

# Mob Hlab Ntsha Hlwb Txhaws (Ischemic Stroke)

Ib qho mob ischemic stroke yog ib hom mob stroke uas tshwm sim los ntawm ntshav mus tsis txog saum lub hlwb. Feem ntau hom mob ischemic stroke sim thaum ib txoj hlab ntshav liab loj mus rau saum lub hlwb nqawm los sis muaj roj khub txhaws lawm uas hu ua roj khub (plaque). Qhov roj khub no ua rau txiav cov ntshav khiav mus los rau saum cov tsiq paj hlwb.

## Txhua yam mob ischemic strokes puas zoo ib yam?

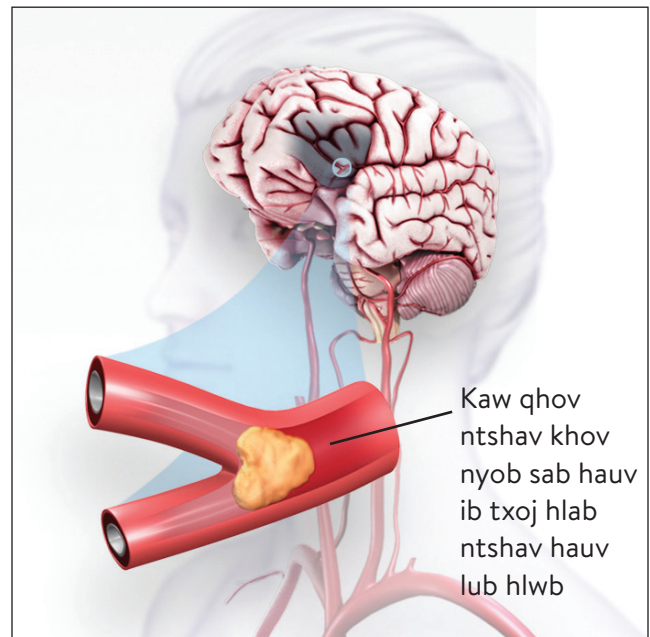
Nws muaj 2 hom mob ischemic strokes:

- ♦ Hom mob thrombotic strokes yog tshwm sim los ntawm thooj tshav khub rau ntawm cov hlab ntshav hlwb, los sis muaj tej yam txhaws (thrombus), nyob rau hauv txoj hlab tshav loj mus rau pem lub hlwb. Thooj ntshav ntawd thaiv cov ntshav khiav mus los rau pem lub hlwb. Ntshav khov feem ntau lawm tshwm sim nyob rau hauv cov hlab ntshav loj uas tau puas tsuaj los ntawm roj khub.
- ♦ Hom mob embolic strokes tshwm sim los ntawm ib thooj ntshav ntw tshaws, los sis ntshav khov (embolus), uas raug tsim muaj nyob rau hauv qee phab ntawm lub cev, feem ntau lawm nyob rau hauv cov hlab ntshav plawv los sis rau cov hlab ntshav loj ntawm lub caj dab. Cov ntshav khov ntw mus raws cov ntshav khiav thiab thaiv ib txoj hlab ntshav nyob sab hauv los sis tawm mus rau saum lub hlwb.

## Yuav ntsuam xyuas tus mob ischemic strokes tau li cas?

Thaum ib tug neeg muaj cov yeeb yam mob stroke los sis muaj ib qho TIA (transient ischemic attack), ib tus kws kuaj mob (clinician) yuav nrhiav cov ntaub ntawv thiab nqis tes ntsuam xyuas. Tus kws kuaj mob yuav:

- ♦ Rov qab saib xyuas seb muaj dab tsi tshwm sim
- ♦ Paub txog keeb kwm kev noj qab haus huv ntawm koj yav dhau los ua ntej yuav muaj mob stroke



**Kev muaj mob ischemic stroke yog tshwm sim thaum muaj ib qho ntshav khov, los sis muaj ntshav khov ntau, ntshav txhaws ib txoj hlab ntshav thiab ua rau cov ntshav khiav mus los rau hauv lub hlwb tsis tau.**

- ♦ Tshuaj xyuas koj lub cev txog feem cuam tshuam ntawm kev mob stroke thiab lwm yam cov yam ntxwv rau kev kho mob
- ♦ Txib kom muaj cov kev sim ntshav
- ♦ Siv CT los sis MRI yees duab ntawm lub hlwb
- ♦ Kawm kom paub txog lwm qhov tshwm sim ntawm kev ntsuam xyuas tus kab mob uas tej zaum koj kuj yuav siv

## Txhua yam mob ischemic stroke puas zoo ib yam?

Kev kho mob loj (acute) yog pawg kws kho mob yuav tsum tau kho kiag tam sim thaum muaj mob stroke. Lub hom phiaj ntawm kev kho mob loj yog pab saib xyuas kom lub hlwb txhob raug mob. Yuav pab txo kom lub hlwb txhob raug mob, pawg kws kho mob yuav pab ua kom cov ntshav khiav tau mus los li qub nyob rau ntawm phab hlawb uas tau muaj tshav txhaws.

Alteplase yog ib hom tshuaj kho mob uas tso cov tshuaj raws txoj xov IV mus kho ischemic stroke. Alteplase kho qhov ntshav khov uas los txhaws ntawm txoj hlab ntshav khiav mus los rau saum lub hlwb. Alteplase tsuas pab tau yog tias tau muab cov tshuaj rau nyob rau hauv ncuaj sij hawm 4.5 teev txij thaum muaj yam ntxwv mob stroke. Qhov yuav pab tau ntau npaum li cas yog nce raws qhov koj tau txais cov tshuaj sai npaum li cas tom qab pib muaj yam ntxwv mob stroke. Yog li ntawd, yog koj muaj yam ntxwv mob stroke, koj yuav tsum tau txais kev kho mob kiag tam sim ntawd. Koj yim tau txais kev kho sai npaum li cas alteplase, koj yim muaj sij hawm yuav zoo ntau npaum ntawd.

Lwm hom kev kho mob rau kev mob stroke yog hu ua kev nqus qhov ntshav txhaws tawm (medical thrombectomy). Nyob hauv qhov txheej txheem no, cov kws kho mob ua tau muaj kev kawm tshwj xeeb yuav siv ib lub yam cuab yeej uas phim rau qhov mob los mus tshem qhov ntshav khov tawm. Txhawm rau muab qhov ntshav khov tshem tawm, cov kws kho mob yuav siv ib txoj xov hlau (nyias, khoob) ntxig mus rau txoj hlab ntshav loj ntawm puab tais mus rau ntawm koj lub hlwb. Kiag thaum txoj xov hlau npaj txhij, tus kws kho mob yuav siv ib lub cuab yeej me me los ua kom qhov tshav khov tawg los sis muab qhov ntshav khov tshem tawm.

Cov kws kho mob yuav tsum siv qhov kev nqus qhov ntshav khov tawm nyob rau hauv ncuaj sij hawm 24 teev thaum pib muaj tus yam ntxwv mob stroke.

## Puas muaj lwm txoj hauv kev tiv thaiv kev mob ischemic stroke tau li cas?

Thaum ib tug neeg muaj mob stroke, lawv yuav muaj feem muaj lwm yam mob. Thaum uas pawg kws kho mob paub txog feem cuam tshuam ua rau muaj mob stroke, lawv yuav qhia cov kev kho mob raws li hauv qab no los sis cov txheej txheem los pab txo qhov mob stroke zaum thib ob:

- ♦ Cov tshuaj antiplatelet medicines (xws li tshuaj aspirin thiab tshuaj clopidogrel) thiab cov tshuaj anticoagulants (xws li cov tshuaj warfarin) yuav pab ua rau cov ntshav tsis tuaj yeem khov tau. Kev txo cov ntshav khov tuaj yeem yog lub luag hauj lwm tseem ceeb los pab tiv thaiv mob stroke.
- ♦ Carotid endarterectomy yog ib qho kev phais mob ntshav khov los sis roj khub (fatty plaque) kom raug muab nws tshem tawm ntawm txoj hlab ntshav liab loj (carotid artery) nyob rau hauv koj lub caj dab. Kev muab cov ntshav txhaws tshem tawm rov qhib txoj hlab ntshav liab thiab ua kom cov ntshav khiav mus los rau saum lub hlwb tau zoo. Carotid endarterectomy tsuas yog siv rau cov neeg uas muaj hlab ntshav txhaws loj xwb.
- ♦ Qee zus cov kws kho mob siv lub balloon angioplasty thiab implantable screens uas hu ua txoj xov khoob (stents) ntxig nkag mus kho thiab txo cov roj khub rau ntawm txoj hlab ntshav loj.

Qee zus qhov mob stroke yog thawj tus yam ntxwv mob ntawm lwm cov tso mob xws li ntshav siab, ntshav qab zib, txoj hlab ntshav plawv me (atrial fibrillation) (uas yog ib qho muaj mob ntawm lub plawv dhia tsis xwm yeem), los sis lwm tus kab mob txoj hlab ntshav (vascular disease). Yog tau ntsuam xyuas pom muaj tej hais los no, koj tus kws kuaj mob yuav qhia hom kev kho mob kom tsim nyog rau koj.

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Ischemic Stroke (Hmong)  
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# Ischemic Stroke

An ischemic stroke is a stroke caused by lack of blood reaching part of the brain. Most ischemic strokes happen when an artery to the brain becomes narrowed or clogged with fatty deposits called plaque. The plaque cuts off blood flow to brain cells.

## Are all ischemic strokes the same?

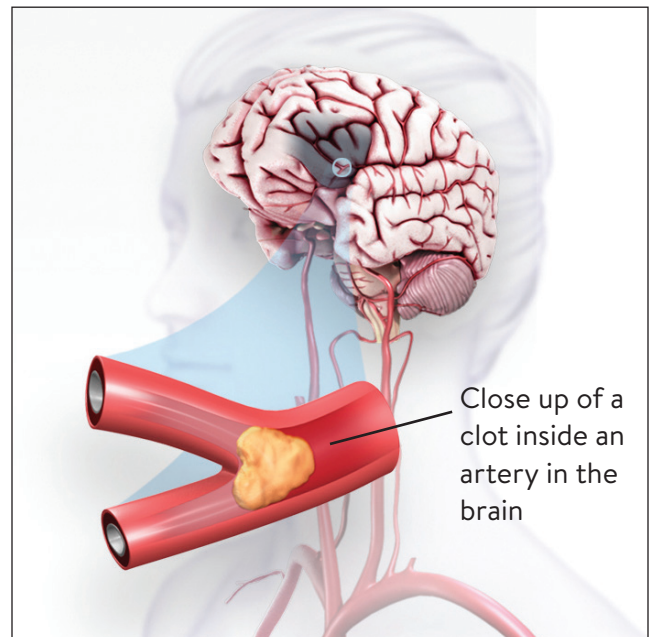
There are 2 types of ischemic strokes:

- ♦ Thrombotic strokes are caused by a blood clot, or thrombus, in an artery going to the brain. The clot blocks blood flow to part of the brain. Blood clots usually form in arteries damaged by plaque.
- ♦ Embolic strokes are caused by a wandering clot, or embolus, that has formed in some other part of the body, usually in the heart or neck arteries. Clots travel in the bloodstream and block a blood vessel in or leading to the brain.

## How are ischemic strokes diagnosed?

When someone has symptoms of a stroke or a TIA (transient ischemic attack), a clinician will gather information and make a diagnosis. The clinician will:

- ♦ Review what happened
- ♦ Get a history of your health in general before the stroke
- ♦ Examine your body for the effects of the stroke and other medical conditions
- ♦ Order blood tests
- ♦ Get a picture of the brain using CT or MRI
- ♦ Study the results of other diagnostic tests that you might need



**An ischemic stroke happens when a clot, or mass, blocks a blood vessel and cuts off blood flow to the brain.**

## Are all ischemic strokes the same?

Acute treatment is the treatment the medical team gives right away when a stroke happens. The goal of acute treatment is to keep the amount of brain injury as small as possible. To limit injury to the brain, the medical team works quickly to bring back blood flow to the part of the brain where the blood was blocked.

Alteplase is a type of medicine that is given through an IV to treat ischemic stroke. Alteplase works by breaking up the clots that block blood flow to the brain. Alteplase can only help if given within 4.5 hours from beginning of stroke symptoms. How much it helps depends on how quickly you get it after the beginning of stroke symptoms. Therefore, if you have stroke symptoms, you must get medical help right away. The sooner you can receive alteplase, the greater your chance of recovery.

