

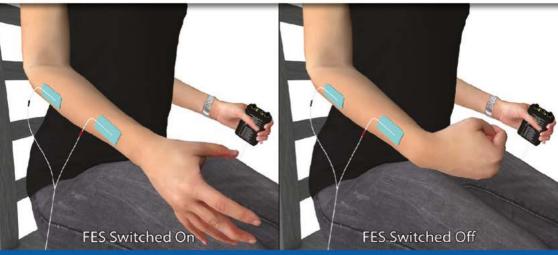


"It was a major relief to return to work" Roger on getting back to work after a stroke

#### This issue:

- Coping with changes to taste and smell
- The power of art and peer support
- Stroke and Covid-19 research update
- 30 years of the Stroke Association





#### Make the most out of life

to become or stay active while living with the effects of a stroke

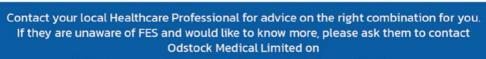
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The latest results from the Stroke Association funded study

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Returning to work after a stroke can feel overwhelming, as our cover star Roger knows well. His stroke had a devastating impact on his communication skills, but with support from the Stroke Association and his employer he's now flourishing in his new job. Read his story and tips for returning to work on page 8.

The Stroke Association celebrates its 30th anniversary this year, although our history of caring goes back much further. On page 28 you can read more about how we came into being and some of our proudest achievements.

Throughout our history we've supported stroke research, and in this issue you can read about two

exciting studies we've funded to improve emergency treatments for stroke (page 12) and better understand the links between stroke and Covid-19 (page 36).

This is my last issue as editor of Stroke News, as Christine is returning from maternity leave. I've loved hearing from you, so do keep sharing your stories.

I hope you enjoy this issue.



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## Over to you

I was 22 when I had my stroke. I woke up with a bad headache, and when I looked in the mirror, the left side of my mouth was drooping. My flatmate called for an ambulance and I was rushed to the Western General Hospital in Edinburgh.

I had full body paralysis but slowly I started to get some movement back. The occupational therapist helped me with things like tying shoelaces, and the speech and language therapist helped with my memory. An NHS psychologist taught me relaxation and meditation techniques for managing my emotions. I owe the NHS a lot.

When I first stood up, it was euphoric. I started to believe that I was going to get out of my wheelchair and walk again. It took six months to walk unaided and when I finally left hospital I was extremely happy.

Joining an ARNI (Action for Rehabilitation from Neurological Injury) programme at a gym really helped with my recovery, and my family has also been a tremendous support. Attending the Stroke Association's online Stroke Café gives me a great sense of support, meeting others and hearing about their stroke experiences.

**Ted Davila** 

Stroke Helpline: 0303 3033 100

Find your local services, clubs and groups: stroke.org.uk/support

Join our online community: mystrokeguide.com

Find information about stroke: stroke.org.uk/publications

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## From our Chief Executive

When stroke strikes, time is of the essence. We know that outcomes for stroke survivors are best when they are able to receive prompt treatment, reducing the risk of death or long-term disability. But across the UK there is still too much variation in access to the most effective emergency treatments.

Thrombectomy, which removes clots from the brain, needs to be carried out within six hours of a stroke at a specialist stroke centre. It can drastically improve the chances of recovery, but many who could benefit from this lifechanging therapy are missing out. On p32 you can find out more about our campaign to improve access to thrombectomy.

We're funding a research study by Dr Grant Mair at the University of Edinburgh, which aims to improve diagnostic processes at all hospitals, not just those that have major stroke units. This could help someone who's just had a stroke to get the right treatment at the right time, wherever they live in



the UK. You can read more about the study on p12.

On Stroke Prevention Day, 14 January, we encouraged people to make one small change to reduce their risk of stroke. Up to 90% of strokes are linked to lifestyle and could be prevented if people are aware of the risk factors and able to make changes like monitoring their blood pressure, eating more healthily and reducing their stress levels. Read more on p22.

I wish you all the very best,

**Juliet Bouverie OBE** 

## "It was a major relief to ret

One in four strokes in the UK happen to people of working age. Going back to work after a stroke can feel daunting, but planning ahead and getting the right support can make all the difference.

For Roger Raymond, 48 from Croydon, returning to his career in public affairs was a huge step after a stroke in 2018 left him unable to speak or write properly.

