90, 95% confidence interval (CI) 0.67 to 1.20;  $p = 0.47$ ].

[NIHR HTA programme](#) 2018

[Recanalisation therapies for wake-up stroke.](#)

There is insufficient evidence from randomised controlled trials for recommendations concerning recanalisation therapies for wake-up stroke. Results from ongoing trials will hopefully establish the efficacy and safety of such therapies. [Cochrane](#) 2018 Full Text: [YDH](#)

[Adoption of Stroke Rehabilitation Technologies by the User Community: Qualitative Study](#) [PubMed Central Full Text](#)

The key outcomes from this series of stakeholder workshops provides a starting point for an integrated approach to promoting greater adoption of technologies in stroke rehabilitation.

[JMIR rehabilitation and assistive technologies](#) 2018 Full Text: [YDH](#)

[Activity monitors for increasing physical activity in adult stroke survivors.](#)

Only four small RCTs with 274 participants (three in inpatient rehabilitation and one in the community) have examined the efficacy of activity monitors for increasing physical activity after stroke.

[Cochrane](#) 2018 Full Text: [YDH](#)

## Guidelines

**NICE** National Institute for Health and Care Excellence

### [Stroke](#)

Everything NICE has said on preventing, diagnosing and managing stroke and transient ischaemic attack (TIA) in people over 16 in an interactive flowchart NICE Pathway Published May 2011 Last updated January 2019

### [MIB165: Cerebrotech Visor for detecting stroke](#)

Advice on the use of Cerebrotech Visor for detecting stroke to aid local decision-making Medtech innovation briefing Published December 2018

### [MIB153: Mechanical thrombectomy devices for acute ischaemic stroke](#)

Advice on the use of mechanical thrombectomy devices for acute ischaemic stroke Medtech innovation briefing Published July 2018

### [More stroke patients to be offered life-saving procedure](#)

Patients with acute ischaemic stroke should be offered a procedure to remove the blood clot up to 24 hours after the onset of symptoms.  
News Published November 2018

## UpToDate

UpToDate® is accessible via the links section of the library intranet [YCloud](#) page or via the [library blog](#). It can also be accessed at [uptodate.com/login](http://uptodate.com/login) with an OpenAthens username and password. To register for an OpenAthens account [click here](#).

### [Initial assessment and management of acute stroke](#)

Literature review current through: Dec 2018. | This topic last updated: Jan 09, 2019.

The main goals in the initial phase of acute stroke management are to ensure medical stability, to quickly reverse conditions that are contributing to the patient's problem, to determine if patients with acute ischemic stroke are candidates for thrombolytic therapy, and to begin to uncover the pathophysiologic basis of the neurologic symptoms.

### [Overview of the evaluation of stroke](#)

Literature review current through: Dec 2018. | This topic last updated: Mar 13, 2018.

Cerebrovascular disease is caused by one of several pathophysiologic processes involving the blood vessels of the brain.

### [Mechanical thrombectomy for acute ischemic stroke](#)

Literature review current through: Dec 2018. | This topic last updated: Oct 16, 2018.

Early intra-arterial treatment with second-generation mechanical thrombectomy devices is safe and effective for reducing disability and is superior to standard treatment with intravenous thrombolysis alone for ischemic stroke caused by a documented large artery occlusion in the proximal anterior circulation.

## [Etiology, classification, and epidemiology of stroke](#)

Literature review current through: Dec 2018. | This topic last updated: Dec 20, 2018.

The two broad categories of stroke, hemorrhage and ischemia, are diametrically opposite conditions: hemorrhage is characterized by too much blood within the closed cranial cavity, while ischemia is characterized by too little blood to supply an adequate amount of oxygen and nutrients to a part of the brain.

## Journal Articles

Please click on the blue link (where available) to access the full text. You may need an OpenAthens username and password. To register for an OpenAthens account [click here](#).

If you would like help obtaining any of the articles, please contact the Library.