Another type of treatment for stroke is called a mechanical thrombectomy. In this procedure, specially trained clinicians try to remove the blood clot by using a suitable device. To remove the clot, clinicians thread a catheter (thin, hollow tube) through an artery in your groin up to your brain. Once the catheter is in place, the clinician uses a tiny mechanical device to break up or remove the clot.

Clinicians must do a mechanical thrombectomy within 24 hours of the first symptoms of stroke.

## How can another ischemic stroke be prevented?

When someone has a stroke, they are at risk for having another. Once the medical team identifies what caused the stroke, they may recommend the following treatments or procedures to reduce the risk of a second stroke:

- ♦ Antiplatelet medicines (such as aspirin and clopidogrel) and anticoagulants (such as warfarin) limit the blood's ability to clot. Reducing clots can play an important role in preventing a stroke.
- ♦ Carotid endarterectomy is a surgery in which a blood clot or fatty plaque is removed from the carotid artery in your neck. Removing the blockage reopens the artery and the blood flow to the brain. A carotid endarterectomy is only done in people who have a large blockage.
- ♦ Doctors sometimes use balloon angioplasty and implantable screens called stents to treat and reduce fatty plaque clogging a vessel.

Sometimes a stroke is the first sign a person has of other health conditions, such as high blood pressure, diabetes, atrial fibrillation (which is a heart rhythm disorder), or other vascular disease. If any of these are diagnosed, your clinician will prescribe appropriate treatment.

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Ischemic Stroke (Hmong)  
(5/2019) ©HealthPartners

# Cov Feem Yuav Ua (Risk Factors) rau muaj Mob Ua Rau Hlwb Puas (Stroke)

Kev paub txog cov feem yuav ua rau muaj mob stroke yog thawj kauj ruam los tiv thaiv mob stroke. Koj tuaj yeem hloov los sis kho tau qee yam yuav ua rau muaj mob tau, tab sis koj tsis tuaj yeem ua tau lwm yam. Kev nquag mus kuaj mob thiab paub txog feem yuav ua rau muaj mob, koj thiaj paub npaj rau yam uas koj tuaj yeem hloov tau thiab txo kom txhob muaj feem yuav ua rau muaj mob stroke.

## Yam yuav ua rau muaj mob uas kuv tuaj yeem hloov los sis kho tau yog dab tsi?

Feem yuav ua rau muaj mob uas koj tuaj yeem hloov los sis tswj xyuas tau muaj xws li nram qab no:

### Ntshav siab (high blood pressure)

Qhov no yog ib qho muaj feem tseem ceeb uas yuav ua rau muaj mob stroke vim nws yuav ua rau mob stroke tau. Paub txog koj cov ntshav siab thiab nquag mus kuaj mob txhua xyoo. Theem ntshav siab uas nyob rau theem zoo yuav tsum qis dua 120/80. Yog koj raug qhia tias koj muaj ntshav siab, yuav tau sib tham nrog koj tus kws kuaj mob (clinician) thiaj li yuav pab txo tau nws.

### Keu haus luam yeeb (tobacco use)

Keu haus luam yeeb yuav ua rau cov hlab ntshav dub loj puas. Qhov no tuaj yeem ua rau cov hlab ntshav dub loj txhaws, thiaj li yuav ua rau muaj mob stroke. Tsis txhob haus luam yeeb thiab zam tsis txhob nyob ze ntawm cov pa luam yeeb (second-hand smoke). Yog cov pa luam yeeb ntawm lwm tus neeg haus luam yeeb uas koj tau nqos nkag mus thaum ua pa.

### Kab Mob Ntshav Qab Zib (diabetes)

Keu muaj kab mob ntshav qab zib yuav ua rau koj muaj mob stroke tshaj ob npaug. Sib tham nrog koj tus kws kuaj mob seb yuav tswj xyuas tus kab mob ntshav qab zib li cas.

### Muaj roj cholesterol ntau (high cholesterol)

Keu muaj roj cholesterol ntau yuav muaj feem ua rau cov hlab ntshav loj txhaws (arteries). Yog ib txoj hlab ntshav loj mus rau pem lub hlwb txhaws, yuav ua rau mob stroke tau.

### Keu tsis nquag ua hauj lwm (physical activity) thiab rog dhau heev lawm (obesity)

Keu tsis nquag ua hauj lwm, rog dhau heev lawm, los sis muaj ob yam hais los no tuaj yeem ua rau koj muaj feem yuav muaj mob plawv tau (heart disease) thiab mob stroke.



Paub txog koj cov ntshav siab thiab nquag mus kuaj mob txhua xyoo.

### Txoj hlab ntshav loj ntawm caj dab (carotid) tus kab mob txoj hlab ntshav los sis lwm yam kab mob rau txoj hlab ntshav

Cov hlab ntshav loj ntawm caj dab yog feem xa ntshav mus rau saum koj lub hlwb feem ntau. Yog ib txoj hlab ntshav muaj roj khub (plaque) rau sab hauv txoj hlab ntshav no yuav ua rau muaj ntshav khov los txhaws. Qhov no ua rau muaj mob stroke.

### Keu uas mob ntshav tsis txaus ib pliag, los sis TIA (transient ischemic attacks, los sis TIA)

Nco ntsoov tias kev kho TIA tuaj yeem pab txo tsis ua rau muaj mob stroke. TIA ua rau muaj cov yeeb yam mob zoo li mob stroke, tab sis feem ntau yeej tsis cuam tshuam mus ntev. Paub txog cov yeeb yam mob ntawm TIA thiab nrhiv kev kho mob pab uas yog hu rau 911 kiag tam sim ntawd yog koj muaj cov yeeb yam mob TIA.

### Atrial fibrillation (Cov hlab ntshav me hauv lub hlwb, AFib) los sis lwm yam kab mob plawv

Cov hlab ntshav me hauv lub hlwb yog ib qho ua rau lub plawv dhia tsis xwm yeem. Lub plawv ib txwm yeej dhia tau xwm yeem tas li. AFib txhais tau tias lub plawv dhia tau tsis xwm yeem. Qhov no vim cov ntshav khov rau hauv lub plawv. Cov ntshav khov no

yuav ua rau cov ntshav tsis khiav mus los tau raws cov hlab ntshav loj mus rau hauv lub hlwb. Cov ntshav khov nyob rau hauv cov hlab ntshav loj thiab ua rau muaj mob stroke. AFib ua rau muaj feem muaj kab mob stroke tau txog tsib npaug. Cov neeg uas muaj lwm hom kab mob plawv yeej muaj feem yuav ua rau muaj mob stroke tau siab dua.

### **Muaj qee cov ntshav tsis zoo (certain blood disorders)**

Muaj cov keeb ntshav liab ntau heev (red blood cell) tuaj yeem ua rau nquag muaj ntshav khov, yuav ua rau muaj feem muaj mob stroke tau. Sick cell anemia (Mob keeb ntshav tsuag nkhaus li rab liag) yuav ua rau muaj feem muaj mob stroke tau vim “qhov nkhaus li rab liag” (sickled)—muaj tus yam txawv tsis zoo li ib txwm—cov keeb ntshav nyob puab ntawm cov hlab ntshav loj rau sab hauv thiab thaiv cov ntshav khiav mus los.

### **Haus cawv ntau heev (extensive alcohol intake)**

Kev haus cawv ntau heev tuaj yeem ua rau muaj ntshav siab tau. Kev haus dej (binge) cawv ua si, uas yog haus ntau heev nyob rau ib lub sij hawm luv, tuaj yeem ua rau muaj mob stroke tau. Txo kev haus cawv kom tsawg. Koj tus kws kuaj mob tuaj yeem qhia rau koj.

### **Kev siv yeeb tshuaj txhaum cai (illegal drug use)**

Cov yeeb tshuaj no muaj xws li cocaine (yeeb dawb), tshuaj ecstasy, amphetamines (tshuaj nees), thiab tshuaj heroin yuav muaj feem ua rau muaj mob stroke tau.

### **Kev ncia pa los sis tsis ua pa xwm yeem thaum tsaug zog (sleep apnea)**

Kev ncia pa thaum tsaug zog yog ib qho muaj mob los ntawm kev ua pa tsis xwm yeem thaum lub sij hawm tsaug zog. Ib tus neeg uas ncia pa thaum tsaug zog thaum lub sij hawm nres tsis ua pas txog li ob peb xis nkoos mam rov qab ua pa dua. Kev ncia pa ua rau cov cua auv xis xees xyaws cov ntshav muaj tsawg dua qub thiab yuav ua rau muaj ntshav siab thaum lub sij hawm tsaug zog. Kev ncia pa yuav muaj feem ua rau muaj mob stroke, plawv nres thiab lwm yam ntxwv mob loj. Kev yim ncia pa ntau zuz zus ntxiv yuav ua rau muaj feem muaj mob ntau.

## **Yam yuav ua rau muaj mob uas kuv tsis tuaj yeem tswj tau yog dab tsi?**

Yam muaj feem yuav ua rau muaj mob uas koj tsis tuaj yeem tswj xyuas tau los sis hloov tau:

### **Hnub nyoog laus**

Mob stroke cuam tshuam rau txhua tus neeg tsis hais hlaus hluas. Tab sis koj yim laus, koj yim muaj feem yuav tau tus mob stroke.

### **Txiv neej poj niam (gender)**

Cov poj niam yuav muaj feem muaj mob stroke ntau dua cov txiv neej. Siv cov tshuaj ntsiav tswj cev xeeb me nyuam thiab kev caiv kom txhob xeeb me nyuam yuav ua rau cov poj niam muaj feem tau tus mob stroke.

### **Kev yoog raws caj ces thiab haiv neeg (heredity and race)**

Muab sib piv rau cov neeg tawv Dawb, kev muaj mob stroke ntawm cov tswv cuab hauv zej tsoom Hmoob zoo li pheej tshwm sim rau cov neeg hluas thiab tshwm sim rau cov neeg uas tswj tsis tau zoo txog feem yuav ua rau muaj mob xws li ntshav siab, ntshav qab zib los sis roj cholesterol. Cov neeg uas muaj roj ntshav sib txheeb ze tus uas muaj mob stroke yeej muaj feem muaj mob stroke siab dua. Neeg Mes Kas Dub (African Americans) muaj mob stroke muaj feem ua rau tuag thiab xiam oob qhab ntau dua cov neeg tawv dawb. Qhov no yog vim lawv nquag muaj ntshav siab. Cov Neeg Mes Kas Hispanic (Hispanic Americans) kuj yog cov muaj feem muaj mob stroke coob dua.

### **Kev muaj tus mob stroke**

Tej tus neeg uas muaj mob stroke yog tus muaj feem yuav ntsib lwm yam mob tau zoo dua.

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Risk Factors for Stroke (Hmong)  
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# Risk Factors for Stroke

Knowing your risk factors for stroke is the first step in preventing a stroke. You can change or treat some risk factors, but others you can't. By having regular medical checkups and knowing your risk, you can focus on what you can change and lower your risk of stroke.

## What risk factors can I change or treat?

Risk factors you can change or manage include the following:

### High blood pressure

This is the single most important risk factor for stroke because it's the leading cause of stroke. Know your blood pressure and have it checked every year. Normal blood pressure is below 120/80. If you have been told that you have high blood pressure, work with your clinician to reduce it.

### Tobacco use

Tobacco use damages blood vessels. This can lead to blockages within those blood vessels, causing a stroke. Don't use tobacco and avoid second-hand smoke. Second-hand smoke is smoke you breathe involuntarily from the tobacco that others smoke.

### Diabetes

Having diabetes more than doubles your risk of stroke. Work with your clinician to manage diabetes.

### High cholesterol

High cholesterol increases the risk of blocked arteries. If an artery leading to the brain becomes blocked, a stroke can result.

### Physical inactivity and obesity

Being inactive, obese, or both, can increase your risk of heart disease and stroke.



**Know your blood pressure and have it checked every year.**

### Carotid artery disease or other artery disease

The carotid arteries in your neck supply most of the blood to your brain. A carotid artery damaged by a fatty buildup of plaque inside the artery wall may become blocked by a blood clot. This causes a stroke.

### Transient ischemic attack, or TIA

Recognizing and treating a TIA can reduce the risk of a major stroke. A TIA produces symptoms like a stroke but most have no lasting effects. Know the warning signs of a TIA and seek medical help by calling 911 right away if you have symptoms of a TIA.

## **Atrial fibrillation (AFib) or other heart disease**

Atrial fibrillation is an abnormal heart rhythm. The heart usually beats regularly. AFib means that the heart is beating in an irregular rhythm. This causes blood clots to form in the heart. These blood clots then break off and travel with the blood flow until they reach the brain arteries. The clots block the arteries and cause an ischemic stroke. AFib increases risk of stroke five times. People with other types of heart disease have a higher risk of stroke, too.

