

**YES,
YOUNGER
PEOPLE
HAVE
STROKES,
TOO**



WHAT TO LOOK FOR AS **SIGNS OF TROUBLE**



Eddie Denson
and his
girlfriend,
Sarah



LAST AUGUST when Eddie Denson, 43, of Naples, woke up in the middle of the night, it took him a while to understand what was going on. The ICU nurse had experienced a regular day, if you can call working full-time, going to school full-time and performing his clinical hours “regular.” Already an R.N., Eddie had gone back to school to get his A.R.N.P. degree to allow him to become a Nurse Practitioner. That day, he had taken his final exam and was looking forward to boosting his career.

“I was feeling a little tired, but being tired was nothing new for me,” he laughs. He and his girlfriend had dinner as usual. He told her he wasn’t feeling great, though he couldn’t put his finger on exactly what was wrong. “We went to bed around 10:30 p.m., doing our normal routine, checking our phone, social

media, that kind of thing.” He went to sleep around 11:15 p.m.

“Then, out of nowhere, I woke up,” Denson says. “I remember it was 2:02 a.m. My right arm was asleep. I tried to sit up and realized I couldn’t sit up. I tried to move my right leg and couldn’t. That’s when I started to panic, and right away I knew I was having a stroke.” He continues: “I tried to yell but it was all slurred. My girlfriend finally woke up. I said, ‘I’m having a stroke,’ but she couldn’t understand what I was saying. So she turned the lights on and saw that my face was drooping and then she understood what was happening.”

It’s understandable that his girlfriend would take a minute to realize that the situation might be a stroke. Eddie was just 43, exercised regularly and was otherwise a very healthy person.

But strokes in younger people do happen, says Dr. Viktoria Totoraitis, Medical Director of the stroke program at NCH. With younger people, she says, strokes are generally not caused by disease in the blood vessels, usually the culprit in older people. Older people who have strokes often have atrial fibrillation, plaque buildup in the arteries and other vessel-related problems. Many of these problems can be exacerbated by lifestyle factors, such as smoking and high cholesterol. In younger stroke patients, lifestyle factors are generally not to blame.

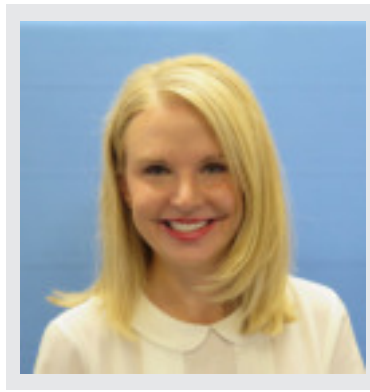
STROKES IN YOUNGER PEOPLE

When she sees a stroke in a younger person, Dr. Totoraitis says, the strokes generally are not caused by lifestyle factors like smoking or poor diet. Younger patients may have cardiac anomalies that they were born with. “For example,” she says, “there could be a weakness in one of their blood vessels that has always been there. Or they could be missing a vessel, or a vessel may be too small.”

Another possibility she screens for is an autoimmune disorder, such as lupus. She will perform a rheumatological screen on younger patients to help determine if this factor is at play.

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echocardiogram (ECG), to check the health of the heart. “With younger patients, we may do an esophageal ECG,” says Dr. Totoraitis, “to get a better look at the heart.” With an esophageal ECG, the probe snakes down through the esophagus, right next to the heart, meaning it gives a closer and more detailed look at the heart. Doctors will also perform bloodwork on a young stroke patient to look into not only autoimmune disorders but also blood clotting abnormalities, and to round out the picture of what is going on medically.

As with any disorder, Dr. Totoraitis says, she talks to the patient about his or her family history as well as his or her own medical history. She would want to know if anyone in the family has had an early stroke (or a stroke at all), as genetics can play a role, and whether the patient has had any autoimmune disorders or a previous transient ischemic attack (TIA, or a temporary blockage of blood flow to the brain).

She will also dig into the lifestyle factors such as smoking, diet, exercise and blood pressure, all of which can contribute to an early stroke.

WHAT TO LOOK FOR

So, how do you know if you are at risk for an early stroke? The truth is you cannot know for certain, but you can look for a few things. You can be on the lookout for out-of-control migraine headaches, says Dr. Totoraitis, to the tune of a few a week.

Migraines can slightly increase the risk of stroke. “If you have migraines,” she says, “get them under control.” In addition, she says, have your vascular risk factors monitored and controlled early. “If you have high blood pressure, start monitoring it and stay on top of it.”

These days, Eddie Denson is doing just fine. He began his work officially as a nurse practitioner in December, and, he says, “Physically, I feel great.” But his doctors never did nail down exactly what the cause was of his stroke. He did have slightly elevated blood pressure, which could be related. But the truth is, “It came out of nowhere,” he says. Luckily, as a nurse, he knew what a stroke looked like and how to get help for himself.

When he got to the hospital that night, he was given a tPA agent, or a “clot buster.” It worked, and he was able to go home after a few days in the hospital, with no lasting damage. While he was in the hospital, his doctors found that he had a patent foramen ovale (PFO), or a small hole in the heart. This condition can possibly contribute to a stroke. His physicians are still not sure of the exact cause for his stroke or if the PFO closure is indicated. Fortunately for Eddie, he won’t have to travel far to have the Amplatzer PFO Occluder device implanted, if necessary. NCH is the only location in Southwest Florida to offer the device and procedure at this time, so he’ll be able to take care of his medical needs close to home. He also takes aspirin regularly to avoid blood clots, and he has gone on blood pressure medication and a statin for his cholesterol. He continues to work with his doctors to investigate what happened. In the meantime, he is grateful to be doing well. “I get a little dizzy and tired from time to time,” he says, “but other than that, I feel great.”

Dr. Totoraitis sees huge benefit in simply being informed that you can have a stroke when you’re younger. And then, her advice is, “Pay attention to any symptoms you might be having, and get screened as soon as something pops up, so we can catch things early and give you as much help as we can.” **NH**