## NICE [Healthcare Databases](#)

---

### **STROKE IN EVOLUTION: ADVANCED SCIENTIFIC CHANGES ARE ON THE HORIZON.**

Author(s): LADA, DIANE

Source: Alaska Nurse; Dec 2018; vol. 69 (no. 6); p. 12-13

Publication Date: Dec 2018

Publication Type(s): Periodical

Available at [Alaska Nurse](#) - from EBSCO (CINAHL Plus with Full Text)

Database: CINAHL

### **GET THE FACTS ABOUT Pediatric Stroke.**

Author(s):

Source: Alaska Nurse; Dec 2018; vol. 69 (no. 6); p. 14-15

Publication Date: Dec 2018

Publication Type(s): Periodical

Available at [Alaska Nurse](#) - from EBSCO (CINAHL Plus with Full Text)

Database: CINAHL

### **Mediterranean diet reduces stroke risk, particularly among women.**

**Author(s):**

Source: Harvard Women's Health Watch; Dec 2018; vol. 26 (no. 4); p. 8-8

Publication Date: Dec 2018

Publication Type(s): Periodical

Available at [Harvard Women's Health Watch](#) - from EBSCO (CINAHL Plus with Full Text)

Available at [Harvard Women's Health Watch](#) - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: The article presents a study which reveals that eating a Mediterranean-style diet, which is rich in fruits and vegetables, lean meats, and nuts, may help women over 40 reduce the risk of stroke, published in the journal "Stroke."

Database: CINAHL

### **Factors Influencing Family Caregivers' Self-management of Acute Stroke Survivors.**

**Author(s): Ji Yeon Lee; Hee Kyung Chang**

Source: Korean Journal of Adult Nursing; Dec 2018; vol. 30 (no. 6); p. 669-680

Publication Date: Dec 2018

Publication Type(s): Academic Journal

Available at [Korean Journal of Adult Nursing](#) - from EBSCO (CINAHL Plus with Full Text)

Abstract: Purpose: The purpose of this study was to identify factors associated with family caregivers' self-management of acute stroke survivors. Methods: The study participants were 130 stroke survivors and their caregivers. Data on participant characteristics, depression, task difficulty, survivor memory and behavioral problem, and self-management were collected from July 1 to September 30, 2017 using a structured questionnaire. Data were analyzed with the SPSS/WIN 23.0 program for descriptive statistics, using independent t-test, one-way analysis of variance, Pearson's correlation coefficient and enter multiple regression analysis. Results: Significant factors associated with self-management for family caregivers were survivors' age, the presence of comorbidities, the relationship between caregivers and survivors, and the presence of an alternative caregiver. Self-management has negative correlations with depression, task difficulty, and the occurrence of survivor memory and behavioral problems. The determining factors affecting caregiver self-management were caregiver depression ( $\beta = -.46$ ,  $p < .001$ ) and survivor age ( $\beta = .32$ ,  $p = .004$ ), and their explanation power was about 37%. Conclusion: The results suggest that caregiver depression and survivor age should be considered in developing the nursing interventions to improve family caregiver self-management. Furthermore, findings underscore the importance of early screening and ongoing psychological assessments for depression in family caregivers of stroke survivors.

Database: CINAHL

### **Stroke Rehabilitation: Electrical Stimulation for the Hemiparetic Arm**

Author(s): RainesGass, Diane; Avital, Orna

Source: CINAHL Nursing Guide; Nov 2018

Publication Date: Nov 2018

Publication Type(s): Evidence-Based Care Sheet

Database: CINAHL

### **Chronic Exposure to Excess Noise May Increase Risk for Heart Disease, Stroke.**

Author(s):

Source: Audiology Online; Nov 2018 ; p. 1-1

Publication Date: Nov 2018

Publication Type(s): Academic Journal

Database: CINAHL

### **Patient experience of centralized acute stroke care pathways.**

Author(s): Perry, Catherine; Papachristou, Iliatha; Ramsay, Angus I.G.; Boaden, Ruth J.; McKeivitt, Christopher; Turner, Simon J.; Wolfe, Charles D.A.; Fulop, Naomi J.