## **Certain blood disorders**

A high red blood cell count makes clots more likely, raising the risk of stroke. Sickle cell anemia increases stroke risk because the “sickled”—abnormally shaped—blood cells stick to arteries from the inside and block them.

## **Excessive alcohol intake**

Drinking too much alcohol can raise blood pressure. Binge drinking, which means drinking a large amount of alcohol in a short period of time, can lead to stroke. Limit alcohol. Your clinician can recommend guidelines for you.

## **Illegal drug use**

Drugs including cocaine, ecstasy, amphetamines, and heroin are associated with an increased risk of stroke.

## **Sleep apnea**

Sleep apnea is a condition in which the breathing is abnormal during sleep. A person with sleep apnea has periods when breathing stops for a few seconds followed by breathing again. Sleep apnea lowers blood oxygen level and increases blood pressure during sleep. Sleep apnea increases the risk of stroke, heart attack and other serious medical conditions. Increasing sleep apnea severity is associated with increasing risk.

## **What are the risk factors I can't control?**

The following risks are ones you cannot manage or change:

### **Old age**

Stroke affects people of all ages. But the older you are, the greater your stroke risk.

### **Gender**

Women have a higher lifetime risk of stroke than men do. Use of birth control pills and pregnancy pose special stroke risks for women.

### **Heredity and race**

Compared with Whites, stroke among members of the Hmong community tends to happen at a younger age and is more often associated with poorly controlled risk factors such as blood pressure, diabetes or cholesterol. People whose close blood relatives have had a stroke have a higher risk of stroke. African Americans have a higher risk of death and disability from stroke than whites. This is because they have high blood pressure more often. Hispanic Americans are also at higher risk of stroke.

### **Having a stroke**

Someone who has had a stroke is at higher risk of having another one.

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Risk Factors for Stroke (Hmong)  
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# Mob Ntshav Siab (High Blood Pressure) thiab Mob Ua Rau Hlwb Puas (Stroke)

## Mob ntshav siab (HBP) yog dab tsi?

Mob ntshav siab yog ib qho kev ntsuas cov ntshav khiav muaj zog li cas uas thawb cov ntshav kom dhau rau koj cov hlab ntsha (arteries) thaum uas koj lub plawv tab tom dhia ceev thiab nyob rau thaum lub plawv so. Mob ntshav siab muaj feem ua rau koj mob stroke, mob plawv nres (heart attack), plawv tsis ua hauj lwm (heart failure) los yog raum tsis ua hauj lwm (kidney failure).

Tus nab npawb sab saud (systolic) yog qhov ntshav ntoj nyob hauv koj cov hlab ntsha thaum uas koj lub plawv dhia.

**120**      SYSTOLIC pressure  
**80**        DIASTOLIC pressure

Tus nab npawb sab hauv (diastolic) yog qhov ntshav ntoj nyob rau hauv koj cov hlab ntsha thaum uas koj lub plawv so ncuu nruab nrab thaum lub plawv dhia.

Ntshav ntoj yog muab ntsuas siv raws li millimeters ntawm cov kua hlau soj ntsuam mercury (mm Hg) (millimeters of mercury). Ntshav ntoj uas nyob rau theem zoo yuav tsum nyob ntawm los yog qis dua 120/80 mm Hg. Rau cov neeg laus, *kev ntshav nce (elevated) ntshav siab* txhais tau hais tias koj tus nab npawb sab saud yog 120 txog 129 koj thiab tus nab npawb sab hauv (diastolic) tsawg dua 80. *Mob ntshav siab* txhais tau hais tias koj tus nab npawb sab saud yog 130 los sis siab dua, los sis koj tus nab npawb sab hauv yog 80 los sis siab dua. Yuav kom paub tseeb txog kev ntsuam xyuas mob, koj tus kws kuaj mob ntsuas koj cov ntshav siab qhov tsawg kawg yog 2 zaug thaum tuaj ntsib li 2 los yog ntau zaug dua.

## Ntshav siab ua rau muaj feem txaus txhawj ntau tuaj mob ua rau hlwb puas li cas?

Mob ntshav siab yog ib qho muaj feem tseem ceeb uas yuav ua rau mob stroke vim nws tseem ceeb uas tsim tus mob stroke. Mob ntshav siab ntxiv hauj lwm rau koj lub plawv txoj kev khiav thiab ua rau koj cov hlab ntsha thiab tej yam tseem ceeb hauv lub nrog cev puas tsuaj (organs) rau yav ntev mus. Yog muab piv rau cov neeg uas muaj ntshav siab yeej muaj feem yuav yog muaj stroke ntau dua.



**Tib qho uas koj paub hais tias seb koj puas muaj ntshav siab ces yog mus kuaj tas li. Paub txog koj theem ntshav siab yuav tsum zoo li cas thiab ceev kom nws nyob twj ywm rau theem ntawd.**

Feem ntau cov strokes yog *mob hlab ntsha hlwb txhaws (ischemic strokes)*. Ischemic strokes yog tshwm sim los ntawm cov hlab ntsha nqawm lawm los yog txhaws lawm nyob rau hauv lub hlwb uas thaiv cov ntshav kev khiav mus rau cov tsih hlwb lawm (brain cells). Mob ntshav siab ua rau tej phab sab hauv cov hlab ntsha puas tsuaj tag (blood vessels), qhov uas tuaj yeem ua rau cov hlab ntsha txhaws haj yam tsis zoo ntxiv tuaj.

Kws yees li ntawm 1 ntawm 8 qhov kev mob ua hlwb puas yog *mob hlab ntsa hlwb los ntsav (hemorrhagic strokes)*. Hemorrhagic strokes tshwm sim thaum ib txoj hlab ntsha tawg nyob rau hauv los yog ze lub hlwb. Mob ntshav siab zoo tsis tu qab (chronic) los yog cov hlab ntsha laus tuaj (aging) yog cov hauv paus tsim qhov kev mob hemorrhagic stroke. Mob ntshav siab ua rau cov hlab ntsha thev tsis taus txog qhov ua rau cov hlab ntsha cia li tawg. Hemorrhagic stroke yog ib yam nquag tshwm sim rau neeg Hmoob ntau dua yog muab piv rau cov Neeg Tawv Dawb. Nyob rau ib qhov kev tshawb fawb ntawm lub tsev kho mob Regions Hospital nyob hauv nroog St Paul, Xeev Minnesota tau ntsuam xyuas los, 40% ntawm cov neeg Hmoob mob uas muaj stroke yeej pom muaj hom mob hlab ntsa hlwb los ntshav yog muab piv rau cov neeg mob Neeg Tawv Dawb ces yog 23% nkaus xwb. Tsev neeg li keeb kwm mob nkeeg thiab kev tswj ntshav ntoj zoo tsis txaus nyob rau hauv pej xeev Hmoob tej zaum yuav yog ob yam uasua rau muaj qib tshwm sim siabli no.

Koj yeej tsis paub meej tias seb koj puas muaj mob ntshav siab tshwj tsis yog tias koj ntsuas nws. Tej zaum koj tsis tuaj yeem saib pom los yog hnov tus tsos mob ntawm mob ntshav siab, tiam sis yuav tau muab los tswj hwm txhawm rau tiv thaiv kev puas tsuaj rau koj lub cev.

## Puas yog kuv muaj feem txaus txhawj siab dua (risk) rau kev muaj mob ntshav siab?

Cov yam txaus txhawj yog tej yam uas ua rau koj muaj feem mob ntshav siab loj hlob tuaj. Koj tsis tuaj yeem tswj tau ntau feem txaus txhawj. Lwm cov, koj tswj tsis tau.

Tej yam muaj feem txaus txhawj uas koj tswj tau yog:

- ♦ Kev siv luam yeeb thiab nqus tau cov pa luam yeeb uas lwm tus haus (secondhand smoke). Nqus tau cov pa luam yeeb uas lwm tus haus yog cov pa uas tsis yog koj txhob txwm nqu los ntawm lwm tus neeg haus luam yeeb.
- ♦ Tsis nyiam siv lub cev mus ua ub no.
- ♦ Pheej noj khoom noj tsis noj qab haus huv (noj tej khoom muaj ntsev ntau los yog tsis muaj cov txab zaub mov pab rau lub cev (potassium)).
- ♦ Haus dej caw ntau dhau.
- ♦ Rog dhau (obese) los yog hnyav dhau lawm.
- ♦ Mob ntshav qab zib (diabetes) (koj muaj feem txaus txhawj qis dua thaum koj tswj tau kev mob ntshav qab zib).
- ♦ Kev muaj ntshav muaj roj ntau (cholesterol).

Feem tsis zoo uas hloov kho tsis tau los yog tswj nyuaj heev yog:

- ♦ Tsev neeg muaj keeb kwm mob ntshav siab.
- ♦ Tsav neeg/haiv neeg twg.
- ♦ Hnub nyoog nce zuj zus.
- ♦ Poj niam los yog txiv neej (cov txiv neej).
- ♦ Muaj mob raum ntev los lawm (chronic kidney disease).
- ♦ Mob tsis tuaj dab ntub (obstructive sleep apnea).

## Kuv yuav tswj kev mob ntshav siab tau li cas?

- ♦ Caiv luam yeeb thiab nqus pab luam yeeb lwm tus haus.
- ♦ Txo qhov hnyav yog tias koj hnyav dhau lawm.

- ♦ Noj kom zoo zog los ntawm:
  - » Noj txab ntsev tsawg (ntsev), yam khoom noj roj thiab cov khoom noj xuas roj kib.
  - » Noj cov khoom noj uas muaj potassium ntau, xws li txiv tsawb, txiv nkhaus taw, zaub ntsuab thiab qos yaj ywm.
  - » Noj txiv hmab txiv ntoo thiab zaub txhua pluag–qhov tsawg kawg yog ib hnub noj 5 zaug.
  - » Noj tag nrho cov khoom noj ua noob 3 los yog ntau zaug dua nyob rau txhua hnub.
  - » Noj cov khoom muaj mis nyuj-roj tsawg.
- ♦ Nyiam siv lub cev mus ua ub no tas mus li. Ib lub hom phiaj zoo yog ib hnub 30 feeb, ib lim piam 5 zaug.
- ♦ Txo kev haus cawv kom tsawg. Koj tus kws kuaj mob yuav muaj lus qhia rau koj.
- ♦ Noj tas nrho cov tshuaj uas koj tus kws kuaj mob (clinician) tau sau ntawv rau koj yuav tshuaj los tswj koj li ntshav siab. Koj cov tshuaj yeej ua hauj lwm—tab txawm tias koj tsis hnov muaj kev txawv txav li cas hauv koj lub cev. Koj cov tshuaj yuav ua hauj lwm ntxiv mus rau koj rau yav tom ntej, tiam sis nws tsuas ua hauj lwm thaum uas koj noj tas mus li raws li koj tus kwx kuaj mob qhia rau koj. Tsis txhob tso tseg tsis noj koj cov tshuaj yog tias koj tsis tau nrog koj tug kws kuaj mob tham.



**Nquag ua cov hauj lwm siv lub cev, xws li uateb. Ib lub hom phiaj zoo yog ib hnub 30 feeb, ib lim piam 5 zaug.**

Qhov kev txhais cov ntau ntawv ntawm no tshwm sim tau los ntawm kev pab cuam ntawm lub Regions Hospital ONE Patient Care Allocation Grant.

Tau kev to cai muab txhais ua lus Askiv. © 2017 American Heart Association, Inc. The American Heart Association yuav tsis muaj feem xyuam lav tias qhov kev txhais lus yuav raug los tsis raug.

High Blood Pressure and Stroke (Hmong)  
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# High Blood Pressure and Stroke

## What is high blood pressure (HBP)?

Blood pressure is a measure of the force of blood that pushes through your arteries when your heart is beating and at rest. High blood pressure can lead to stroke, heart attack, heart failure or kidney failure.

The top (systolic) number is the pressure in your blood vessels when your heart beats.

**120**      SYSTOLIC pressure  
**80**        DIASTOLIC pressure

The bottom (diastolic) number is the pressure in your blood vessels when your heart rests between beats.

Blood pressure is measured in millimeters of mercury (mm Hg). Normal blood pressure is at or below 120/80 mm Hg. For adults, *elevated blood pressure* means your systolic pressure is 120 to 129 and your diastolic pressure is less than 80. *High blood pressure* means your systolic pressure is 130 or higher, or your diastolic is 80 or higher. To confirm a diagnosis, your clinician measures your blood pressure at least 2 times at 2 or more visits.

