

Let's Talk About Hemorrhagic Strokes

Did I have a hemorrhagic stroke?

Not all strokes are caused by blood clots that block an artery. About 13 percent happen when a blood vessel ruptures in or near the brain. This is called a *hemorrhagic* (hem-o-RAYG-ik) stroke. (See figure.)

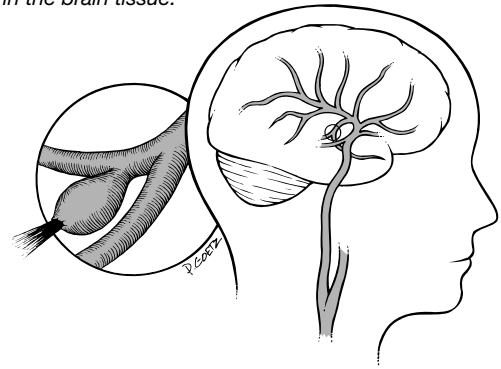
You may have many diagnostic tests before your doctor determines that you had a hemorrhagic stroke. Hemorrhagic strokes are different from ischemic strokes in many ways.

- The fatality rate is higher and overall prognosis poorer for those who have hemorrhagic strokes.
- People who have hemorrhagic strokes are younger.

Another type of hemorrhagic stroke, called a subarachnoid hemorrhage, can occur when an aneurysm (a blood-filled pouch that balloons out from an artery) ruptures, flooding the space between the skull and the brain with blood.

- This kind of stroke is often associated with a very severe headache, nausea and vomiting.
- Usually the symptoms appear suddenly.
- A transient ischemic attack (TIA) or any other stroke warning sign may not precede this type of stroke.

Ruptured artery in the brain stops oxygen supply to the surrounding areas of the brain. When this happens, blood collects in the brain tissue.



Are all hemorrhagic strokes the same?

There are two kinds of hemorrhagic stroke. In both, a blood vessel ruptures, disrupting blood flow to part of the brain.

Subarachnoid (sub-ah-RAK-noid) **hemorrhage:**

- Occurs when a blood vessel on the surface of the brain ruptures and bleeds into the space between the brain and the skull.
- A ruptured aneurysm is often caused by high blood pressure. An aneurysm is a blood-filled pouch that balloons out from an artery wall.

Intracerebral hemorrhage:

- Occurs when a blood vessel bleeds into the tissue deep within the brain.
- Chronically high blood pressure or aging blood vessels are the main causes of this type of stroke.

In addition to high blood pressure, factors that increase the risk of hemorrhagic strokes include: 1) cigarette smoking; 2) use of oral contraceptives (particularly those with high estrogen content); 3) excessive alcohol intake; and 4) use of illegal drugs.

How are hemorrhagic strokes treated?

Because hemorrhages may be life-threatening, hospital care is required. Medication can control high blood pressure. Other medicine may be prescribed to reduce the brain swelling

that follows a stroke. Surgery may be needed depending on the cause of the hemorrhage. Surgery could be done to repair an aneurysm or remove a blood clot.






How can I learn more?

- Talk to your doctor, nurse or other healthcare professionals. Ask about other stroke topics. This is one of many *Let's Talk About Stroke* fact sheets.
- For more information about stroke, or to get more fact sheets, call the American Stroke Association at 1-888-4-STROKE (1-888-478-7653) or visit us online at StrokeAssociation.org.
- If you or someone you know has had a stroke, call the American

Stroke Association's "Warmline" at 1-888-4-STROKE (1-888-478-7653), and:

- ✓ Speak with other stroke survivors and caregivers trained to answer your questions and offer support.
- ✓ Get information on stroke support groups in your area.
- ✓ Sign up to get *Stroke Connection*, a free magazine for stroke survivors and caregivers.

What are the warning signs of stroke?

-  **Sudden weakness or numbness of the face, arm or leg, especially on one side of the body**
-  **Sudden confusion, trouble speaking or understanding**
-  **Sudden trouble seeing in one or both eyes**
-  **Sudden trouble walking, dizziness, loss of balance or coordination**
-  **Sudden, severe headaches with no known cause**



Learn to recognize a stroke.
Because time lost is brain lost.

Today there are treatments that may reduce the risk of damage from the most common type of stroke, but only if you get help quickly — within three hours of your first symptoms.

Call 9-1-1 immediately if you experience these warning signs!

Do you have questions for your doctor or nurse?

Take a few minutes to write your own questions for the next time you see your healthcare provider:

Will I have to worry about a hemorrhagic stroke occurring again?

How can I control high blood pressure?

What can I do to help prevent another stroke?

What else should I know about treatment options?