Source: Health Expectations; Oct 2018; vol. 21 (no. 5); p. 909-918

Publication Date: Oct 2018

Publication Type(s): Academic Journal

Available at [Health Expectations](#) - from EBSCO (CINAHL Plus with Full Text)

Available at [Health Expectations](#) - from Europe PubMed Central - Open Access

Available at [Health Expectations](#) - from Unpaywall

Abstract:Background: In 2010, Greater Manchester (GM) and London centralized acute stroke care services into a reduced number of hyperacute stroke units, with local stroke units providing on-going care nearer patients' homes. Objective: To explore the impact of centralized acute stroke care pathways on the experiences of patients. Design: Qualitative interview study. Thematic analysis was undertaken, using deductive and inductive approaches. Final data analysis explored themes related to five chronological phases of the centralized stroke care pathway. Setting and participants: Recruitment from 3 hospitals in GM (15 stroke patients/8 family members) and 4 in London (21 stroke patients/9 family members). Results: Participants were impressed with emergency services and initial reception at hospital: disquiet about travelling further than a local hospital was allayed by clear explanations. Participants knew who was treating them and were involved in decisions. Difficulties for families visiting hospitals a distance from home were raised. Repatriation to local hospitals was not always timely, but no detrimental effects were reported. Discharge to the community was viewed less positively. Discussion and conclusions: Patients on the centralized acute stroke care pathways reported many positive aspects of care: the centralization of care pathways can offer patients a good experience. Disadvantages of travelling further were perceived to be outweighed by the opportunity to receive the best quality care. This study highlights the necessity for all staff on a centralized care pathway to provide clear and accessible information to patients, in order to maximize their experience of care.

Database: CINAHL

### **Validation of the caregiving knowledge questionnaire-my: Measuring knowledge regarding positioning and feeding among Malaysian informal caregivers of stroke patients.**

Author(s):

Source: Indian Journal of Palliative Care; Oct 2018; vol. 24 (no. 4); p. 406-410

Publication Date: Oct 2018

Publication Type(s): Academic Journal

Available at [Indian Journal of Palliative Care](#) - from EBSCO (CINAHL Plus with Full Text)

Available at [Indian Journal of Palliative Care](#) - from Europe PubMed Central - Open Access

Abstract:Aim: The majority of caregivers for stroke patients in Malaysia are informal caregivers, although there are no valid tools to measure their knowledge regarding caregiving. Therefore, this study validated the Caregiving Knowledge Questionnaire (CKQ-My) as an assessment of Malaysian stroke caregivers' knowledge regarding patient positioning and feeding. Methods: Back-to-back translation was used to produce a bilingual version of the questionnaire. Hand drawings were used to replace photographs from the original questionnaire. Face validity and content validity were assessed, and construct validity was determined by comparing responses from informal caregivers, medical students, and primary care doctors. Finally, the internal consistencies of the subscales were determined. Results: Pretesting showed that the translated version was sufficiently easy to understand. Internal consistency for the positioning subscale (28

items, Cronbach's  $\alpha = 0.70$ ) and feeding subscale (15 items, Cronbach's  $\alpha = 0.70$ ) was good. Mean scores for the positioning subscale for caregivers (mean:  $17.1 \pm 3.9$ ), medical students (mean:  $18.9 \pm 3.1$ ), and doctors (mean  $21.5 \pm 2.2$ ) were significantly different ( $F = 5.28$ ,  $P = 0.011$ ). Mean scores for the feeding subscale for caregivers (mean  $13.1 \pm 2.5$ ), medical students (mean  $16.1 \pm 1.9$ ), and doctors (mean  $16.1 \pm 2.4$ ) also differed significantly ( $F = 6.217$ ,  $P = 0.006$ ). Conclusions: CKQ-My has good internal consistency and construct validity for the subscales measuring stroke caregivers' knowledge about positioning and feeding of stroke patients. It has potential as an assessment of effectiveness of caregiver training and for future studies on long-term stroke outcomes in Malaysia.

Database: CINAHL

### **Effects of Modified Sit to Stand Training with Mental Practice on Balance and Gait in Post Stroke Patients.**

Author(s): Suchetha P. S.; Supriya B.; Krishna, Kovela Rakesh

Source: Indian Journal of Physiotherapy & Occupational Therapy; Oct 2018; vol. 12 (no. 4); p. 16-21

Publication Date: Oct 2018

Publication Type(s): Academic Journal

Available at [Indian Journal of Physiotherapy and Occupational Therapy - An International Journal](#) - from EBSCO (CINAHL Plus with Full Text)

Abstract:Background: Difficulty in balance and gait are the common problems following stroke which can limit the patient's functional independence. Modified sit to stand training by placing the paretic foot posteriorly benefits the patient in symmetrical weight bearing. Mental practice is a relatively new therapy, which is the symbolic rehearsal of a physical activity in the absence of any gross muscular movements.