## How does high blood pressure increase stroke risk?

High blood pressure is the single most important risk factor for stroke because it's the leading cause of stroke. High blood pressure adds to your heart's workload and damages your arteries and organs over time. Compared with people whose blood pressure is normal, people with high blood pressure are more likely to have a stroke.

Most strokes are *ischemic strokes*. Ischemic strokes are caused by narrowed or clogged blood vessels in the brain that cut off the blood flow to brain cells. High blood pressure causes damage to



**The only way to know if your blood pressure is high is to check it regularly. Know what your blood pressure should be and try to keep it at that level.**

the inner lining of the blood vessels, which can worsen the blockages.

About 1 in 8 strokes are *hemorrhagic strokes*. Hemorrhagic strokes happen when a blood vessel bursts in or near the brain. Chronic high blood pressure or aging blood vessels are the main causes of hemorrhagic stroke. High blood pressure puts more pressure on the blood vessels until the blood vessel bursts. Hemorrhagic stroke is more common in Hmong compared with Caucasians. In one study done at Regions Hospital in St Paul, Minnesota, 40% of Hmong patients who came to the hospital with stroke had the hemorrhagic type compared with only 23% of the Caucasian patients. Family health history and poorly controlled blood pressure in the Hmong population may be two reasons for this higher rate.

You cannot tell whether you have high blood pressure unless you measure it. You may not see or feel symptoms of high blood pressure, but it must be managed to prevent damage to your body.

## Am I at higher risk for high blood pressure?

Risk factors are factors that increase your chances of developing high blood pressure. You can control many risk factors. Others, you cannot control.

Risk factors that can be controlled are:

- ♦ Tobacco use and being around secondhand smoke. Secondhand smoke is smoke you breathe involuntarily from the tobacco that others smoke.
- ♦ Lack of physical activity.
- ♦ Having an unhealthy diet (eating foods high in sodium or low in potassium).
- ♦ Drinking too much alcohol.
- ♦ Being obese or overweight.
- ♦ Diabetes (your risk is lower when you are managing diabetes).
- ♦ Having high cholesterol.

Factors that cannot be modified or are difficult to control are:

- ♦ Family history of high blood pressure.
- ♦ Race/ethnicity.
- ♦ Increasing age.
- ♦ Gender (males).
- ♦ Chronic kidney disease.
- ♦ Obstructive sleep apnea.

Translation of this material was made possible through the Regions Hospital ONE Patient Care Allocation Grant

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## How can I control high blood pressure?

- ♦ Avoid tobacco and secondhand smoke.
- ♦ Lose weight if you are overweight.
- ♦ Eat better by:
  - » Eating less sodium (salt), saturated fat and trans fat.
  - » Include foods rich in potassium, such as bananas, mangoes, mustard greens and potatoes.
  - » Including fruits and vegetables at every meal—at least 5 servings a day.
  - » Eating 3 or more servings of whole grains every day.
  - » Eating low-fat dairy products.
- ♦ Enjoy regular physical activity. A good goal is 30 minutes a day, 5 times a week.
- ♦ Limit alcohol. Your clinician can recommend guidelines for you.
- ♦ Take all medicines as your clinician prescribes to control your blood pressure. Your medicine is working—even though you may not feel the difference in your body. Your medicine will continue to work for you over time, but it can only work when you keep taking it regularly as your clinician tells you. Do not stop taking your medicine without talking to your clinician.



**Enjoy regular physical activity, like gardening.  
A good goal is 30 minutes a day, 5 times a week.**

High Blood Pressure and Stroke (Hmong)  
(5/2019) ©HealthPartners

# Mob Hlab Ntsha Hlwb Los Ntshav (Hemorrhagic Stroke)

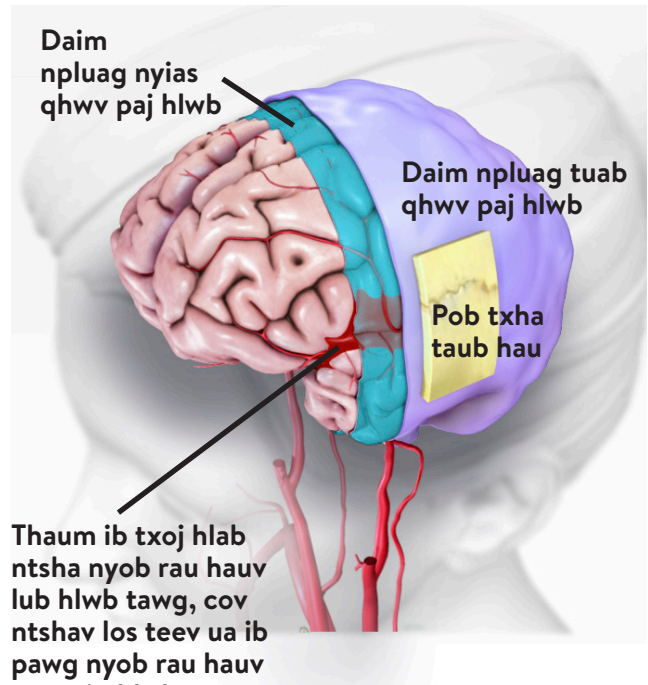
Ib qho hemorrhagic stroke tshwm sim thaum uas ib txoj hlab ntsha tawg nyob rau hauv los sis ze ntawm lub paj hlwb. Thaum cov ntshav txeej los ntawm txoj hlab ntsha los rau ntawm cov paj hlwb, cov tsig nqaij nyob rau thaj chaw ntawd tsis muaj zog thiab tuag mus. Kwv yees li ntawm 1 ntawm 8 qhov kev mob ua hlwb puas yog hemorrhagic strokes. Hemorrhagic stroke yog ib yam tshwm sim rau neeg Hmoob ntau dua yog muab piv rau cov Neeg Tawv Dawb. Nyob rau ib qhov kev tshawb fawb nyob ntawm lub tsev kho mob Regions Hospital nyob hauv nroog St Paul, Xeev MN tau ntsuam xyuas los, 40% ntawm cov neeg mob Hmoob uas muaj mob stroke muaj yam hemorrhagic type ntawd yeej pom muaj hom mob hemorrhagic yog muab piv rau cov neeg mob Neeg Tawv Dawb ces yog 23% nkaus xwb. Tsev neeg li keeb kwm mob nkeeg thiab kev tswj ntshav ntoj tsis zoo txaus nyob rau hauv pej xeev Hmoob tej zaum yuav yog ob lub laj txhawj ua rau muaj qib tshwm sim siab dua.

## Txhua yam mob hemorrhagic strokes puas zoo ib yam?

Nws muaj ob hom mob hemorrhagic stroke. Nyob rau ob hom, ib txoj hlab ntsha tawg, cuam tshuam kev ntshav khiav mus rau ib qho ntawm lub hlwb.

*Hom mob hlab tsha hlwb los ntshav (intracerebral):*

- ♦ Yog hom mob uas muaj ntau tshaj ntawm hemorrhagic stroke.
- ♦ Tshwm sim thaum ib txoj hlab ntsha los ntshav los yog tawg mus rau hauv cov tsig paj hlwb nyob tob hauv lub hlwb.
- ♦ Yog qhov tshwm sim heev los ntawm mob ntshav siab tau ntev heev-los lawm (high blood pressure) los yog cov hlab ntsha laus tuaj lawm (blood vessels).
- ♦ Qee zaum yog tshwm sim los ntawm ib txoj hlab ntsha tsis zoo li ib txwm lawm (arteriovenous malformation) los yog AVM. Ib qho AVM yog ib pawg hlab ntsha uas sib sau tau tsis zoo ib txwm. 1 ntawm txoj hlab ntsha twg ntawm cov no tuaj yeem tawg tau, thiab ua rau los ntshav rau hauv lub hlwb.



**Thaum ib txoj hlab ntsha nyob rau hauv lub hlwb tawg, cov ntshav los teev ua ib pawg nyob rau hauv cov tsig hlwb, ua rau muaj mob hemorrhagic stroke tshwm sim.**

*Hom mob hlab tsha hlwb los ntshav (subarachnoid):*

- ♦ Feem ntau yog tshwm sim los ntawm ib qho hlab ntsha hlwb tawg (aneurysm)—ib qho ntshav-ntim su loj tuaj ua lub pa ntawm ib txoj hlab ntsha (artery) nyob rau los yog nyob ze daim tawv paj hlwb. Qhov hlab ntsha hlwb tawg thiab los ntshav mus rau hauv kem ntawm paj hlwb thiab pob txha tob hau.
- ♦ Feem ntau yog qhov ua rau muaj mob ntshav siab.

Nyob rau ib qho ntxiv nrog rau mob ntshav siab, cov feem xyuam ua rau muaj qhov txaus txhawj ntau tuaj ntawm hemorrhagic strokes yog muaj:

- ♦ Kev siv luam yeeb
- ♦ Kev siv cov tshuaj noj ua kom ntshav sib xws li warfarin
- ♦ Kev haus cawv ntau dhau
- ♦ Kev siv yeeb tshuaj txhaum cai (illegal drugs)

## Cov kev mob hemorrhagic strokes yog ntsuam xyuas li cas?

Thaum ib tug neeg muaj cov yam ntxwv ib qho mob ntawm stroke los sis kev muaj ntshav tsis txaus ib pliag (TIA), ib tus kws kuaj mob yuav nrhiav cov kev paub thiab nqis tes ntsuam xyuas. Tus kws kuaj mob yuav:

- ♦ Rov qab tshab xyuas seb muaj dab tsi tshwm sim
- ♦ Paub txog keeb kwm kev noj qab haus huv ntawm koj yav dhau los ua ntej yuav muaj stroke
- ♦ Tshuaj xyuas koj lub cev txog feem cuam tshuam ntawm kev mob stroke thiab lwm yam cov yam ntxwv rau kev kho mob
- ♦ Txib kom muaj cov kev kuaj ntshav
- ♦ Tau txais ib daim duab theej lub hlwb uas yog siv tshuab theej duab hlwb CT los sis tshuab theej duab hlwb MRI
- ♦ Kawm kom paub txog lwm qhov tshwm sim ntawm kev ntsuam xyuas tus kab mob uas tej zaum koj kuj yuav siv

Kev ntsuam xyuas (diagnostic) cov kev kuaj hais tias lub hlwb zoo li cas, ua hauj lwm li cas thiab nws tau txais cov ntshav los li cas los. Nws tuaj yeem pab txheeb feem ua rau lub hlwb raug mob los ntawm stroke. Cov kev ntsuam xyuas poob rau 3 kis.

- ♦ Kev yeas duab (Imaging) muab tau ib daim duab txog lub hlwb uas zoo xws li yeas duab hluav taws xob X-rays.
- ♦ Kev kuaj siv hluav taws xob (electrical) kaw tau cov hluav taws xob khiav hauv lub cev (impulses) ntawm lub hlwb (thiab los kuj hu ua EEG).
- ♦ Cov kev kuaj ntshav khiav (blood flow) qhia tau txog tej teeb meem dab tsi uas tej zaum ua rau cov ntshav khia hloov li cas mus rau lub hlwb.
- ♦ Feem ntau ntawm tej qho kev mob, qhov kev ntsuam xyuas hemorrhagic stroke tias mob dab tsi yog thaum tau ib daim duab ntawm lub hlwb uas yog siv CT los yog MRI uas qhia pom ntshav nyob rau hauv los yog ib puag ncig lub hlwb.

## Cov mob hemorrhagic strokes yog yuav kho li cas?

Yog tias koj muaj qhov mob hemorrhagic stroke, koj yuav tau mus pw tsev kho mob. Koj yuav tau noj cov tshuaj los tswj qhov mob ntshav siab. Thiab tej zaum koj yuav tau noj tshuaj los txo kom lub hlwb tsis txhob o uas tej zaum yuav tshwm sim tom qab mobstroke.

Tej zaum koj yuav raug phais, nce raws qhov ua rau mob thiab saib hom mob los ntshav yog hom twg. Muab piv txwv, kev phais feem ntau yog muab ib tus ciaj hlau tso rau ntawm lub hauv paus hlwb hlab ntsha tawg los yog muab cov hlab ntsha tsis zoo uas tsim qhov AVM tshem tawm.

Qee qhov txheej txheem yog siv ib txoj hlua roj mab (catheter) uas ntxig rau hauv ntawm ib txoj hlab ntsha loj mus rau txhais ceg los yog txhais npab. Muab txoj roj mab ntxig qhia kev mus rau txoj hlab ntsha tawg los yog AVM mus tso ib yam twj hlau, xws li ib txoj hlua hlau khoob qhov (coil), los pab tiv thaiv AVM los yog hlab ntsha hlwb kom txhob tawg.

