



Prevention and Treatment of Ischemic Stroke and Hemorrhagic Stroke

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DESCRIPTION

Brain stroke is a dangerous medical illness in which the blood supply to the brain is interrupted or diminished, depriving brain tissue of oxygen and nutrients. Brain cells begin to die in minutes, which can result in lasting damage or death. Stroke is a medical emergency that requires rapid treatment to minimize brain damage and related complications. Ischemic stroke is more common and happens when a blood clot stops a blood artery in the brain or neck. The clot may form in the blood vessel itself or move from another portion of the body, such as the heart or carotid arteries.

When a blood vessel in the brain ruptures and bleeds into the surrounding tissue, this is referred to as a hemorrhagic stroke. High blood pressure, aneurysms, Arterio Venous Malformations (AVMs), or traumas can all cause bleeding. Some patients may have a Transient Ischemic Attack (TIA), which is a momentary disturbance in blood flow to the brain that generates stroke-like symptoms but no long-term damage. A TIA, on the other hand, is a warning sign of a probable future stroke and should not be ignored.

The therapy of a stroke is determined on the type and severity of the stroke. The sooner therapy begins, the higher the prospects of recovering and avoiding problems. The primary goal of ischemic stroke treatment is to restore blood flow to the brain as soon as feasible. This can be accomplished by utilizing clot-busting medications such as tissue Plasminogen Activator (tPA), which can break clots and reopen arteries if administered within 4.5 hours of symptom start. Alternatively, catheter-mediated intra-arterial thrombolysis can be conducted, which entails putting a thin tube into a groyne artery and guiding it to the blocked conduit in the brain, where a clot-dissolving chemical or

device can be administered. Another alternative is angioplasty with stent implantation, which involves using a balloon to expand the restricted artery and inserting a metal mesh tube (stent) to keep it open. For some patients, this surgery can be performed within 24 hours of symptom onset.

The basic goal of hemorrhagic stroke treatment is to stop the bleeding and lower the pressure in the brain. This can be accomplished through surgery or endovascular techniques. An aneurysm may be clipped or coiled, an AVM removed, or bleeding from the brain drained during surgery. Endovascular techniques may entail inserting glue or coils into an aneurysm or AVM to block it off from blood flow. In addition to these treatments, stroke patients may require medicine to prevent future clots, regulate blood pressure, control blood sugar, avoid seizures, or reduce brain swelling. They may also require therapy to restore their linguistic, cognitive, sensory, and motor skills, as well as physical function. Rehabilitation may include speech therapy, occupational therapy, physical therapy, and psychological assistance.

Preventive strategies

1. Consuming a nutritious diet high in fruits and vegetables, whole grains, lean protein, and low in sodium, sugar, and saturated fat.
2. Regular exercise.
3. Smoking cessation and avoidance of second hand smoke.
4. Limit alcohol consumption.
5. Using medicine and lifestyle changes to control blood pressure, cholesterol, diabetes, and other medical issues.
6. Seek quick medical assistance if any stroke occurs or TIA symptoms.

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