



Friends of Stroke Victims Reluctant to Call 911



Hesitation in Calling for an Ambulance Could Delay Lifesaving Treatment

Stroke victims need immediate emergency attention, but a new study shows that most people who realize stroke warning signs are occurring in a friend or family member may not call 911, thereby delaying potentially lifesaving treatment.

This is alarming, Michigan researchers suggest, because people who suffer strokes need immediate assessment and treatment.

But people who would call 911 if they thought a friend or loved one was having a heart attack don't seem to realize that strokes are deadly, too, the researchers write; strokes are the No. 3 killer in the U.S.

Stroke victims who are candidates for the clot-busting drug called tissue plasminogen activator (tPA) may receive this treatment if they get to a hospital within three hours (and in some select cases up to 4.5 hours) of the time the first warning signs show up.

"Calling 911 gets you to the hospital fast and allows the paramedics to communicate with the hospital so staff are prepared for your arrival," says study researcher Chris Fussman, MS, an epidemiologist with the Michigan Department of Community Health in Lansing, in a news release.

Fussman says the study's finding "emphasizes the critical roles that symptom recognition and the calling of 911 have in reducing delays in hospital arrival to receive urgent stroke treatment."

Fussman and a team of researchers analyzed the results of a survey of more than 4,800 people in Michigan and found that only a fraction would call 911 if they recognized symptoms enough to deduce that someone was having a stroke.

The study is published in the May issue of *Stroke: Journal of the American Heart Association*.

The purpose of the survey was to assess whether people knew when to call for an ambulance when stroke symptoms are observed. Well-known signs of stroke include sudden slurred speech, sudden numbness on one side of the body, or sudden blurry vision.

Reacting to Stroke Symptoms in a Friend or Relative

People in the study were asked to report their first reactions to five hypothetical situations:

- Noticing sudden slurred speech
- Noticing sudden numbness on one side of a person's body
- Sudden blurry vision
- High fever
- An injured leg

A high fever and an injured leg are not stroke symptoms. Participants had the option of replying that they would give medicine or first aid, call a doctor, take the person showing symptoms to an emergency room, call 911, stay with the person until they felt better, or "something else."

Researchers say calling 911 was the only correct response for the three stroke symptom scenarios, but only a small percentage of participants said that's what they would do.

Other results show:

- 51% said they would call 911 if they saw a family member or friend having sudden trouble speaking or understanding.
- 42% would call 911 for a family member or friend having sudden numbness or weakness on one side of their body.
- 20% would call for a family member or friend who had sudden trouble seeing out of one or both eyes.
- In four of five of the hypothetical scenarios, taking patients to an emergency room was the most common response, rather than calling for an ambulance.

The findings suggest that greater public awareness is needed about the warning signs of stroke, but also about what should be done when any of the signs are noticed.

"Respondents appear to be unaware of the advantages of EMS transport, and the fact that public health recommendations advise the use of EMS over private transport," Fussman says.

The study did not determine why people seem reluctant to call 911, even if they are aware of stroke warning signs. He says future research should look for possible reasons that might include embarrassment, denial, cost, and cultural views about calling for an ambulance.

"I don't think that a lack of stroke knowledge is the problem here," he says. "The problem is what people do with the knowledge they have."

The best option, he says, is calling 911 for emergency help.

Source: *Bill Hendrick*, *WebMD Health News*

www.commonhealth.virginia.gov

The contents of the CommonHealth weekly emails may be reprinted from an outside resource in the area of health, safety, and wellness and is intended to provide one or more views on a topic. These views do not necessarily represent the views of the Commonwealth of Virginia, CommonHealth, or any particular agency and are offered for educational purposes. If you have questions or concerns about this article, please email us at wellness@dhrm.virginia.gov