Qhov kev txhais cov ntaub ntawv ntawm no tshwm sim tau los ntawm kev pab cuam ntawm lub Regions Hospital ONE Patient Care Allocation Grant.

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Hemorrhagic Stroke (Hmong)  
23735 (12/2018) ©HealthPartners

# Hemorrhagic Stroke

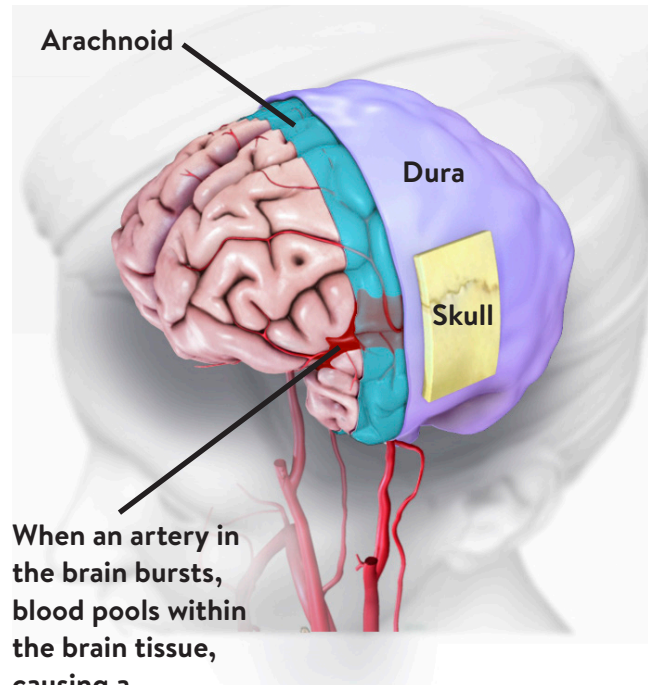
A hemorrhagic stroke happens when a blood vessel bursts in or near the brain. As blood leaks from the blood vessel to the brain tissue, cells in that area weaken and die. About 1 in 8 strokes are hemorrhagic strokes. Hemorrhagic stroke is more common in Hmong compared to Caucasians. In one study done at Regions Hospital in St Paul, MN, 40% of Hmong patients presenting with stroke had the hemorrhagic type compared with only 23% of the Caucasian patients. Family health history and poorly controlled blood pressure in the Hmong population may be two reasons for this higher rate.

## Are all hemorrhagic strokes the same?

There are two kinds of hemorrhagic stroke. With both kinds, a blood vessel bursts, affecting blood flow to a part the brain.

### *Intracerebral hemorrhages:*

- ♦ Are the most common type of hemorrhagic stroke.
- ♦ Happen when a blood vessel bleeds or bursts into the tissue deep within the brain.
- ♦ Are most often caused by long-term high blood pressure or by aging blood vessels.
- ♦ Are sometimes caused by an arteriovenous malformation or AVM. An AVM is a cluster of blood vessels that have formed abnormally. Any 1 of these vessels can rupture, also causing bleeding into the brain.



When an artery in the brain bursts, blood pools within the brain tissue, causing a hemorrhagic stroke.

### *Subarachnoid hemorrhages:*

- ♦ Are usually caused by an aneurysm—a blood-filled pouch that balloons out from an artery on or near the surface of the brain. The aneurysm bursts and bleeds into the space between the brain and the skull.
- ♦ Are often caused by high blood pressure.

In addition to high blood pressure, factors that increase the risk of hemorrhagic strokes include:

- ♦ Tobacco use
- ♦ Use of oral blood thinners such as warfarin
- ♦ Drinking too much alcohol
- ♦ Using illegal drugs

## How are hemorrhagic strokes diagnosed?

When someone has shown symptoms of a stroke or a transient ischemic attack (TIA), a clinician will gather information and make a diagnosis. The clinician will:

- ♦ Review what happened
- ♦ Get a history of your health in general before the stroke
- ♦ Examine your body for the effects of the stroke and other medical conditions.
- ♦ Order blood tests
- ♦ Get a picture of the brain using CT or MRI
- ♦ Study the results of other diagnostic tests that you might need

Diagnostic tests show how the brain looks, works and gets its blood supply. They can help identify the part of the brain injured by the stroke.

Diagnostic tests fall into 3 categories.

- ♦ Imaging tests give a picture of the brain similar to X-rays
- ♦ Electrical tests record the electrical impulses of the brain (also called an EEG)
- ♦ Blood flow tests show any problem that may cause changes in blood flow to the brain.
- ♦ In most cases, the diagnosis of hemorrhagic stroke is made when a picture of the brain with a CT or MRI scan shows blood within or around the brain

## How are hemorrhagic strokes treated?

If you have had a hemorrhagic stroke, you will need to be in the hospital. You will have medicine to control high blood pressure. You may also have medicine to reduce the brain swelling that may happen after a stroke.

You may need surgery, depending on the cause and type of the hemorrhage. For example, surgery is often done to place a metal clip at the base of an aneurysm or to remove the abnormal vessels that make up an AVM.

Some procedures use a catheter that goes in through a major artery in the leg or arm. The catheter is guided to the aneurysm or AVM to place a device, such as a coil, to prevent the AVM or aneurysm from bursting.

Translation of this material was made possible through the Regions Hospital ONE Patient Care Allocation Grant

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Hemorrhagic Stroke (Hmong)  
(5/2019) ©HealthPartners



# Kuv Yuav Tswj Kuv Cov Tshuaj Li Cas?



Kev noj tshuaj tej zaum yog ib qho tshiab rau koj, thiab tej zaum muaj ntau yam rau koj nco kom tau. Muab piv txwv, vim li cas koj thiaj li noj? Koj yuav tsum noj lub sij hawm twg? Koj yuav noj heev npaum li cas, thiab koj noj pes tsawg ntsiav tshuaj?

Nws tseem ceeb heev yuav tsum noj cov tshuaj kom raug raws — tsuas yog noj raws nkaus li koj tus kws kuaj mob qhia rau koj xwb. Tej zaum koj yuav tsis hnov dab tsi txawv txav thaum uas koj noj koj cov tshuaj. Tiam sis tab txawm tias koj tsis hnov hais tias koj cov tshuaj ho ua hauj lwm li cas lawm los, nws yeej mus kho tau ib qho nyob sab hauv lub cev lawm--rau koj txoj kev noj qab haus huv thiab koj lub cev. Koj cov tshuaj yuav ua hauj lwm ntxiv mus rau koj rau yav tom ntej, tiam sis nws tsuas ua hauj lwm thaum uas koj noj raws li koj tus kws kho mob qhia rau koj.

Thaum uas koj tsis noj koj cov tshuaj kom raug raws, tej zaum cov tshuaj tsis ua hauj lwm los muaj thiab. Tej zaum koj ho ntsib tej yam kev fab tshuaj tshwm sim tuaj uas mob sib tsem tsawv—los yog mob hnyav heev. Yog tias tsis paub txog li, tej zaum koj ho muab ib yam tshuaj noj cuam tshuam rau lwm yam tshuaj. Noj tsis yog, tshuaj yuav ua rau koj tsis xis nyob los yog kiv taub hau los muaj thiab.

## Kuv yuav ua li cas kuv thiaj li nco noj kuv cov tshuaj?

- ♦ Noj tib lub sij hawm txhua hnuv nrog rau koj kev ua lwm yam hauj lwm, xws li thaum txhuam hniav.
- ♦ Siv lub thawv tso tshuaj txhua lub lim piam uas nyias muaj nyias kem rau kev noj txhua hnuv los yog noj lub sij hawm twg. Muab teeb rau hauv tshuab khoos phis tawj (computerized) kom nws ceeb toom rau koj noj ib ntsia tshuaj los yog kom rov noj txuas mus ntxiv.
- ♦ Thov tsev neeg los yog tej phooj ywg los pab ceeb toom kom koj nco qab txog.
- ♦ Siv daim zwj teev hnuv nyoog los yog daim ntawv kom koj nco qab txog.
- ♦ Sau ib co lus tseg kom koj tus kheej nco qab txog.
- ♦ Sim siv ib tsab e-mail los yog daim zwj teev hnuv nyoog kom koj nco qab txog.
- ♦ Coj ib lub moos uas muaj qhov nrov nco ceeb toom.



**Siv lub thawv tso tshuaj txhua lub lim piam uas nyias muaj nyias kem rau kev noj txhua hnuv los yog noj lub sij hawm twg.**

## Kuv yuav tsum paub txog dab tsi ntxiv thiab?

- ♦ Nug koj tus kws kuaj mob los yog tus kws muab tshuaj hais tias yuav noj koj cov tshuaj thaum twg thiab seb puas noj tau nrog khoom noj.
- ♦ Muab koj cov tshuaj khaws cia raws li koj tus kws kuaj mob los yog tus kws muab tshuaj hais qhia rau koj. Muab cov tshuaj cia rau hauv nws lub plhaub ntim li ib txwm, los yog sau ntawv lo rau yog tias muab ntim rau lub plhaub tshiab.
- ♦ Nco ntsoov cov ntsiav tshuaj twg koj tuaj yeem noj tau los yog noj tsis tau ua ke, xam tas nrho cov tshuaj yuav tau tom-lub-khw muag tshuaj yam tsis siv ntawv yuav tshuaj (over-the-counter).
- ♦ Koj yuav tsum thov cov tshuaj ntxiv kom txaus tas mus li es cov tshuaj thiaj li tsis txawj tag.
- ♦ Sim mus ntsib tib tug khws muab tshuaj txhua zaus.
- ♦ Tsis txhob noj koj cov tshuaj kom tshaj qhov uas kws kho mob tau sau ntawv teev tseg qhov noj.
- ♦ Nug koj tug kws kho mob los yog tug kws muab tshuaj ua ntej koj yuav ib cov tshuaj tom-lub-khw muag tshuaj yam uas tsis siv ntawv yuav tshuaj, xws li ib qho tshuaj tiv thaiv kab mob (antihistamine), tshuaj zoo khaub thuas, los yog tshuaj viv tas mees (vitamin). Cov tshuaj ntawm noj tej zaum yuav cuam tshuam rau koj cov tshuaj muaj ntawv yuav.
- ♦ Tham nrog koj tus kws kho mob tas mus li ua ntej yuav tso tseg kev noj ib yam tshuaj dab tsi.
- ♦ Yog tias koj muaj lus nug dab tsi txog koj cov ntsiav tshuaj, sau ib daim ntawv cim tseg los mus nug koj tus kws kho mob los yog kws muab tshuaj.
- ♦ Qhia rau koj cov neeg kho mob thiab tus kws muab tshuaj yog tias koj muaj tej yam tsos fab tshuaj.
- ♦ Sau cov npe tshuaj thiab qhov noj ntawm cov tshuaj uas koj tab tom noj. Yog tias koj mus ntsib ntau tshaj ib tus kws kuaj mob, coj koj cov ntawv teev tshuaj tshiab nrog koj txhua zaus koj mus ntsib nws.
- ♦ Muab tas nrho cov tshuaj cia rau lub chaw uas me nyuam yaus thiab cov tsiaj yug hauv tsev ncaiv tsis cuag.

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How Do I Manage My Medicines? (Hmong)  
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# How Do I Manage My Medicines?



Taking medicine may be new to you, and there may be a lot to remember. For example, why are you taking it? What time should you take it? How often do you take it, and how many pills do you take?

It is very important to take medicine the right way – just as your clinician tells you. You may not feel any different when you are taking your medicine. But even if you cannot feel that your medicine is working, it is making a difference inside--to your health and to your body. Your medicine will continue to work for you over time, but it can only work when you keep taking it as your clinician tells you.

When medicine is not taken the right way, the medicine may not work. You may also experience side effects that may be mild—or very harmful. Without knowing it, you could counteract one medicine by taking it with another. Not taken properly, medicine can also make you feel sick or dizzy.

## How can I remember to take my medicine?

- ♦ Take it at the same time each day along with other daily events, such as brushing your teeth.
- ♦ Use a weekly pill box with separate sections for each day or time of day. Computerized pill boxes can alert you when it is time to take a pill or order refills.
- ♦ Ask family and friends to help remind you.
- ♦ Use a pill calendar or reminder chart.
- ♦ Leave notes to remind yourself.
- ♦ Try an e-mail or calendar reminder.
- ♦ Wear a wristwatch with an alarm.