"I was always good at communicating," he says. "My stroke left me unable to speak properly. The impact of that was just so huge. I went from drafting ministers' letters and policy reports to not being able to write. It was a huge sense of loss."

The stroke had damaged the part of Roger's brain that controls speech, causing a communication difficulty known as aphasia.

"The Stroke Association guided me through the hardest of times,"

he says. "I went through seven months of speech and language therapy. With the support of Jack, my Stroke Association Support Coordinator, my speech began coming back quicker than I expected.

"As my speech returned, I was able to start applying for jobs. And after two interviews I was offered a job in the policy team at an East London local authority."

With support from his employer, Roger is thriving in his new role.

"To be able to return to work was a major relief. I'm supported by my manager and colleagues, who proofread my work and help me manage committee meetings.



This has allowed me to perform in my role to a high standard," he explains. "Most people don't realise I've had a stroke – they say I just sound like I have a slight stutter. "It's really important for employers to be aware of the non-physical complications caused by a stroke, like aphasia, as well as the physical ones so they can support stroke survivors to return to work."



### Planning your return to work

#### Think about a phased return to work

You might wish to start off with part-time hours or a voluntary role, before building up to a full-time return to work.

#### Talk to your employer

It's important to have open, regular communication with your employer so they know how best to support you.

#### **Know your rights**

The Equality Act 2010 sets out what you should expect from your employer, such as reasonable adjustments to allow you to work. Find out more at equalityhumanrights.com.

#### Talk to other stroke survivors

It can be helpful to chat to someone who's been through the same as you. Meet other stroke survivors through our online support tool at mystrokeguide.com.

Find out more about returning to work after stroke at **stroke.org.uk/work**.



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## Improving emergency stroke treatment

A five-year research study funded by the Stroke Association aims to use routine brain imaging technology to improve outcomes for stroke, making it easier to decide which emergency treatments will have the most benefit. Dr Grant Mair at the University of Edinburgh explains more.

#### Why is this research needed?

If you have a stroke and are taken to a major stroke centre for emergency treatment, the team treating you can use advanced brain imaging techniques to give them information such as exactly when the stroke happened. But for lots of people in the UK their closest hospital won't be a major stroke centre. Here, clinicians will usually have access to a computed tomography (CT) scan but might not have the resources or expertise of a major stroke centre. My research is looking at how these hospitals can use CT

scans to get more information and make the best decisions about emergency treatment.

### How will this help improve outcomes for stroke?

Some treatments, like thrombolysis and thrombectomy, can only be used within a few hours of the stroke starting. So this research aims to open the door for more stroke clinicians to use these treatments, by using CT imaging to tell when the stroke started. We're also exploring how CT scans can be used to tell which parts have been permanently injured following a





stroke, and which may have more chance of recovery, which again can help clinicians to decide which therapies will be most effective.

What happens next?
So far we've used
preliminary data to prove the
concept that CT scans can be
used in this way. Now we're
looking at methods to test how
frontline clinicians can put this
into practice in a busy hospital
setting, and see whether it
improves outcomes for patients.

I hope this will improve acute stroke care by changing clinical practice for the better, meaning that everyone will have the opportunity for the best possible care, no matter where you live.





Find out more about Dr Mair's

work at **stroke.org.uk/projects** or call **0303 3033 100**. You can also support our research by making a donation at **stroke.org.uk/donating**.

#### Help research rebuild lives.

Research helps stroke survivors to rebuild their lives. Your support could help lead to vital breakthroughs in care and treatment.

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Postcode

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Your privacy is our priority. We promise to keep your details safe and will never sell them. We will also keep in touch by post about how we can continue to support you, and opportunities to support us. If you would like to change the way you hear from us, just call **0300 3300 740** or email **supportercare@stroke.org.uk**. How we protect and use your personal data is set out in our privacy policy at **stroke.org.uk/privacy**.

Stroke

## Back on track

Marc Hodes, 53 from
Nottingham, was busy
with family life, a successful
career as an IT director
and coaching at his local
football club. On 30
September 2018, he ran the
Robin Hood Mini Marathon
with his children Chloé
and Elliott. But something
didn't feel right.