Objectives: To determine the Effects of modified sit to stand training with mental practice on balance and gait in post stroke patients Method: 28 patients satisfying the inclusion criteria were randomly assigned into 2 groups. Experimental group received modified sit to stand training and mental practice along with the conventional therapy. Each group received intervention for 1hour session/day for 5 days a week for 2 weeks. Balance was measured using Berg Balance Scale and Gait was measured using Dynamic Gait Index. Results: Both the groups showed significant improvement in the balance and gait components in post training compared to pre training. After the intervention, BBS was highly significant with the p value 0.000 ( $p < 0.001$ ) in the experimental group compared to control group and DGI was statistically significant with the p value 0.003. ( $p < 0.005$ ) in experimental group than in the control group. Conclusion: Modified sit to stand training with mental practice is effective on balance and gait in post stroke patients.

Database: CINAHL

### **Factors affecting Recovery after Stroke: A Narrative Review.**

Author(s): Kakkad, Ashish; Rathod, Priyanshu V.

Source: Indian Journal of Physiotherapy & Occupational Therapy; Oct 2018; vol. 12 (no. 4); p. 22-27

Publication Date: Oct 2018

Publication Type(s): Academic Journal

Available at [Indian Journal of Physiotherapy and Occupational Therapy - An International Journal](#) - from EBSCO (CINAHL Plus with Full Text)

Abstract:Introduction: Stroke is a global health problem. It is second commonest cause of death and fourth leading cause of disability worldwide. After stroke, recovery is variable in different patients depending upon many factors. Aim: The aim of this narrative review is to examine the available literature related to

factors affecting recovery in stroke patients. Methodology: Literature was searched using many electronic databases. Additionally, reference list of most prominent articles were searched to increase the search accuracy, as much as possible. Studies which are evaluating the factors affecting post stroke recovery were included. Results: Results of studies evaluating the effect of different factors affecting recovery in stroke patients are contradictory for few factors. Demographic factors like age, gender, body mass index affect post stroke recovery in different outcomes. Out of these demographic data, age and gender have contradictory finding on post stroke recovery by different studies. Clinical features like side body of involved, duration of coma, duration of hospital stay, type of stroke, family history, and personal addiction history may or may not affect post stroke recovery. Associated co morbidities like hypertension, diabetes etc may have influence on functional outcome after stroke. Conclusion: Many literatures suggest different demographic, clinical, addiction history related factors etc affect post stroke recovery. Significance of this involvement is to become clearer.

Database: CINAHL

### **Exploring Resilience and Related Factors Among Patients With Stroke in the Recovery Stage.**

Author(s): Hui-Ping WANG; Chien-Chung YANG; Hsiu-Chin HSU

Source: Journal of Nursing; Oct 2018; vol. 65 (no. 5); p. 56-67

Publication Date: Oct 2018

Publication Type(s): Academic Journal

Available at [Hu li za zhi The journal of nursing](#) - from EBSCO (CINAHL Plus with Full Text)

Available at [Hu li za zhi The journal of nursing](#) - from ProQuest (Hospital Premium Collection) - NHS

Version

Abstract:Background: Resilience is known to affect the degree to which individuals adapt to the impact of stroke and its sequelae. However, few studies have examined resilience and related factors among stroke patients in Taiwan. Purpose: To explore resilience and related factors among stroke patients in the recovery stage. Methods: A cross-sectional and correlational study design was adopted. Convenience sampling was employed to recruit participants from the rehabilitation inpatient wards of a regional teaching hospital in northern Taiwan. A structured questionnaire, including the social support scale and the Chinese version of the resilience scale, was used for data collection. Data were analyzed using descriptive and inferential statistics and stepwise regression analysis. Results: A total of 128 stroke recovery in-patients who averaged  $57.2 \pm 11.6$  years of age and were predominantly male were recruited. The results of this study showed that the global resilience of participants was moderate and that a significantly positive correlation existed between global social support and resilience. Age, marital status, and global tangible social support accounted for 25.0% of the total variation in resilience. Conclusions/Implications for Practical: Age, marital status and global tangible social support were identified as the crucial predictive factors of resilience in stroke patients. The results support the recommendation that healthcare providers should acquire advanced knowledge and skills through in-service education, proactive caring, and encouraging patients to learn self-care in order to enhance rehabilitation motivation and confidence levels and subsequently promote disease recovery and the ability to adapt to life through cross-disciplinary medical team cooperation and supportive relationships.

