

A “GET REAL” CONVERSATION ABOUT STROKE

Most Americans have had some proximity to stroke, perhaps a grandparent, a coworker, an in-law, or even themselves.

Stroke treatment, however, has improved significantly in the past decade, making it much more likely that patients survive and thrive after stroke. That’s why it’s so important to separate stroke myths from facts.

MYTH: Strokes are rare.

FACT: Stroke is the fifth leading cause of death in the U.S. and the leading cause of adult disability. There are [nearly 800,000](#) strokes in America each year, or over 2,000 each day.

MYTH: You can survive a stroke, but there’s no chance to reduce your likelihood of disability.

FACT: Your odds of surviving and regaining your independence are better than ever if you get care right away. Call 911 for any symptom of stroke so that you can be triaged and transported quickly to an appropriate stroke care facility.

MYTH: It's probably not a stroke, so it's better to rest and see if it goes away.

FACT: Wait and see is the riskiest thing you can do: [2 million brain cells](#) die EACH MINUTE blood flow is blocked to the brain. Oftentimes people who could have survived a stroke or lived without a disability have second-guessed their condition to the point that the stroke has already done its damage.

MYTH: All strokes are the same.

FACT: Not even close. In addition to there being two kinds of stroke — ischemic (clot) and hemorrhagic (bleeding) — there are various severity levels depending on the location and size of a clot. The best way to find out is to call 911 so that trained emergency personnel can triage and transport you quickly to the facility that can best treat your stroke.

MYTH: There’s no easy way to tell if you’re having a stroke versus some other medical problem.

FACT: BE FAST is the key to identifying stroke symptoms — Balance, Eyes, Facial drooping, Arm weakness, Slurred speech, Time to call 911.

MYTH: Most people overreact to stroke symptoms.

FACT: Stroke is life-threatening and time-sensitive. Taking symptoms seriously is the best way to ensure that you survive and increase your chances of living with little to no disabilities.

MYTH: If you have stroke symptoms, take an aspirin.

FACT: Taking aspirin can make [some strokes worse](#). Decisions about care should be made quickly by professionals. You won't know the nature and severity of your stroke until you get medical care by calling 911.

MYTH: It's not serious if I don't have more than one symptom of stroke.

FACT: The number or even severity of your stroke symptoms does not equal how dangerous or serious a stroke can be. Only medical professionals can determine the kind of stroke you are having and what kind of treatment you need. Call 911 for even one stroke symptom.

MYTH: I'm pretty young and healthy. This can't be a stroke.

FACT: Strokes do not just happen to the elderly or the "unhealthy." Athletes, teenagers, and even babies can have strokes. Strokes are also increasing among [younger and middle-aged adults](#).

MYTH: There's not much you can do to stop a stroke once it happens.

FACT: The quicker you get to treatment, the better your chances of recovering quickly from stroke. Some patients are able to walk out of the hospital with no deficits by the next day. Even 24 hours after the onset of stroke symptoms, doctors can remove a clot in the brain, saving the patient's life and improving their chance of regaining independence. Only about [one-third](#) of stroke patients eligible for a clot-removing procedure called thrombectomy are actually accessing it.

MYTH: It's too expensive to call an ambulance.

FACT: Calling an ambulance ensures a care team is diagnosing your condition right away. It also will help you get to a more appropriate hospital for your condition (instead of just what's closest) and ensures you will be seen immediately upon arrival. Receiving treatment specific to your stroke will also save on a mountain of costs down the road, like rehabilitation and recovery, lost wages due to lost work, and any financial implications of having someone else care for you. For every minute saved in transfer to the appropriate care for stroke, there is [\\$1,000 in savings](#) on medical costs for short- and long-term care.

MYTH: I'll get someone to drive me to the hospital. It will be quicker.

FACT: The person driving you doesn't know what is going on in your brain or which type of facility is required for your stroke. Unless you arrive by ambulance, you could be relegated to a waiting room where your brain cells will quickly die.

MYTH: An ambulance might not take me to the "good" hospital.

FACT: First responders know the capabilities of hospitals in their area better than anyone. They know where specialty care is available, which is what you need to survive your stroke.

MYTH: Calling 911 is more trouble than it's worth.

FACT: Calling 911 is what people do when they want to survive a stroke, for themselves and for their families. First responders WANT the opportunity to help you right away so that you have the best chance to make a full recovery.

MYTH: It takes a long time to recover from stroke.

FACT: With new treatments and procedures available, patients who get care quickly are more likely to leave the hospital quickly and have a shorter rehab. [Some patients](#) who receive thrombectomy quickly are able to leave the hospital in a day or two with no deficits at all.