"I'd been having terrible headaches for a week before the race," he remembers. "I managed to get round the 2.5k course but I was struggling to keep up with the kids. After the race, I kept trying to say things but the words wouldn't come out. My wife Sabrina took me to the hospital and a scan revealed that I'd had a stroke. It was a big shock."



After the stroke Marc had difficulty with his balance, as well as severe headaches and fatigue. "I couldn't walk straight," he says. "And I was scared that I was going to have another stroke."

Sabrina planned to run the Robin Hood Half Marathon in September 2019 to raise funds for the Stroke Association, and encouraged Marc to get out with her for some gentle jogging. "I found it was easier to keep my balance running than walking," he says. "Sabrina pushed me along but also made sure I didn't try to do too much."

When Sabrina had to drop out of the race because of a knee injury, Marc decided he was ready to take on the challenge.

"When I started training I was barely able to do 3k, and not yet stable on my feet. But once I decided to go for it, something happened to me. I had a goal and that was hitting 5k, then 6, 8, 10... By the end of July, I hit the 18k. This was the focus that I needed.

"On the day of the race, I felt so emotional. One year after my



stroke, my wife and children were able to watch me run a half marathon for the Stroke Association. It was amazing."

Marc raised over £1,000 for the Stroke Association that day, and went on to raise a further £1,500 in the 2021 race. He's already signed up for this year's event, and running continues to be an important part of his recovery.



"I don't always enjoy getting out for a run, especially when it's cold and wet. But once I'm running I feel great. It makes me feel really good about myself. I'm fitter now than I was before my stroke. I hope I can show that after a stroke it's still possible to get up – you have to keep looking ahead."

#### Share your progress

Sharing what you're doing on social media will boost your fundraising and be a great motivator on those tougher training days.





Feeling inspired?

Find a race to run, walk or cycle at **stroke.org.uk/events**.

# Managing post-stroke fatigue

Many people experience fatigue after a stroke or transient ischaemic attack (TIA or mini-stroke) – a tiredness that doesn't always improve with rest. For some people, it's the most difficult problem they have to manage after a stroke.

Sarah Whitfield from our Stroke Helpline shares some ways to manage fatigue.

What can trigger fatigue? Triggers for fatigue can be different for each stroke survivor. Some people may find physical activities to be a trigger, whereas others might find that processing a lot of information is particularly tiring. You may notice this tiredness in your body and feel that you need to take a rest, or you may notice it in your ability to think about things or how you react to situations. It's useful to learn what your triggers are so you can manage your energy over time.

There is no specific medication to treat post-stroke fatigue. However, it would be worth having a conversation with your GP. They can check for any underlying health conditions that could affect your energy levels, and consider other factors such as side effects to medication. They can also refer you for further assessments if needed.

### How can I manage fatigue?

 Keep a diary – Do you notice that certain activities, times of the day or being in a particular environment trigger your fatigue?



- **Prioritise activities** Identify the things you need or want to do the most
- Break tasks down For example, think about your morning routine. Getting out of bed and ready for the day can involve a lot of different processes. Take it one step at a time, and have a rest between steps if you need to.
- Adapt the activity Can you reduce the energy needed for the activity? For example, sit down for a shower rather than standing. Or if reading makes you tired, try listening to an audiobook.

- Pacing You may find that you have one good day, followed by another where you are completely exhausted. Trial and error will help you to know how much you can do in one go. Listen to your body, and take a break when you need to.
- Planning and organising Use a timetable or calendar to help manage your fatigue. For example, if you have a doctor's appointment, a visit from a friend and a trip to the garden centre planned during the week, leave a more restful day in between to give you the opportunity to recharge.

## Stroke Prevention Day

This year, Stroke Prevention Day was on Friday 14 January, when we urged people to make one small change to reduce their risk of stroke.

While some strokes are unavoidable, up to nine out of ten could be prevented if people are aware of the risks and make lifestyle changes. Last December, we conducted a UK-wide survey of more than 5,300 stroke survivors – nine out of ten said they would urge their younger self to make lifestyle changes.

The campaign was backed by TV presenter Anna Richardson, who vowed to get healthier after her father Jim had a series of strokes. Anna said: "Seeing him have to cope with the effects has given me a real determination to stay as fit and healthy as possible.

"Knowing that my dad's high blood pressure was likely one of the biggest factors for his strokes, I am so careful about keeping my blood pressure in check. I also try to reduce salt in my cooking, limit alcohol, avoid too much saturated fat, and do 30 minutes of exercise every day – be that walking, cycling or maybe some yoga."

