

Local Stroke Survivor's Path To Recovery Has Been Paved With Small Victories

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This time last year, Madawaska resident Brian Peterson was enjoying retirement in his lakeside home, just a stone's throw away from Algonquin Park. Passionate about fishing and hunting, he had just completed his 35-year career as a millwright in order to enjoy the simpler things in life.

Several months later, on October 23rd, Mr. Peterson was out bird hunting on his ATV about a kilometre from home when his left hand suddenly fell off the handle bar and he lost all feeling in his left foot. Right away he said he recognized his symptoms as signs of a stroke and pulled off the trail.

With impaired vision and numbness on the left side of his body, Mr. Peterson was preparing to return home as quickly as he could when he met his neighbours on the trail. They contacted 911 and quickly transported him to the nearest paved road where paramedics met and assessed him. He then went by ambulance to Highway 60 where they were met by the Ornge helicopter which flew him to Pembroke Regional Hospital for a CT scan. Due to the severity of his stroke, Mr. Peterson was airlifted again to The Ottawa Hospital where he spent three weeks before returning to PRH for Rehabilitation on November 10th.

"My experience with the care team on the Rehabilitation unit was great. I received lots of support and encouragement. No doubt it was hard work that left me tired, but the staff ensured everything was done safely," Mr. Peterson said.

He praised the work of the entire healthcare team, and noted that being able to return home December 24th was very rewarding.

"The support we receive through CCAC allows me to remain at home in a safe and comfortable environment. A team of Personal Support Workers, Physiotherapists and Occupational Therapists contribute to my recovery by providing an exercise program tailored to my specific needs," Mr. Peterson said.

Each day he completes at least one hour of exercise at home, assisted regularly by these specialists and also works out on a dual action recumbent cross-trainer which adds half an hour to his daily exercise regime.

Today, Mr. Peterson uses a hemi-walker and has regained approximately 70% of his mobility.

"It's been a long road to get to this point. I had to make a choice. I could sit like a lump or choose to move forward and that's what's I chose. We celebrate the successes – large and small – every day," he said.

Modifications to his home including installation of a stair lift were made to ensure accessibility and while the path to this point has been hard, he's very pleased with the progress and says that stroke doesn't need to be as debilitating as one might anticipate.

"I can still do a lot of things. I've just had to learn to do some things in a different way," Mr. Peterson said. "A couple of weeks ago I went back to PRH for a tune-up. I was reassessed and

given new goals to work on and, considering where I've come from, I'm headed in the right direction."

In the past year, PRH President and CEO Pierre Noel said 156 stroke patients were admitted to the hospital's integrated stroke unit and treated by a multidisciplinary specialized stroke team. "The District Stroke Centre at PRH is the only integrated stroke unit in the Champlain LHIN (Local Health Integration Network) meaning, in most cases, our stroke patients stay on the same unit in hospital for both their acute stay and their rehabilitation services."

In addition, he said Provincial Stroke Report Card data shows that our hospital's District Stroke Centre is leading provincially and setting the benchmark in admitting stroke patients to rehab services from acute care within five days.

According to Beth Brownlee, Clinical Director of the Rehabilitation program, the department has also worked hard during the past year to increase the amount of time stroke patients are engaged in active face-to-face rehabilitation therapy during their hospital stay.

"Best practice research shows that increasing a stroke patient's amount of therapy time per day results in better outcomes in their functional abilities. To date, the team has invested in additional Occupational Therapy staff and put in place daily therapy schedules for each stroke patient to support this initiative," Mrs. Brownlee said, adding that, since implementing these changes in September 2016 the average amount of therapy per patient has increased by 52%.

Improvements are also being seen in "door to needle time" thanks to a partnership initiative with the County of Renfrew Paramedic Service in which the stroke patient remains on the paramedic's stretcher from the time they are triaged and assessed in the Emergency Department through to completion of a CT scan.

Vascular Health Coordinator Karen Roosen explains that "door to needle time" refers to a specific timeframe within which tPA (Tissue Plasminogen Activator), a clot-busting drug used to treat certain types of strokes, can be administered to a stroke patient who has arrived at the Emergency Department.

And PRH is working hard in terms of stroke prevention as well. In the past year, 190 patients who presented in the ED with mild stroke symptoms and were diagnosed with a TIA (Transient Ischemic Attack) were referred to the Stroke Prevention Clinic at PRH for further assessment, treatment and education by stroke prevention clinic physiatrist Dr. Debbie Timpson and Stroke Prevention nurse Lisa Keon.

"Prevention starts with knowing your risk. Nine in 10 Canadians have at least one risk factor for stroke or heart disease," Dr. Timpson said, listing off unhealthy diet, physical inactivity, unhealthy weight, high blood pressure, diabetes, atrial fibrillation, smoking, stress and excessive alcohol or drug use as risk factors.

"Almost 80% of premature stroke and heart disease can be prevented through healthy behaviours. That means that habits like eating healthfully, being active and living smoke free have a big impact on your health," she said.

FOR MORE INFORMATION, PLEASE CONTACT:

Carolyn Levesque, Public Affairs and Communications Coordinator
Pembroke Regional Hospital
(613) 732-3675, ext. 6165 / carolyn.levesque@prh.email