Database: CINAHL

### **Situational Analysis: Community Care for Survivors of Stroke and Suggestions for Improving the Provision of Care.**

Author(s): Yaowapanon, Nootchayong; Buddhirakkul, Prapim; Srisuphan, Wichit; Senaratana, Wilawan; Potempa, Kathleen; Chontawan, Ratanawadee

Source: Pacific Rim International Journal of Nursing Research; Oct 2018; vol. 22 (no. 4); p. 372-385

Publication Date: Oct 2018

Publication Type(s): Academic Journal

Available at [Pacific Rim International Journal of Nursing Research](#) - from EBSCO (CINAHL Plus with Full Text)

Abstract: This descriptive qualitative study aimed to analyze the community care situation for survivors of stroke and provide suggestions for improving care. The study was conducted in a district of Chiang Mai Province. Purposive sampling was employed based on inclusion criteria to select 51 key informants comprised of 1) three health personnel, 2) 13 community leaders, 3) three local government officers, 4) 13 village health volunteers, and 5) 13 caregivers who took care of survivors of stroke. The data collection consisted of in-depth interviews and focus group discussions, based on the Expanded Chronic Care Model. Data were analyzed by content analysis. The results revealed that community care for survivors of stroke is mainly provided by family members. As well, our analysis revealed for survivors: 1) inadequate personal skills among caregivers and volunteers; 2) inefficient health services; 3) the lack of support for a caring system; 4) incomplete clinical information system; 5) no healthy public policy; and 6) lack of a supportive environment. We suggest that, to improve the care available to survivors of stroke, there needs to be: 1) development of supportive policies at both national and local government levels; 2) development and provision of guidelines for the care; and 3) a supportive caring system that includes health personnel, caregivers, and rehabilitation facilities, as well as support for the home and community-based environment. These results and suggestions will be useful to community nurses and stakeholders who are responsible to design caring for survivors of stroke.

Database: CINAHL

### **Stroke Rehabilitation: Gait Retraining Using Functional Electrical Stimulation**

Author(s): Kornusky, Jennifer; Avital, Orna

Source: CINAHL Nursing Guide; Sep 2018

Publication Date: Sep 2018

Publication Type(s): Evidence-Based Care Sheet

Database: CINAHL

### **The Improvement of Walking Ability Following Stroke: A Systematic Review and Network Meta-Analysis of Randomized Controlled Trials.**

Author(s): Mehrholz, Jan; Pohl, Marcus; Kugler, Joachim; Elsner, Bernhard

Source: Deutsches Arzteblatt International; Sep 2018; vol. 115 (no. 39); p. 639-677

Publication Date: Sep 2018

Publication Type(s): Academic Journal

Available at [Deutsches Arzteblatt international](#) - from EBSCO (CINAHL Plus with Full Text)

Available at [Deutsches Arzteblatt international](#) - from Europe PubMed Central - Open Access

Abstract: Background: Gait velocity and maximum walking distance are central parameters for measuring the success of rehabilitation of gait after a stroke. The goal of this study was to provide an overview of current evidence on the rehabilitation of gait after a stroke. Methods: A systematic review of randomized, controlled trials was carried out using network meta-analysis. The primary endpoint was gait velocity;

secondary endpoints were the ability to walk, maximum walking distance, and gait stability. The following interventions were analyzed: no gait training, conventional gait training (reference category), training on a treadmill with or without body weight support, training on a treadmill with or without a speed paradigm, and electromechanically assisted gait training with end-effector or exoskeleton apparatus. Results: The systematic search yielded 40 567 hits. 95 randomized, controlled trials involving a total of 4458 post-stroke patients were included in the meta-analysis. With respect to the primary endpoint of gait velocity, gait training assisted by end-effector apparatus led to significant improvement (mean difference [MD] = 0.16 m/s; 95% confidence interval [0.04; 0.28]). None of the other interventions improved gait velocity to any significant extent. With respect to one of the secondary endpoints, maximum walking distance, both gait training assisted by end-effector apparatus and treadmill training with body weight support led to significant improvement (MD = 47 m, [4; 90], and MD = 38 m, [4; 72], respectively). A network meta-analysis could not be performed with respect to the ability to walk (a different secondary endpoint) because of substantial inconsistencies in the data. The interventions did not differ significantly with respect to safety. Conclusion: In comparison to conventional gait rehabilitation, gait training assisted by end-effector apparatus leads to a statistically significant and clinically relevant improvement in gait velocity and maximum walking distance after stroke, while treadmill training with body weight support leads to a statistically significant and clinically relevant improvement in maximum walking distance.