You could reduce your risk by:

- Having a number of alcohol-free days each week.
- Reducing salt in your diet or switching to a reduced-sodium alternative such as LoSalt®\*.
- Taking part in Stride for Stroke walking one step for each of the UK's 1.3 million stroke survivors. See stroke.org.uk/stride.
- \* If you take medication that affects potassium levels, for conditions including diabetes, heart or kidney disorders, speak to your GP first to check if reduced sodium salt alternatives are suitable for you.



37% would monitor their blood pressure.

32% would **exercise more** or eat more healthily.

28% would lose weight. Stroke Prevention Day was launched in partnership with LoSalt® and OMRON





Find out more about reducing your risk of stroke at **stroke.org.uk/** stroke-prevention-day.

## Coping with changes to tas

After a stroke, up to a third of people find that their sense of taste or smell changes. This can be upsetting as enjoying food and drink is an important part of life, and taste and smells are closely connected to our feelings and memories. It can also make it harder to eat a healthy diet and reduce the risk of further strokes.

#### Why has my sense of taste or smell changed?

A stroke happens when the blood supply to part of your brain is cut off, killing brain cells. If a stroke damages the parts of the brain that interpret information about taste and smell from your nose and tongue, it causes changes to your senses of taste and smell. Food might taste different or taste bad (dysgeusia). You may be able to taste fewer flavours (hypogeusia) or none at all (ageusia). Some people lose the sense of smell (anosmia) or become more sensitive to smells (hyperosmia). Medications and tooth or gum infections can also affect your sense of taste or smell.

#### How might these changes affect me?

If you can't smell or taste properly, it can reduce your appetite and you might end up eating and drinking less than you need to.
Or you might overeat to try to get more satisfaction from food, or crave sweet or salty foods.
These issues can stop you eating a balanced diet and impact your recovery. If you're struggling to eat healthily and stay well hydrated, a dietitian can give you advice – your stroke nurse or GP should be able to refer you for support.

#### What can I do to make food more tasty?

Tempt your appetite by making your food look bright and fresh.



Vegetables like peas, carrots and red peppers can add colour and crunch to your lunch. Use herbs and spices to add flavour to food, but avoid adding salt or sugar as this can increase the risk of stroke. If you're finding tastes overpowering, try eating food cool rather than hot – this can reduce strong or sweet flavours.

Drinking plenty of fluids, like water, low-sugar drinks, tea and coffee can help get rid of a bad taste in the mouth. Dilute sweet drinks like juice with water, soda or tonic.

If you have any swallowing problems, ask your speech and language therapist for advice before changing what you eat.

#### Will my sense of taste or smell come back?

Changes to taste or smell can improve over time. Good oral hygiene can help, so make sure you look after your mouth, teeth and gums and visit the dentist regularly. And talk to your GP who can help you find out the cause of the problem and offer treatment and support.



Angela Slevin, 58 from Manchester, lost her sense of taste and smell after a stroke in 2008.

"It's very frustrating not to be able to taste or smell anything. It's taken the pleasure away from eating. I used to enjoy going out for meals with my family but now I don't feel able to do it, as it would spoil it for other people. I try to remember what it was like to taste food, but the stroke has affected my memory too so it's difficult.

"I know I have to eat and drink. I still cook for myself and I make sure that I eat a balanced diet and have fresh vegetables every day."

"I still go out and see my family, as it's more important than ever to keep those connections. I also volunteer at the Stroke Association's Stroke Café. I find it really helpful to meet people in the same situation."





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## 30 years of the Stroke Association

New Year's Day 2022 marked 30 years of the Stroke Association, but our history of supporting, caring and innovating goes back way further than that.



1899 – 1992: A century of caring Our charity started life in 1899 as the National Association for the Prevention of Consumption and other forms of Tuberculosis.

The Association was founded to tackle the devastating impact of this infectious disease, which was estimated to have caused the deaths of a quarter of Europe's adult population in the 19th century. Improvements in prevention and treatment meant that by the 1950s tuberculosis was considered under control in the UK. Attention turned to

the growing problems of heart and chest disease, and in 1959 we became the Chest and Heart Association. In 1974 we changed our name to the Chest, Heart and Stroke Association to reflect our increasing involvement in stroke prevention and rehabilitation.