**Use a weekly pill box with separate sections for each day or time of day.**

## What else should I know?

- ♦ Ask your clinician or pharmacist when to take your medicines and if they can be taken with foods.
  - ♦ Store your medicine the way your doctor or pharmacist tells you. Keep medicine in original containers, or label new containers.
  - ♦ Keep track of what pills you can and cannot take together, including over-the-counter medicines.
  - ♦ Always get your prescription filled on time so you do not run out.
  - ♦ Try to see the same pharmacist each time.
  - ♦ Do not take more of your medicine than the prescribed dose.
  - ♦ Ask your doctor or pharmacist before buying a new over-the-counter medicine, such as an antihistamine, cold medicine, or vitamin supplements. These medicines can sometimes interfere with your prescribed medicine.
- ♦ Always check with your doctor before you stop taking a medicine.
  - ♦ If you have any questions about your pills, make a note to remind yourself to ask your doctor or pharmacist.
  - ♦ Tell your clinician and pharmacist if you have any side effects.
  - ♦ Write down the names and doses of medicines you are taking. If you go to more than one clinician, take your updated medicine list with you to each visit.
  - ♦ Keep all medicines out of the reach of children and pets.

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How Do I Manage My Medicines? (Hmong)  
(5/2019) ©HealthPartners

# Hloov Cov Kev Ua Neej (Lifestyle) Txhawm Rau Thaiv Mob Ua Rau Hlwb Puas (Stroke)

Koj ua tau ntau yam kom lub plawv thiab cov hlab ntsha (blood vessels) muaj kev noj qab haus huv (healthy), tab txawm tias koj tsis tau muaj stroke. Kev ua lub neej kom muaj kev noj qab haus huv yog ib qho tseem ceeb heev los pab txo tej yam muaj feem txaus txhawj ua rau xiam oob qhab (disability) thiab kev tas sim neej los ntawm mob (stroke) thiab mob plawv nres (heart attack).

## Kuv yuav ua li cas kom kuv ua lub neej muaj kev noj qab haus huv dua?

Ntawm no yog ib co qib theem koj ua tau kom muaj kev noj qab haus huv dua thiab txo tau qhov muaj feem txaus txhawj los ntawm mob stroke:

- ◆ Tsis txhob siv luam yeeb. Txav deb ntawm kev ngus pa luam yeeb lwm tus haus (second-hand smoke). Second-hand smoke yog cov pa luam yeeb ntawm lwm tus neeg haus luam yeeb uas koj tau nqus nkag mus thaum ua pa.
- ◆ Txhim kho koj cov cwj pwm noj haus. Noj cov khoom uas muaj roj tsawg (saturated fat), cov khoom noj xuas roj kib (trans fat), txab ntsev (sodium) thiab cov khoom noj tau muab piam thaj ntxiv rau (added sugars).
- ◆ Siv lub cev ua ub no.
- ◆ Noj koj cov tshuaj raws li tus kws kuaj mob (clinician) cov lus qhia.
- ◆ Nquag mus kuaj koj cov ntshav ntoj (blood pressure) tas li. Yog tias koj cov ntshav ntoj siab, tham nrog koj tug kws kuaj mob los mus pab tswj.



**Yog tias koj muaj ib qho yam ntxwv mob zoo tsis tu qab (chronic medical condition), mus cuag koj tug kws kuaj mob ua ntej koj pib qhov hauj lwm ntawd.**



- ◆ Ua kom tau thiab tswj qhov hnyav kom nyob rau qhov muaj kev noj qab haus huv.
- ◆ Txo koj qib kev nyuaj siab (stress).
- ◆ Nrhiav kev pab txhawb siab ntsws (emotional support) thaum uas koj xav tau.
- ◆ Nquag mus kuaj mob tas li.

## Kuv yuav tso tseg kev haus luam yeeb tau li cas?

- ◆ Thawj kauj ruam thiab kauj ruam tseem ceeb tshaj yog los txiav txim txiav—thiab tag ntawd ces cog lus yuav tsum ua kom tau.
- ◆ Nug koj tus kws kuaj mob rau kev paub ntxiv, cov khoos kas thiab cov tshuaj uas tej zaum yuav pab tau.
- ◆ Txiav luam yeeb uas yog kev mus rau tej chaw lawv tsis pub-haus luam yeeb. Zam tsis txhob nyob ze cov neeg uas haus luam yeeb.
- ◆ Rau siab ntso ua tej yam uas yuav haus luam yeeb tau nyuaj, xws li ua hauj lwm qab vag tsib taug.
- ◆ Ceeb toom rau tus kheej hais tias kev haus luam yeeb yog ib yam tsim tau ntau hom kab mob, tsim kev puas tsuaj rau lwm tus thiab yog ib yam txo tau txoj sia.
- ◆ Thov koj tsev neeg thiab cov phooj ywg los pab txhawb koj.

## Kuv yuav hloov kuv cov cwj pwm noj haus li cas?

- ◆ Noj kom ntau rau txiv hmab txiv ntoo, zaub, tag nrho cov khoom noj ua noob, noob taum pauv qhuav thiab noob taum, fawm, ntses uas tsis yog kib, nqaij tsiaj tuaj tis thiab tej nqaij ntshiv.
- ◆ Muab mov dawb hloov mus rau mov daj.
- ◆ Muab tej khoom noj ci, txhiab, ncu thiab hau, tsis txhob muab kib.
- ◆ Noj zaub mov kom tab tom thiab txiav tawm cov khoom noj muaj roj, cov khoom noj xuas roj kib, thiab piam thaj thiab ntsev.
- ◆ Nyeem cov ntawv qhia txog khoom noj (nutrition labels) nyob rau ntawm cov thawv ntawv ntim khoom noj. Muaj ntau yam muaj txab ntsev ntau heev nyob hauv.
- ◆ Tsis txhob noj cov khoom xws li nqaij rog, roj npas taws thiab kua ntsu, uas muaj cov rog ntau heev nyob hauv.
- ◆ Nco ntsoov yam koj xav tau tshwj xeeb, tshwj xeeb yog tias koj muaj ntshav siab, ntshav muaj roj ntau (cholesterol) los sis mob ntshav qab zib (diabetes).
- ◆ Txo kev haus cawv kom tsawg. Koj tus kws kuaj mob yuav muaj lus qhia rau koj.



**Noj mov kom tsawg, noj txiv hmab txiv ntoo kom ntau, zaub, tag nrho cov khoom noj-ua noob, noob taum pauv thiab noob taum qhuav, fawm, ntses, nqaij tsiaj tuaj tis thiab nqaij ntshiv.**

- ◆ Nug koj tug kws kuaj mob, ib tus kws khoom noj haus muaj ntawv tso cai (licensed nutritionist) los yog ib tug saib txog kev tswj noj haus (registered dietitian) rau kev pab.

## Es kev siv lub cev mus ua ub no ne?

- ◆ Yog tias koj muaj ib qho yam ntxwv mob zoo tsis tu qab (chronic medical condition), mus cuag koj tug kws kuaj mob ua ntej koj pib.
- ◆ Pib qhov maj mam thiab ua mus ntxiv kom txog qhov tsawg kawg yog 150 feeb ntawm kev siv lub cev ua ub no qib nrab (xws li taug kev ceev nrooj) nyob rau ib lim piam. Los sis, koj sib zog yoj ce li 75 feeb (vigorous-intensity), los yog ua ob peb yam kev sib zog yoj ce ua ke, kom los pab txhim kho tej kev ntshav kiav (cardiovascular) kom zoo.
- ◆ Nrhiav tej hauv kev ua ub ua no kom lub cev tau ua hauj lwm ntau tuaj. Xaiv nce ntaiv es tsis txhob siv ntaiv hluav taws xob, thiab nres koj lub tsheb kom deb ntawm koj qhov chaw yuav mus.

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Lifestyle Changes to Prevent Stroke (Hmong)  
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# Lifestyle Changes to Prevent Stroke

You can do a lot to make your heart and blood vessels healthy, even if you've had a stroke. A healthy lifestyle plays a big part in reducing your risk for disability and death from stroke and heart attack.

## How can I make my lifestyle healthier?

Here are steps you can take to be healthier and reduce your risk of stroke:

- ◆ Do not use tobacco. Avoid second-hand smoke. Second-hand smoke is smoke you breathe involuntarily from the tobacco that others smoke.
- ◆ Improve your eating habits. Eat foods low in saturated fat, trans fat, sodium and added sugars.
- ◆ Be physically active.
- ◆ Take your medicine as your clinician instructs.
- ◆ Get your blood pressure checked regularly. If your blood pressure is high, work with your clinician to manage it.
- ◆ Reach and maintain a healthy weight.



**If you have a chronic medical condition (chronic medical condition), check with your clinician before you start an exercise program.**



- ◆ Decrease your stress level.
- ◆ Seek emotional support when you need it.
- ◆ Get regular medical checkups.

## How do I stop smoking?

- ◆ The first and most important step is to make the decision to quit—and then commit to stick to it.
- ◆ Ask your clinician for information, programs and medications that may help.
- ◆ Fight the urge to smoke by going to smoke-free facilities. Avoid staying around people who smoke.
- ◆ Keep busy doing things that make it hard to smoke, such as working in the yard.
- ◆ Remind yourself that smoking causes many diseases, can harm others and is deadly.
- ◆ Ask your family and friends to support you.

## How do I change my eating habits?

- ◆ Eat more fruit, vegetables, whole grains, dried peas and beans, pasta, non-fried fish, poultry and lean meats.
- ◆ Replace brown rice with white rice.
- ◆ Bake, broil, roast and boil foods instead of frying.
- ◆ Eat moderate amounts of food and cut down on saturated fat, trans fat, sugar and salt.
- ◆ Read nutrition labels on packaged meals. Many are very high in sodium.
- ◆ Avoid foods like fatty meats, butter and cream, which are high in saturated fat.
- ◆ Be aware of your special needs, especially if you have high blood pressure, high cholesterol or diabetes.
- ◆ Limit alcohol. Your clinician can recommend guidelines for you.
- ◆ Ask your clinician, a licensed nutritionist or registered dietician for help.



**Eat less rice, more fruit, vegetables, whole-grains, dried peas and beans, pasta, fish, poultry and lean meats.**

## What about physical activity?

- ◆ If you have a chronic medical condition, check with your clinician before you start.
- ◆ Start slowly and build up to at least 150 minutes of moderate physical activity (such as brisk walking) a week. Or, you can do 75 minutes of vigorous-intensity physical activity, or a combination of moderate and vigorous, to improve overall cardiovascular health.
- ◆ Look for even small chances to be more active. Take the stairs instead of an elevator, and park your car farther from your destination.

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Lifestyle Changes to Prevent Stroke (Hmong)  
(5/2019) ©HealthPartners



# Mob Ua Rau Hlwb Pwas (Stroke) thiab Kev Kho Mob Kom Rov Zoo Li Qub (Rehabilitation)

Thaum koj xub tuaj rau hauv lub tsev kho mob uas yog muaj tus mob stroke, koj pab pawg kws kho mob yuav ua hauj lwm saib tu koj tam sim ntawd. Tom qab koj qhov mob nyob tus lawm, thiab thaum koj tseem nyob hauv tsev kho mob, koj qhov kev kho kom rov zoo li qub (rehab) yuav pib.

Kev kho mob stroke kom rov zoo li qub yog dab tsi?

Tom qab mob stroke, tej zaum koj yuav tau hloov los yog rov xyaum ua lub neej ib hnuv dhau ib hnuv. Kev kho mob kom rov zoo li qub (rehab) tej zaum yuav thim tau tej yam tshwm sim los ntawm tus mob stroke. Kev kho kom rov zoo li qub yog ib qho txawv ntawm qhov cia li mus tsev mus nyob kom rov zoo. Kev kho kom rov zoo li qub yog ghov txheem ua kom koj lub cev rov zoo li qub uas yog pab los ntawm ib tug kws tshwj xeeb kho lub cev (specialist) los sis ib pab kws tshwj xeeb. Qhov no yuav siv sij hawm.