Database: CINAHL

## **NEW SETS OF GUIDELINES TO HELP TACKLE STROKE AND HEART FAILURE.**

### **Author(s):**

Source: Australian Nursing & Midwifery Journal; Sep 2018; vol. 26 (no. 3); p. 8-8

Publication Date: Sep 2018

Publication Type(s): Periodical

Available at [Australian Nursing & Midwifery Journal](#) - from EBSCO (CINAHL Plus with Full Text)

Available at [Australian Nursing & Midwifery Journal](#) - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: The article reports that the organizations, the Heart Foundation and the Cardiac Society of Australia and New Zealand (CSANZ), have each unveiled a set of guidelines for preventing, diagnosing and managing atrial fibrillation (AF) and heart failure in adult patients. Topics discussed include the risks factors of AF, according to the guidelines, the guideline for heart failure focusing on managing co-morbidities and the non-pharmacological care options for patients with heart failure.

Database: CINAHL

## **Stroke, Ischemic: Treatment with Thrombolysis**

Author(s): Caple, Carita; Avital, Orna

Source: CINAHL Nursing Guide; Aug 2018

Publication Date: Aug 2018

Publication Type(s): Evidence-Based Care Sheet

Database: CINAHL

## **Eat an egg for breakfast, prevent a stroke?**

Author(s):

Source: Harvard Women's Health Watch; Aug 2018; vol. 25 (no. 12); p. 8-8

Publication Date: Aug 2018

Publication Type(s): Periodical

Available at [Harvard Women's Health Watch](#) - from EBSCO (CINAHL Plus with Full Text)

Available at [Harvard Women's Health Watch](#) - from ProQuest (Hospital Premium Collection) - NHS Version

Abstract: The article reports that periodical "Heart," has published a study which reveals that eating an egg can protect people against the cardiovascular diseases.

Database: CINAHL

### **Isolated Cerebellar Stroke Masquerades as Depression.**

Author(s): Othman, Zahiruddin; Misron, Siti Nor Fadhlina; Khalil Azizan, Mohammad Nabhan

Source: International Medical Journal; Aug 2018; vol. 25 (no. 4); p. 222-223

Publication Date: Aug 2018

Publication Type(s): Academic Journal

Available at [International Medical Journal](#) - from EBSCO (CINAHL Plus with Full Text)

Abstract: Objective: There are numerous reports on neurological conditions masquerading as psychiatric disorders. However, cerebellar stroke is not established as one of it. The 2 case reports will highlight that this masquerade is possible and the physician's high index of suspicion is the key to accurate diagnosis. Results: The case reports illustrated how a cerebellar stroke could be misdiagnosed as a depression due to its presenting symptoms of vertigo. The rarity of cerebellar stroke itself already posed a challenge for the physician to detect it but the mimicking of depression was the ultimate obstacle. Conclusion: The acute onset strongly suggests an organic cause. It is important to ascertain depression through depressive mood, and not by behavioral changes alone. Correct diagnosis of cerebellar stroke is of paramount importance so that early intervention can be delivered to the patient.

Database: CINAHL

## Library Resources

The books listed below are a selection of those that can be found at the library. To search the library catalogue in full, visit [swims.nhs.uk](http://swims.nhs.uk).

[More case studies in stroke : common and uncommon presentations \(2014\)](#)

Hennerici, Michael G.

Copies: 8

[Hennerici, Michael G. \(Editor\)](#) [WL410](#) Book



[Sleep, stroke, and cardiovascular disease \(2013\)](#)

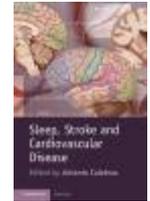
Culebras, Antonio

Copies: 2

[Culebras, Antonio](#)

[\(Editor\)](#)

[WF160](#) Book



[Stroke \(2013\)](#)

Barrett, Kevin; Meschia, James F.