#### 1992 – 2022: Rebuilding lives after stroke

With the founding of the British Heart Foundation and British Lung Foundation, the time was right for our charity to fully focus on stroke – and on 1 January 1992 the Stroke Association was born.

Here are just a few of our proudest achievements in the last three decades:

We've invested over £56 million into stroke research, like the 2011 study into the life-changing treatment thrombectomy which led to it being rolled out by the NHS across England.

In 2005 we created the FAST stroke prevention campaign – it's now used across the world to spot the signs of stroke.



We've supported hundreds of thousands of stroke survivors and carers to rebuild their lives, through our local and national services.



In 2011 we launched the UK Stroke Assembly, now an annual event and one of the largest gatherings of people affected by stroke and aphasia in the UK.

Our network of stroke support groups has grown to over 400, bringing together people affected by stroke across all areas of the UK.



In 2019 our chief executive Juliet Bouverie was awarded the OBE for services to stroke survivors.

To everyone who has been a part of our journey so far, thank you – we couldn't do it without you.

Stroke Association Support Coordinators Tracey, Jacquelyn and Denise are among our longest-serving members of staff, with an amazing 85 years of service between them.



**Tracey:** "When I joined the charity in the 90s we had no mobile phones or computers, and everything was done with paper! It has grown so much since then."

**Denise:** "Back then, everybody worked from home and even team meetings were held in the manager's house. All records and letters were kept by hand."





Jacquelyn: "I have met so many people over the last 25 years affected by stroke and each one is different. I always enjoy meeting new people and feel privileged that people have welcomed me into their lives and shared their journey – the highs, lows and the challenges."



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## "Thrombectomy should be

Since thrombectomy became available as an emergency stroke treatment in 2017, fewer than 2,500 have been carried out per year. This is less than a quarter of the stroke patients across the UK who could benefit. Across the UK, there are areas with no service and others with only weekday and working hours coverage.

Gerald McMullen, a 66-year-old retired pub landlord and driver, had a stroke at home in Cardiff in October 2020.

"I got up in the morning and felt OK," Gerald recalls. "I was sitting in my chair having a cup of tea when my wife Linda suddenly asked if I was OK. I said 'yes'. However, she noticed that something was amiss. My outstretched arm, holding my cup, seemed rigid to her." Linda recognised the FAST symptoms and called 999 immediately.



On arrival at Cardiff's University Hospital of Wales, Gerald was taken for a scan, then moved to another department where a thrombectomy was carried out.

Thrombectomy is most effective when delivered within six hours of symptoms occurring. A flexible tube with a tiny wire mesh cage on the end is inserted into an artery near the groin and guided up through the body into the brain. The cage closes around the clot and removes it, allowing blood to flow freely again.



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This procedure is performed on stroke patients who have a big clot in the brain, known as a large artery occlusion.

Gerald recognises that he was "so lucky" to get the procedure: "All I remember of the operation was the machine over the top of my head. I had my head taped to the table and I drifted off to sleep. The next thing I remember is the guy said to me: 'That's it, you're done."

Gerald stayed on the ward for two nights. "The stroke has

left me with a legacy of a weak right arm," Gerald says, "but I'm getting that back now." A minor inconvenience, he notes, which is much better than the alternative. "Without the thrombectomy I would have been in a much worse state."

Now Gerald can play golf again and enjoy life with his family. "I think thrombectomy is fantastic. I think it should be made available everywhere. Get it done quickly and get rid of the clot. It's brilliant technology."

## Connecting to my community

Our Community Steps project in Wales supports stroke survivors to connect with others in their community so that they feel less isolated. For Tyge Byrne, 57 from Cardiff, it offered him a lifeline following the breakup of his marriage.

"I was only 53 when I had a massive stroke which left me unable to walk or use my arm. My speech was affected too. Then my wife left me and overnight I became homeless.

"Nicola from the Stroke
Association was brilliant, as was
my psychologist, Dr Walters.
They had supported me right
from the start, not only with
my physical difficulties, but
my emotional difficulties too.

"I moved to an assisted living complex, and gave up smoking and drinking. Now I feel a whole lot healthier and life has improved so much for me.

"I was supported by the Stroke Association's Here For You telephone service, and last year I decided to volunteer as a telephone befriender myself. We discuss all sorts of things and provide useful hints and tips to each other.