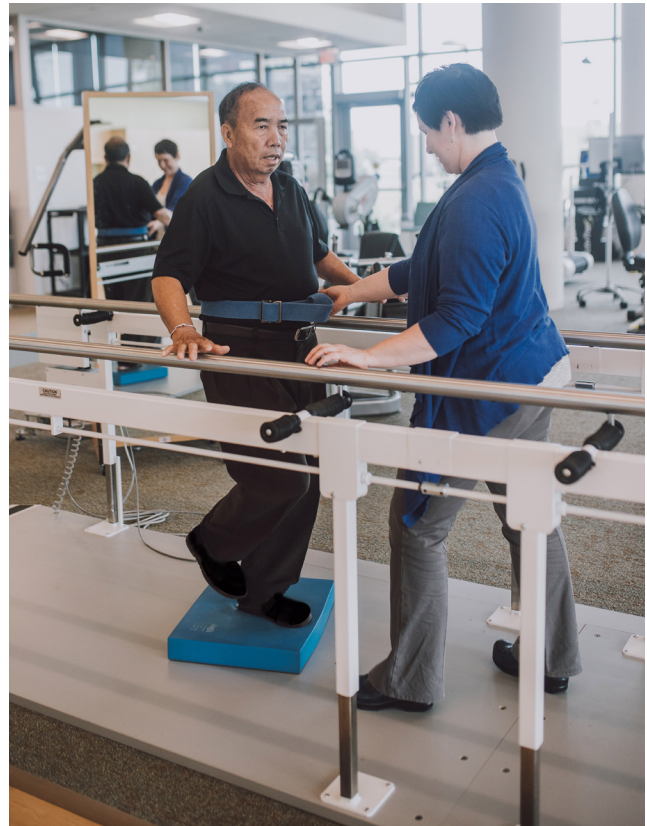
Cov hom phiaj ntawm kev kho kom rov zoo li qub yog los:

- ♦ Ua kom ywj pheej tuaj.
- ♦ Txhim kho lub cev komua hauj lwm.
- ♦ Pab txhim kho kom lub neej zoo dua tuaj tom qab mob stroke.
- ♦ Pab koj hloov kev ua neej kom txhob muaj mob stroke ntxiv.

## Leej twg yuav koomnrog ghov kev pab cuam uas ua kom kuv kho rov zoo tuaj?

Koj yuav muaj ntau qib ntawm kho kom rov zoo li qub los pab kom koj rov muaj zog dua tuaj. Koj pab pawg neeg pab kho kom rov zoo li qub tej zaum yuav xam nrog:

- ♦ **Physiatrist**—Ib tug kws kho mob tus uas muaj kev paub tshwj xeeb rau kev kho mob kom rov zoo li qub.
- ♦ **Physical therapist**—Ib tug kws kho lub cev tshwj xeeb tus uas tsom kwm rau txoj kev txhim kho koj txoj kev txav mus los thiab kev ywj pheej kom siv tau tes taw thiab tej yam puas rau lub cev tej kom siv tau, xws li taug kev, kev nyob tau tus thiab kev sib txheem ntawm lub cev.



- ♦ **Occupational therapist**—Ib tug kws kho lub cev uas tsom kwm rau txoj kev kho kom rov ua hauj lwm tau li qub nyob rau kev ua hauj lwm txhua hnuv xws li kev da dej, kev mus chav dej thiab kev hnav khaub ncaws.
- ♦ **Rehabilitation nurse**—Ib tug kws tus neeg mob ua lub luag hauj lwm txuas lus rau koj cov kev xav tau rau kev txhawb nqa kho mob nyob thoob thaum rov kho kom rov zoo li qub.
- ♦ **Speech therapist**—Ib tug kws tshwj xeeb uas pab kom rov hais tau lus thiab kev muaj peev xwm fab hais lus thiab pab kho cov teeb meem kev noj nqos nyuaj.
- ♦ **Recreational therapist**—Ib tug kws tshwj xeeb uas pab nrhiav kev kho koj tej kev nyiam ua ub no ua ntej koj mob stroke—thiab pab koj nrhiav tej yam tshiab.

- ♦ **Psychiatrist or psychologist**—Cov kws tshwj xeeb uas pab koj hloov kho kom haum rau tej yam kev nyuaj siab thiab cov kev hloov pauv hauv koj lub neej.
- ♦ **Vocational rehabilitation counselor**—lb tug kws tshwj xeeb uas pab koj ua kom koj muaj kev paub es koj rov mus ua tau hauj lwm.

## Kuv yuav ua dab tsi nyob rau kev kho kom rov zoo li qub?

Cov hauj lwm kho kom rov zoo li qub feem ntau yog tsom kwm rau:

- ♦ Tej kev ua ub no ntawm lub neej txhua hnuv xws li kev noj, kev da dej thiab hnav khaub ncaws.
- ♦ Peev xwm kev txav mus los xws li mus ntawm lub txaj mus rau lub rooj zaum, kev txav ntawm ib lub laub zaum muaj log los ntawm koj tus kheej, los sis kev taug kev.
- ♦ Peev xwm cov kev sib txuas lus nyob rau kev hais lus thiab hom lus yus hais.
- ♦ Peev xwm kev xav xws li kev cim xeeb los sis kev daws teeb meem.
- ♦ Peev xwm fab zej tsoom—kev sib txuas lus nrog zej tsoom.
- ♦ Kev noj nyob ntawm kev meej xeeb txog tej cwj pwm (psychological) nrog rau-los txhim kho kev kom paub tswj tus kheejthiab qhia tej yam teeb meem kev txhawj xeeb txog kev tsis meej xeeb pem.



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Stroke and Rehabilitation (Hmong)  
23734 (12/2018) ©HealthPartners

# Stroke and Rehabilitation

When you first come to the hospital with a stroke, your medical team will be in charge of your immediate care. After you are stable medically, and while you are still in the hospital, your rehabilitation (rehab) therapy begins.

What is stroke rehabilitation?

After a stroke, you may have to change or relearn how you live day to day. Rehabilitation may reverse some of the effects of stroke. Rehab is different from just going home to recover. Rehab is the process of rebuilding your body to be well again with the help of a therapy specialist or team. This will take time.

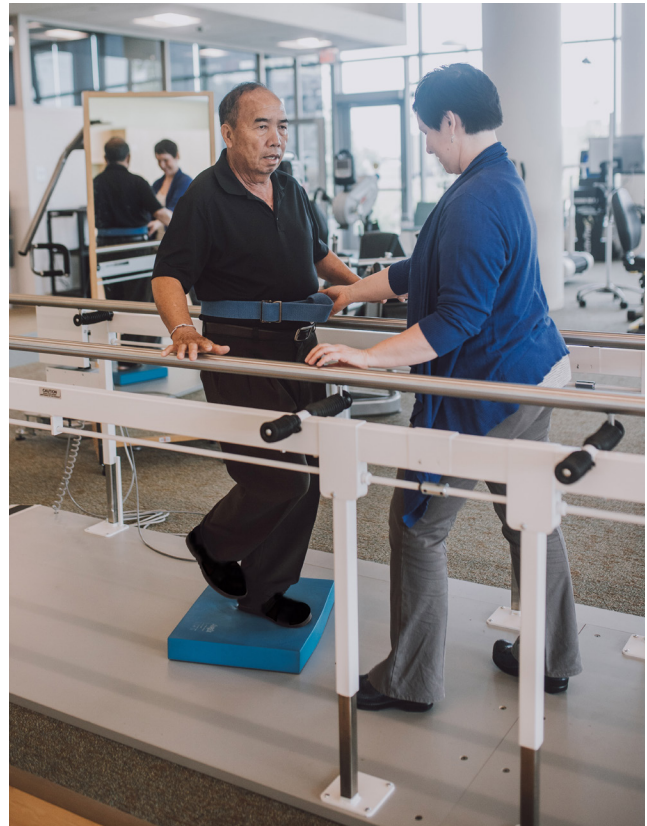
The goals of rehab are to:

- ♦ Increase independence.
- ♦ Improve physical functioning.
- ♦ Help improve quality of life after stroke.
- ♦ Help you make lifestyle changes to prevent another stroke.

## Who will be a part of my rehabilitation program?

You will have many sessions of rehab to help you become stronger. Your rehab team may include:

- ♦ **Physiatrist**—A medical doctor who specializes in rehab.
- ♦ **Physical therapist**—A therapist who focuses on improving your mobility and independence to improve major motor and sensory impairments, such as walking, balance and coordination.
- ♦ **Occupational therapist**—A therapist who focuses on helping you rebuild skills in daily living activities such as bathing, toileting and dressing.
- ♦ **Rehabilitation nurse**—A nurse who coordinates your medical support needs throughout rehab.



- ♦ **Speech therapist**—A specialist who helps to restore speech and language skills and helps treat swallowing disorders.
- ♦ **Recreational therapist**—A therapist who helps to modify activities that you enjoyed before your stroke—and helps you find new ones.
- ♦ **Psychiatrist or psychologist**—Specialists who help you adjust to the emotional challenges and changes in your life.
- ♦ **Vocational rehabilitation counselor**—A specialist who helps you make the most of your skills so you can return to work.

CONTINUED

## What will I do in rehabilitation?

Rehab programs often focus on:

- ♦ Activities of daily living such as eating, bathing and dressing.
- ♦ Movement skills such as going from bed to chair, moving a wheelchair on your own, or walking.
- ♦ Communication skills in speech and language.
- ♦ Thinking skills such as memory or problem solving.
- ♦ Social skills—interacting with other people.
- ♦ Psychological well-being—to improve coping skills and address any mental health concerns.



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Stroke and Rehabilitation (Hmong)  
(5/2019) ©HealthPartners

# Mob Ua Rau Hlwb Puas (Stroke), TIA (Transient Ischemic Attack) thiab Yam Ntxwv Kom Ceev Faj (Warning Signs)

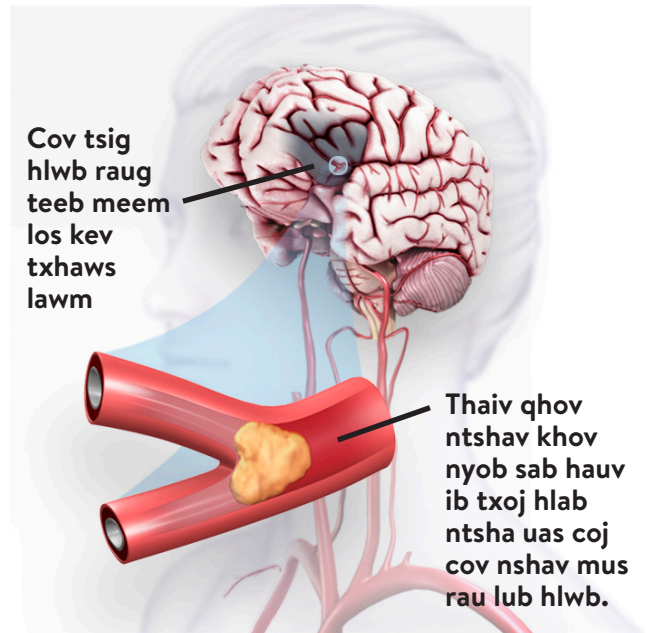
Lub hlwb yuav tsum tau ib cov pa auv xij (oxygen) los yug tas mus li thiaj li ua tau hauj lwm zoo. Cov ntshav pab coj cov pa auv xij, thiab lub plawv pab ntaus cov ntshav raws cov hlab ntsha (arteries) mus rau lub hlwb. Ib qho mob stroke tshwm sim thaum ib txoj hlab ntsha raug txhaws lawm los yog tawg. Ib qho mob stroke uas tshwm sim mas vim yog muaj ib txoj hlab ntsha txhaws lawm qhov no hu ua mob hlab ntsha hlwb txhaws (ischemic stroke). Ib qho mob stroke uas tshwm sim thaum ib txoj hlab ntsha tawg yog hu ua mob hlab ntsha hlwb los ntshav (hemorrhagic stroke). Nyob rau ob qho xwm txheej nov, cov ntshav tsis ntwis mus rau lub hlwb lawm, thiab cov tsig hlwb (brain cells) tsis tau txais cov pa auv xij raws qhov xav tau kom ciaj sia. Qhov uas tsis muaj pa auv xij txaus ua rau cov tsig hlwb (brain cells) nres tsis ua hauj lwm thiab yuav tuag nyob rau li ntawm ob peb feeb. Vim hais tias lub hlwb yog qhov tswj peb lub cev, feem ntawm lub cev uas yog qhov tsig hlwb puas ntawd ua qhov tswj yuav tsum tsis ua hauj lwm thiab.

Cov mob strokes tuaj yeem ua rau tsis muaj zog los sis tuag cev (paralysis), ua rau koj kev hais lus thiab pom kev tsis zoo, thiab ua rau muaj lwm yam teeb meem. Kev nco tau thiab kev coj ua yog cov yam ntxwv ceeb toom (warning signs) ntawm ib qho mob stroke yuav muab lub hwv tsam zoo tshaj plaws rau koj los kho kom rov zoo li qub. Yog tias koj tau txais kev pab kho sai li sai tau, qhov kev puas tsuaj yuav tsis nyob li ntawd mus tas sim neej.