Copies: 7

[Barrett, Kevin](#)

[\(Editor\)](#)

[WL410](#) Book



[The stroke book \(2nd ed\) \(2013\)](#)

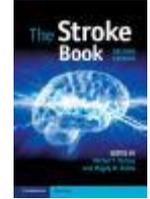
Torbey, Michel T.; Selim, Magdy H.

Copies: 22

[Torbey, Michel T.](#)

[\(Editor\)](#)

[WL410](#) Book



[Understanding stroke : for patients, carers and health professionals \(Rev ed\) \(2013\)](#)

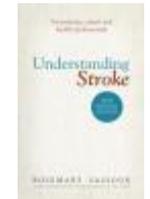
Sassoon, Rosemary

Copies: 4

[Sassoon, Rosemary](#)

[\(Author\)](#)

[WL410](#) Book



## In the News

### [Nurse shortages at \*stroke\* unit leave patients 'calling out for help'](#)

Nursing Times-12 Dec 2018

Staffing shortages at Mid Yorkshire Hospitals NHS Trust mean nurses are sometimes too hard-pressed to provide compassionate care, according to the organisation's latest inspection report.

### [Exclusive: Work to start on new career framework for \*stroke\* nurses](#)

Nursing Times-21 Oct 2018

A group of experts is to develop a new career framework for *stroke* nurses, which ... around knowledge and skills, pay bands and titles," she told *Nursing Times*.

### [Nurses urged to point patients towards new online \*stroke\* guide](#)

Nursing Times-8 Oct 2018

Nurses are being encouraged by the UK's sole nursing professor of *stroke* care to encourage patients to use a new website designed to help them manage their recovery.

### [Exploring the relationship between \*stroke\* and headache](#)

Nursing Times-8 Oct 2018

We still lack conclusive evidence on the complex links between headaches or migraine and stroke. Further research is needed to strengthen guidance and improve management.

### ['In stroke research, our priority is always the patient'](#)

Nursing Times-27 Jul 2018

Tranexamic acid is a cheap drug. It costs less than £15 per patient and is widely available. It could transform treatment of stroke caused by intracerebral haemorrhage.

### [NHS 10 year plan pledges improvements in stroke, heart attacks, and ...](#)

The BMJ-7 Jan 2019

The NHS in England has published its much anticipated long term plan for the next decade, with a vow to improve outcomes for people with major physical conditions alongside a substantial increase in funding for mental health and primary care.

### [Rise in diabetes 'to cause surge in heart disease and strokes'](#)

BBC News-22 Aug 2018

This could lead to a 29% rise in heart attacks and *strokes* linked to diabetes, the ... is likely to put an "unprecedented burden" on the *NHS*, the BHF warned.

### [NHS Borders apologises for stroke diagnosis failure](#)

BBC News-24 Sep 2018

A health board has apologised after doctors failed to diagnose that a patient had suffered a stroke.

### [Margate protest against changes to stroke services](#)

BBC News-6 Oct 2018

Health campaigners in east Kent have been protesting against planned changes to stroke services.

### [My husband's stroke showed me the best and worst of the NHS](#)

The Guardian-19 Jul 2018

I knew that Sam had had a *stroke* – thanks to the ACT Fast campaign – and he needed a proper diagnosis and treatment plan.

### [More stroke patients to be offered life-saving procedure](#)

NICE-23 Nov 2018

Currently, thrombectomy is only offered to people with *stroke* up to 12 hours after ... or have access to 24 hour care, which will have an impact on *NHS* resources.

---

This current awareness bulletin contains an inexhaustive selection of information that has not been critically appraised by library staff. It is therefore the responsibility of the reader to appraise this information for accuracy and relevance.

For further information or support please contact **Yeovil Academy Library, Level 4, Yeovil District Hospital, Higher Kingston, Yeovil, BA21 4AT; tel 01935 38(4495) or 01935 38(4697), [library@ydh.nhs.uk](mailto:library@ydh.nhs.uk) or visit the library blog at [yeovildh.wordpress.com](http://yeovildh.wordpress.com).**