"Lauren from the Community Steps project helped me get into volunteering and has been a fantastic form of support. She nominated me for a Personal Development Award in Age Connects Wales' Older Person's Awards and I was so humbled to be the winner for my local area.

"Volunteering for the Stroke Association has given me purpose to live life to the full."



# Stroke and Covid-19 resea

Two years after the spring 2020 lockdown, the first results are available from a study funded by the Stroke Association and other partners into the links between Covid-19 and stroke.



Research led by Dr William Whiteley and the British Heart Foundation Data Science Centre aimed

to find out if Covid-19 increases the risk of stroke, and whether having the Covid-19 vaccine puts people at a higher risk of stroke.

Since March 2021, they've examined the electronic health records of every person in England who has either had a recorded Covid-19 vaccine or Covid-19 infection – over 46 million people.

Their study shows that there is an increased risk of stroke

after catching Covid-19. The risk is highest in the first few weeks following infection, but there is still a small increase in risk up to a year after catching the virus.

The study also shows that people are less likely to have a stroke after having the Covid-19 vaccine than before vaccination, particularly people who have already had a stroke.

This research is essential in helping to improve care and outcomes for people with Covid-19 and stroke, as well as supporting research into stroke and its causes as a whole.

## rch update

Baz Singh from Solihull understands this better than most. In October 2020, Baz, 48, had a stroke that doctors said was a result of contracting Covid-19. After spending three weeks in hospital with the virus, he started having headaches and problems with his vision. Scans revealed that he'd had a stroke after a blood vessel had burst at the back of his head.

"Doctors said that I had no other markers or risk of stroke," says Baz. "The nurses and consultants on the stroke ward were fantastic. I'm so grateful for the support I received both at the time and during my recovery.

"Research is important. I wouldn't be alive without it. Without pioneering techniques there will be a lot more people with stroke



and more deaths – especially with Covid-19, which isn't going away any time soon."

Dr Whiteley agrees. "Covid-19 may have caused thousands of extra strokes in 2020," he says. "Vaccination protects you against Covid-19, and the risk of stroke and other severe complications after infection."



## The power of art and peer support

When mum-of-two Vicky Talbot, 49 from Sheffield, had a stroke three years ago her world fell apart. Joining an art group for stroke survivors helped her to start putting the pieces back together.

"The impact on my family was huge," says Vicky. "My boys were nine and 13 and they just didn't understand what had happened. We had always been a team. But suddenly everything had changed and I was struggling."

Vicky's Stroke Association Support Coordinator Jane Hammond invited her along to an art and peer support group run by Sheffield Stroke Recovery Service and led by retired teacher Maggie MacDougall. "I was reluctant to go at first," says Vicky. "But when I got there and saw Jane's smiling face welcoming me, I knew that it was going to be alright.

"I started to look forward to going every week – not just for the art, but because I was surrounded by people who understood what I'd been through."

Week by week, Vicky's confidence grew and she started going to more groups, including exercise classes and a cook-along session. "Now, whenever I'm invited to anything I'll go along and join in!" she says. "I really feel that the Stroke Association brought 'me' back.

"That extra confidence has helped me to rebuild my family life, too. My kids understand that there are things that I can and can't do, and that's OK. We're still a team."



Stroke support groups offer support to stroke survivors, carers, family and friends. Built on friendship and fun, they are a safe and supportive space to try things again, to learn more about stroke and self-care and to build your confidence as you rebuild your life after stroke. To find out more visit **stroke.org.uk/groups**.

## Find aphasia support online

A new section of our online tool **My Stroke Guide** brings together videos, resources and apps for stroke survivors with aphasia, a language and communication disorder. Stroke survivor Jan McDonald and her daughter Carly gave it a try.

Jan, 62 from Portsmouth, has lived with aphasia since her stroke in 2005. Carly explains: "Mum's speech, reading, writing and sometimes comprehension are all affected. Most websites are not easy for her to navigate."

Jan and Carly found the new 'Aphasia and communication' area of My Stroke Guide a useful way to find out more about the condition and life after stroke in an aphasia-friendly way.

"We really like the clear layout of the sections, that all sentences are simple, well-spaced and with the key words highlighted," says Carly. "The videos convey complex subject matters into accessible clips that only give key information, aided by pictures at a really good pace. There is plenty of time between the spoken messages to be able to process the information.

