



Facts



About

55,000

more women than men have a stroke each year¹.



A stroke occurs every **40 seconds** in the United States⁴.

Studies show that working with a healthcare professional **may reduce personal risk** of a stroke.

Increased awareness about **stroke symptoms** and risk factors can prevent some strokes.

Remember:

B Balance **E** Eyes **F** Face **A** Arms **S** Speech Swallow **T** Time



» shepherd.org/stroke-resources

The southeastern United States, including Georgia, is known as the

"Stroke Belt"⁴.*

*This data represents stroke-related deaths among U.S. adults aged 35+.



0:04

On average, one American dies from stroke every **four minutes**⁴.

911



Call 911 immediately. Early intervention may dramatically improve outcomes.



Strokes kill nearly **twice as many American women** every year as breast cancer².

Nonmodifiable Risk Factors

- » Risk increased with age
- » One out of four Hispanic men are at risk for stroke
- » Two out of five black men are at risk for stroke
- » Family history
- » History of previous stroke
- » Stroke kills twice as many women as breast cancer does, making stroke the 3rd leading cause of death for women

Modifiable Risk Factors

- » High blood pressure
- » High cholesterol
- » Atrial fibrillation (irregular/rapid heart rate)
- » Atherosclerosis (thickening of artery walls)
- » Circulation problems
- » Obesity
- » Physical inactivity
- » Tobacco use
- » Alcohol use
- » Diabetes

Do you know if you are at risk?

Visit mylifecheck.heart.org/stroke.org/riskfactors to find out.



Lifestyle Changes



Comply with your **medicine prescriptions.**

Use technology, such as a pillbox with a timer, a phone alarm or watch alarm, to get reminders to take your medication.



Get a health checkup.

For diagnosis, risk and management of blood pressure, blood sugar, lipid levels, weight and vascular disease.



» heart.org/HighBloodPressure

» heart.org/diabetes » heart.org/cholesterol

Eat a healthy balanced diet.

Consume lots of fresh fruits and vegetables, foods high in dietary fiber (e.g., whole grains), foods low in saturated fat, low fat dairy products, protein from plant sources and lean meats, foods low in salt.

choosemyplate.gov

Research shows that high blood pressure can be prevented - and lowered -

by following the Dietary Approaches to Stop Hypertension (DASH) eating plan, which includes eating less salt and sodium.

dashdiet.org



Exercise regularly.

Studies show that for every hour of walking, life expectancy may increase by two hours.



Walking for as few as **30 minutes**

a day provides heart health benefits. Walking is the single most effective form of exercise to achieve heart health.

heart.org/GettingHealthy



Quit smoking.

Smoking decreases your tolerance for physical activity and increases the tendency for blood to clot.



Stop alcohol use.

Alcohol use has been linked to stroke in many studies. Alcohol can negatively interact with drugs you are taking.



» smokefree.gov



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Mental Health

Stress, and diagnoses such as depression and anxiety may increase your risk for stroke, and lead to worse outcomes after stroke. Exercise training, health education, and emotional support may reduce stroke risk and mortality. Other ways of managing stress include yoga, meditation and mindfulness, and other leisure activities such as gardening, art, and fishing.⁵

- References:**
1. American Stroke Association - stroke.org
 2. National Center for Health Statistics. Underlying Cause of Death 1999-2018, Multiple Cause of Death Files, 1999-2018. CDC WONDER Online Database. Atlanta, GA: Centers for Disease Control and Prevention; 2020. Accessed August 5, 2020.
 3. Fang J, Keenan NL, Ayala C, Dai S, Merritt R, Denny CH. Awareness of stroke warning symptoms—13 states and the District of Columbia, 2005. MMWR 2008;57:481-5.

4. cdc.gov/dhdsp/maps/hds-widget.htm
5. Annie L Ryder, Beth E Cohen, Evidence for depression and anxiety as risk factors for heart disease and stroke: implications for primary care, Family Practice, Volume 38, Issue 3, June 2021, Pages 365-367, <https://doi.org/10.1093/fampra/cmab031>

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