Stroke yog hom mob txo txoj sia thib 5 thiab yog ib hom uas ua rau muaj mob loj, kev xiam oob qhab ncuu-ntev nyob hauv Teb Chaws Mes Kas. Muab sib piv rau cov Neeg Tawv Dawb, stroke ntawm cov tswv cuab hauv zej tsoom Hmoob zoo li pheej tshwm sim rau cov neeg hluas thiab tshwm sim rau cov neeg uas tswj tsis tau zoo txog feem yuav ua rau muaj mob xws li mob ntshav siab (high blood pressure), mob ntshav qab zib (diabetes) los yog mob ntshav muaj roj (cholesterol).

## TIA yog dab tsi?

TIA, los sis kev muaj ntshav tsis txaus saum lub hlwb ib pliag (transient ischemic attack), yog ib qho “minor stroke” los yog “mini stroke” uas tshwm sim thaum ib qho ntshav txhaws ib txoj hlab ntsha ib me pliag. Cov tsos mob ntawm ib qho TIA yog zoo tib



**Cov tsig paj hlwb kev ua hauj lwm siv ntshav, pa auv xij thiab tej yam khoom noj pab lub cev. Thaum qhov ntshav ntwis txhaws lawm, tej zaum koj yuav muaj mob ua rau hlwb puas los yog TIA.**

yam nkaus li ib qho mob stroke, tiam sis nws tsuas nyob ntev li ob peb feeb nkaus xwb. Ib qho mob TIA feem ntau yog ib tug yam ntxwv ceeb toom txog ib qho kev mob loj yav tom ntej stroke, yog li ntawd yuav tsum tsis txhob kav liam. Hu **9-1-1** los yog mus nrhiav kev kho mob tam sim ntawd.

## Kev mob stroke puas tiv thaiv tau?

Tau. Koj tuaj yeem txo tau koj qhov muaj feem txaus txhawj mob stroke los ntawm ua raws cov kauj ruam ntawm no:

- Tswj kev mob ntshav siab
- Txhob siv luam yeeb
- Zam cov pa luam yeeb uas lwm tus haus
- Noj khoom noj muaj kev noj qab haus huv muaj roj tsawg thiab noj tsawg cov xuas roj kib (saturated and trans fats)
- Siv lub cev mus ua ub no
- Ceev kom lub cev qhov hnyav nyob rau qhov muaj kev noj qab haus huv

- ♦ Tswj ntshav qab zib yog tias koj mob ntshav qab zib
- ♦ Txo kev haus cawv kom tsawg

## Hom mob stroke kho puas tau?

Tau! Yog tias koj muaj ib tug mob stroke, txhua feeb yeej tseem ceeb heev. Mus nrhiav kev kho mob sai li sai tau yuav pab txo qhov yuav tshwm sim yav tom ntej ntawm mob stroke thiab tej zaum tseem cawm tau koj txoj sia thiab. Koj qhov kev kho yuav nce raws ntawm koj hom mob stroke yog hom dab tsi.

Alteplase yog ib hom tshuaj kho mob uas tso cov tshuaj raws txoj xov IV mus kho ischemic stroke. Alteplase kho qhov ntshav khov uas los txhaws ntawm txoj hlab ntshav khiav mus los rau saum lub hlwb. Alteplase tsuas pab tau yog tias tau muab cov tshuaj rau nyob rau hauv ncuaj sij hawm 4.5 teev txij thaum muaj yam ntxwv mob stroke. Qhov yuav pab tau ntau npaum li cas yog nce raws qhov koj tau txais cov tshuaj sai npaum li cas tom qab pib muaj yam ntxwv mob stroke. Yog li ntawd, yog koj muaj yam ntxwv mob stroke, koj yuav tsum tau txais kev kho mob kiag tam sim ntawd. Koj yim tau txais kev kho sai npaum li cas alteplase, koj yim muaj sij hawm yuav zoo ntau npaum ntawd.

Lwm hom kev kho mob rau kev mob stroke yog hu ua kev nqus qhov ntshav txhaws tawm (medical thrombectomy).

Nyob hauv qhov txheej txheem no, cov kws kho mob ua tau muaj kev kawm tshwj xeeb yuav siv ib lub yam cuab yeej uas phim rau qhov mob los mus tshem qhov ntshav khov tawm.

Txhawm rau muab qhov ntshav khov tshem tawm, cov kws kho mob yuav siv ib txoj xov hlau (nyias, khoob) ntxig mus rau txoj hlab ntshav loj ntawm puab tais mus rau ntawm koj lub hlwb. Kiag thaum txoj xov hlau npaj txhij, tus kws kho mob yuav siv ib

lub cuab yeej me me los ua kom qhov tshav khov tawg los sis muab qhov ntshav khov tshem tawm.

Cov kws kho mob yuav tsum siv qhov kev nqus qhov ntshav khov tawm nyob rau hauv ncuaj sij hawm 24 teev thaum pib muaj tus yam ntxwv mob stroke.

## Cov yam ntxwv ceeb toom ntawm stroke yog dab tsi?

Koj thiab koj tsev neeg yuav tsum paub meej txog cov yam ntxwv ceeb toom ntawm stroke. Tej zaum koj muaj ib los sis tag nrho cov kev ceeb toom ntawm no. Cim lub sij hawm thaum cov tsos mob pib tshwm sim ces hu rau **9-1-1** sai li sai tau.

Stroke yog ib qho kev mob xwm txheej ceev. Tsis txhob kav liam txog cov yam ntxwv ceeb toom no, tab txawm tias nws ploj mus lawm.

Cov yam ntxwv ceeb toom mob stroke yog:

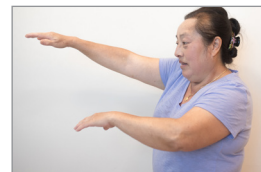
- ♦ Lub ntsej muag, txhais npab los yog txhais ceg, tshwj xeeb tshaj yog rau ib sab ntawm lub cev cia li loog tas los sis tsis muaj zog tam sim
- ♦ Cia li tsis meej pem tam sim
- ♦ Cia li hais tsis tau lus los sis tsis nkag siab cov lus hais rau koj tam sim
- ♦ Cia li tsis pom kev ntawm ib sab los sis ob sab qhov muag tam sim
- ♦ Cia li mus tsis taus kev los sis tswj tsis tau lub cev kom tus los sis kev lub cev sib txheem tam sim
- ♦ Cia li kiv taub hau tam sim
- ♦ Cia li mob tob hau heev yam tsis paub yog tim dab tsis

Ib txoj hauv kev los nco qab txog cov yam ntxwv ceeb toom ntawm kev mob stroke yog F.A.S.T. Sau ua lus As Kiv, lo lus “fast” txhais tau tias kom ceev nrooj los sis maj nrawm nroos. F.A.S.T yog txhais hais tias

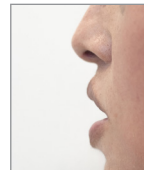
- ♦ Lub ntsej muag mluas



- ♦ Txhais npab tsis muaj zog



- ♦ Hais tsis tau lus



- ♦ Yog sij hawm yuav tau hu rau 9-1-1



Qhov kev txhais cov ntaub ntawv ntawm no tshwm sim tau los ntawm kev pab cuam ntawm lub Regions Hospital ONE Patient Care Allocation Grant.

Tau kev to cai muab txhais ua lus Askiv. © 2017 American Heart Association, Inc. The American Heart Association yuav tsis muaj feem xyuam lav tias qhov kev txhais lus yuav raug los tsis raug.

# Stroke, TIA (Transient Ischemic Attack) and Warning Signs

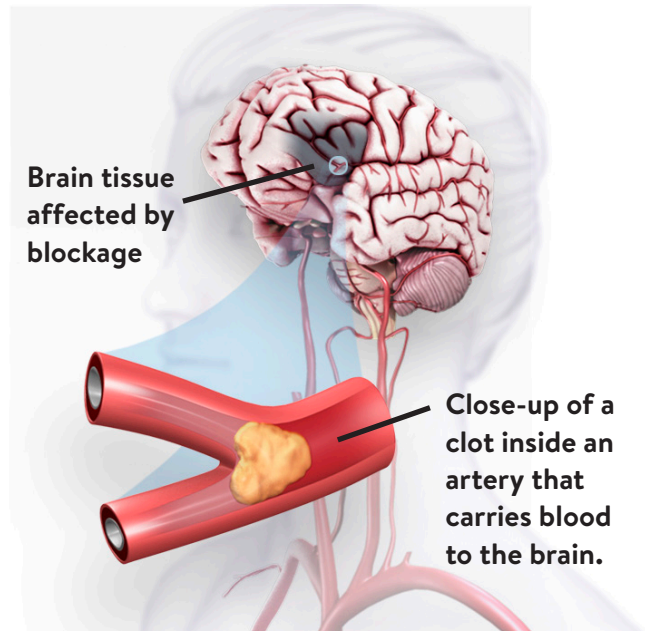
The brain needs a constant supply of oxygen to work properly. Blood carries the oxygen, and the heart pumps the blood to the brain through blood vessels called arteries. A stroke happens when an artery gets blocked or bursts. A stroke that happens because of a blocked artery is called ischemic stroke. A stroke that happens when an artery bursts is called hemorrhagic stroke. In both cases, blood stops flowing to your brain, and brain cells do not get the oxygen they need to survive. This lack of oxygen causes brain cells to stop working and die within minutes. Because the brain controls our body, the part of the body controlled by those damaged brain cells will not work as well.

Strokes can cause weakness or paralysis, affect your language and vision, and cause other problems. Recognizing and acting on the warning signs of a stroke gives you the best chance for a good recovery. If you get medical help as soon as possible, the damage may not be permanent.

Stroke is the number 5 cause of death and a leading cause of serious, long-term disability in the United States. Compared with Whites, stroke among members of the Hmong community tends to happen at a younger age and is more often associated with poorly controlled risk factors such as high blood pressure, diabetes or high cholesterol.

## What is a TIA?

TIA, or transient ischemic attack, is a “minor stroke” or “mini stroke” that happens when a blood clot blocks an artery for a short time. The symptoms of a TIA are the same as those of a stroke, but they usually last only a few minutes. A TIA is often a warning sign of a more serious future stroke, so do not ignore it. Call **9-1-1** or seek medical help right away.



**Brain cells need blood, oxygen and nutrients to work. When blood flow is blocked, you may have a stroke or TIA.**

## Can stroke be prevented?

Yes. You can reduce your stroke risk by taking these steps:

- ♦ Controlling high blood pressure
- ♦ Not using tobacco. Avoiding second-hand smoke.
- ♦ Eating a healthy diet low in saturated and trans fats
- ♦ Being physically active
- ♦ Keeping a healthy body weight
- ♦ Managing diabetes if you have diabetes
- ♦ Limiting alcohol

## Can stroke be treated?

Yes! If you are having a stroke, every minute matters. Getting treatment right away will reduce the long-term effects of a stroke and even save your life. Your treatment will depend on the type of stroke you have.

Alteplase is a type of medication that is given through an IV to treat ischemic stroke. Alteplase works by breaking up the clots that block blood flow to the brain. Alteplase can stop a stroke in progress and reduce disability from stroke. Alteplase can only help if given within 4.5 hours from beginning of stroke symptoms and its benefit depends on how quickly it is given after the beginning of stroke symptoms. Therefore, if you have stroke symptoms, you must get medical help right away. The sooner you can receive alteplase, the greater your chance of recovery.

Another type of treatment for stroke is called a *mechanical thrombectomy*.

In this procedure, specially trained clinicians try to remove the blood clot by using a suitable device. To remove the clot, clinicians thread a catheter (thin, hollow tube) through an artery in your groin up to your brain. Once the catheter is in place, the clinician uses a tiny mechanical device to break up or remove the clot.

Clinicians must do a mechanical thrombectomy within 24 hours of the first symptoms of stroke.

## What are warning signs of stroke?

You and your family should recognize the warning signs of stroke. You may have some or all of these signs. Note the time when symptoms start and call **9-1-1** right away.

Stroke is a medical emergency. Do not ignore these warning signs, even if they go away.

Stroke warning signs are:

- ♦ Sudden numbness or weakness of the face, arm or leg, especially on one side of the body
- ♦ Sudden confusion
- ♦ Sudden trouble speaking or understanding what is being said to you
- ♦ Sudden trouble seeing in one or both eyes
- ♦ Sudden difficulty walking or a loss of balance or coordination
- ♦ Sudden dizziness
- ♦ Sudden severe headache with no known cause

An easy way to remember the warning signs of stroke is F.A.S.T. In English, the word “fast” means to hurry or move quickly. F.A.S.T. stands for

- ♦ Face drooping



- ♦ Arm weakness



- ♦ Speech problems



- ♦ Time to call 9-1-1



Translation of this material was made possible through the Regions Hospital ONE Patient Care Allocation Grant

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