"It was great that the 'Getting online for people with aphasia' section could be viewed as a whole document or you could look at chapters in smaller chunks. Mum wants to use social media more to connect with friends and family, so she really liked the information here."

My Stroke Guide also signposts to some of the most commonly used aphasia therapy apps. This section was created together with people with aphasia who were able to try out the apps and share



their thoughts. "I helped Mum to download two apps which she hasn't used before," says Carly. It's important to find the app that best supports your needs – ask your speech and language therapist to recommend an app based on your communication goals. You can find the 'Aphasia and communication' section on My Stroke Guide. Click on the information button and look for 'Aphasia and communication', or visit mystrokeguide.com/aphasia.

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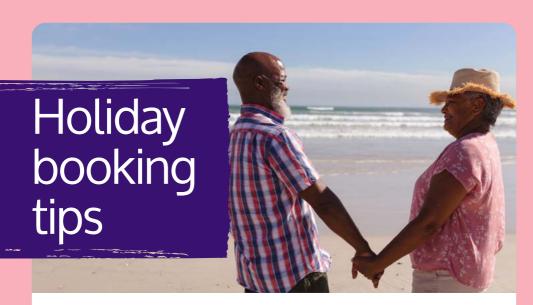
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# Keep on top of rising living costs

We've all heard about how the cost of living is going up, driven by high fuel prices, increasing food costs and tax rises. This is on top of the financial impact of stroke, where people might not be able to work due to illness, disability or looking after someone. But you may be able to get financial support to help with the rising cost of living.

### Check if you are eligible for benefits

A good starting point would be to speak to your local Citizens Advice service. If you use a computer, there are a number of independent benefits calculators that let you find out what benefits you could get, how to claim, and how your benefits will be affected if you start work. You can get a list of organisations which have benefits calculators from gov.uk/benefits-calculators.

#### Find out about grants

Grants are a less well-known source of financial support than

benefits, but could make a big difference if you're on a low income. Grants can be given as products, services or as a sum of money. They're not loans, so don't need to be paid back. They can help with expenses such as buying a cooker or furniture, or can be used to make adaptations to your home. Each grant will come with its own criteria, but will generally support people in financial need. Turn2us is a national charity, which gives practical help to people who are struggling financially. They have a grants search resource on their website, so you

can check what grants might be available to you. Find out more at turn2us.orq.uk.

Get help from your local council Each council runs its own welfare assistance scheme, which could

help by giving vouchers to buy a hot meal, pre-owned furniture,

or household appliances.

These schemes are sometimes called Household Support Funds. Eligibility criteria varies. though you don't have to receive benefits to apply, so check with your local council to see what it offers.

Agree a payment plan with your energy supplier If you're struggling to pay your gas or electricity bill, contact your supplier as soon as possible. They will talk to you to work out a payment plan that takes into account your income and how much you can afford to pay.





Puzzles can be a fun way to exercise your mind and improve concentration, understanding and memory.

#### Word search

R	W	S	W	0	Е	0	S	G
K	0	D	G	Т	0	L	Р	Ν
0	R	R	Q	K	W	Е	Α	1
J	С	U	С	R	L	1	R	L
В	L	U	Е	Т	1	Т	R	R
Υ	С	N	٧	Χ	R	Υ	0	Α
М	Α	G	Р	1	Ε	0	W	Т
Т	J	J	Т	S	Т	Q	0	S
_	N.I	4	D	$\circ$	D	_	٨	V

Blue tit Robin
Crow Rook
Cuckoo Sparrow
Jay Starling
Magpie Wren

#### **Across**

- 1 Concise (4)
- 4 Clues (8)
- **8** Simple (5)
- **9** Puzzle (6)
- 10 Vital (10)
- 13 Fight against (6)
- 15 Persian governor (6)
- 16 Native language (10)
- **19** Runny (6)
- 21 Difficult (5)
- 22 Deception (8)
- 23 Connect (4)

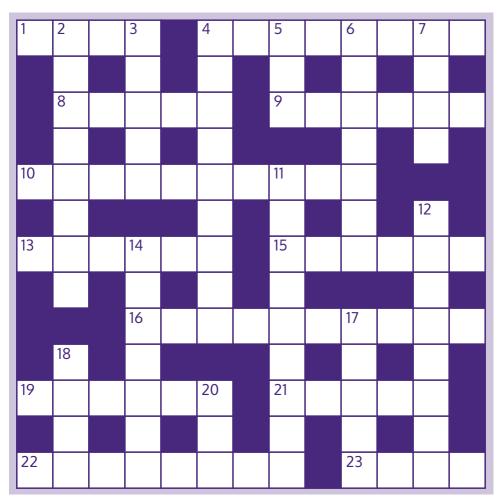
#### Lottery

For your chance to win £1,000 every week, play the Stroke Association Charity Lottery. Find out more at lottery.stroke.org.uk.

#### Down

- 2 Rare (8)
- 3 Flavour (5)
- 4 Salary official (9)
- **5** Wrath (3)
- 6 Cut into three pieces (7)
- 7 Hind part (4)

- **11** At once (9)
- 12 Long-distance race (8)
- 14 Makeshift camp (7)
- **17** Standard (5)
- **18** Layer (4)
- 20 Owed (3)



With thanks to The Times/News Syndication who granted us rights to this crossword.

## Rebuilding lives after stro

Our charity supports people to live the best life they can after stroke. But rebuilding lives is a team effort and we need your help. A huge thank you to everyone who's gone the extra mile to fundraise, volunteer and campaign with us. Your support means we can reach even more people who need us.



#### **Spencer Collins**

Spencer, whose father is a stroke survivor, has fundraised for the Stroke Association for years. In November he raised £700 and shared the FAST message during a 24-hour DJ marathon on his local radio station in Surrey.

#### **Stanley Redfern**

Six-year-old Stanley from Derbyshire took on a running challenge for the Stroke Association after his dad had a stroke. His family have since raised over £7,000 to rebuild lives after stroke.







Find out how you can get involved and support us on p50 or make a donation at **stroke.org.uk/donating**.



#### How does your donation help?



£10 could help us provide group support to stroke survivors, giving them confidence for their recovery.



£25 could help someone find hope through a call to our Helpline, giving them the emotional support to begin rebuilding their life.



£50 could help fund critical research that facilitates life-changing discoveries to help support people rebuilding life after stroke.



In December 2021, a cast of Guides aged 10 to 14 raised an incredible £1,400 for the Stroke Association with their 20th annual pantomime, 'The Emperor's New Clothes'.



#### Volunteer spotlight

John Harrison is a volunteer driver for Stroke Association groups in Manchester.

"Ten years ago a dream holiday in the Dominican Republic turned into a nightmare when I had a stroke. I was paralysed and I couldn't speak. After two weeks I was transferred to North Manchester General Hospital and began my road to recovery.

"I started volunteering for the Stroke Association about three years ago. I find it fulfilling and rewarding, and being able to empathise is helpful.

"The camaraderie and kindness of the group members is key to our recovery and wellbeing."

To find out how you can volunteer, visit **stroke.org.uk/yoursupport**.

Join Team Stroke

Get involved from the comfort of your own home, or grab your trainers and head out:

#### **Great North Run** 11 September 2022

Looking for a challenge for later this year? We'll support you every step of the way and you'll be raising money to rebuild lives. Sign up at stroke.org.uk/greatnorthrun.

#### **Stride for Stroke**

Challenge yourself to take 1.3 million steps, that's one for every stroke survivor in the UK. Raise money because stroke survivors need your support. Sign up at stroke.org.uk/stride.



Cycle outside or indoors, set your own distance and raise money to rebuild lives after stroke. Get on your bike at **stroke.org.uk/spin**.

#### **Fundraise on social media**

It's quick and easy to support stroke survivors by fundraising on your own social media. Find out more at **stroke.org.uk/social**.

For more events and ways to get involved in our work, see **stroke.org.uk**.

#### Crossword solution

Across: 1 Curt; 4 Pointers; 8 Cushy; 9 Enigma; 10 Imperative; 13 Combat; 15 Satrap; 16 Vernacular; 19 Liquid; 21 Tough; 22 Trickery; 23 Link

**Down:** 2 Uncommon; 3 Taste; 4 Paymaster; 5 Ire; 6 Trisect; 7 Rump; 11 Instantly; 12 Marathon; 14 Bivouac; 17 Usual; 18 Tier: 20 Due



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