Stroke in people of working age (18-65)

Stroke is often thought to only affect older people, but around a third of those who have a stroke are under the age of 65. If you are of working age and have had a stroke, or know someone who has, this factsheet covers some of the concerns you may have, such as the impact on relationships and getting back to work.

What is a stroke?

A stroke is a brain attack. It happens when the blood supply to part of your brain is cut off. Blood carries essential nutrients and oxygen to your brain. Without blood your brain cells can be damaged or die.

In adults of any age, the majority of strokes are caused by a blockage cutting off the blood supply to the brain. This is known as an ischaemic stroke. However, research suggests that haemorrhagic strokes, which are caused by bleeding within or around the brain, occur more often in people under 65 than in older adults.

Strokes affect people in different ways, depending on the part of the brain that is affected, how widespread the damage is and how healthy you were before your stroke. A stroke can affect the way your body functions as well as your thought processes and how you feel and communicate.

The FAST test (right) can help you to recognise the symptoms of a stroke. These symptoms usually come on suddenly. Other symptoms include sudden weakness or numbness on one side of the body, sudden confusion, dizziness or unsteadiness.

A transient ischaemic attack or TIA is similar to a stroke but the symptoms are temporary – usually lasting from a few minutes up to 24 hours. A TIA is serious and should not be ignored. If you experience any of the symptoms described above you must call 999, as there is no way of telling whether you are having a TIA or a stroke when the symptoms first start.
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What happens when you have a stroke?

The first few days
A stroke is a medical emergency and if you have one you should go to hospital immediately. You may start off in accident and emergency or another assessment ward, but it is likely you will be quickly admitted to an acute (or hyper-acute) stroke unit.

At first you will need to have tests to confirm that you have had a stroke and make sure that you receive the right emergency treatment. The quicker your stroke is diagnosed and treated, the better your recovery will be.

It is likely that you will undergo a series of scans and tests to confirm what has happened and rule out other conditions. These tests will help doctors to identify what may have caused your stroke and what treatments will help to prevent further strokes.

What are the effects of stroke?

Although all strokes are different, some common effects include:

- **weakness and paralysis**: this usually happens on one side of your body and can often be made worse by stiffness (spasticity) in your arm or leg muscles. This may cause you pain or discomfort, or you may lose feeling in your affected limbs altogether
- **speech and language problems**: many people have difficulty with language after their stroke. This is known as aphasia. It can include difficulties with speaking and understanding what people are saying to you, as well as reading and writing
- **difficulties with your memory, concentration and learning**
- **problems with your vision**
- **problems with balance**
- **problems with swallowing**
- **difficulties controlling your bladder and bowels**
- **excessive tiredness**.

A stroke can also have an emotional impact and can cause problems such as anxiety, depression or changes to your personality.

All strokes are different so for some people the effects may be relatively minor and may not last long, while others may be left with more serious long term effects. The younger you are the better your chances for a good recovery, however quick treatment will give you the best chance possible, so it’s important to call 999 and get to hospital straight away.

**Your recovery**

Depending on how serious your stroke is you may stay in hospital for anything from a few days to a few months, and you may stay on the stroke unit or move to a rehabilitation ward.

The team on your stroke unit will include a number of different health professionals, such as physiotherapists, occupational therapists, speech and language therapists or a psychologist. They will work with you, your family and each other to assess the effects of your stroke and what that means for your rehabilitation. While in hospital you will have daily sessions with your different therapists who will help you to relearn the skills you have lost and learn how to manage any longer term problems.
Your stroke team should talk to you about your priorities (whether that’s becoming independent enough to return home, for example, or focusing on getting back to work) and set realistic goals that will help you work towards them. For most people recovery is fastest in the first few weeks after their stroke but it’s likely to continue for many months and even years – it isn’t limited to the time you spend in hospital.

When you are ready to leave hospital, your stroke team will work with you to agree what support you will need at home and put together a discharge plan. This will cover all the arrangements for your continued rehabilitation and care at home, including the community services that will be helping you and any aids or equipment you need. You should be told who you can contact if you or your family need help or information.

Will I get better?

Because every stroke is different, there is no set pattern for recovering from one. Your ability to recover and how quickly it happens will depend on the part of your brain that has been affected, the amount of damage that was done, as well as your own motivation to do everything you can to make the best recovery.

In the first few days and weeks after your stroke you’re likely to see some immediate recovery. When an artery in your brain is blocked, the part of your brain it supplies with oxygen and nutrients begins to die. This part of your brain will be surrounded by other brain cells that continue to receive some blood from other arteries, but not enough to allow them to work properly and so they shut down. If these ‘vulnerable’ cells are left without a full blood supply for too long they will also die, but if a blood supply can be restored it’s thought that these cells ‘wake up’ and begin to work again. This is when you start to see signs of recovery.

It is also thought that the reduced blood supply in your brain can cause cells to become inflamed and swollen, so some of your very early recovery may also be due to this swelling going down.

After this early burst of recovery, progress tends to slow down. This is normal and doesn’t mean that you won’t recover any further. Although the brain cells that have been severely damaged or have died can’t grow back, other parts of the brain can learn to take over the jobs that they did. This is called neuroplasticity. This means that you can continue to make improvements many months or even years after a stroke.

Rehabilitation should begin as soon as possible after your stroke. While recovery means getting better, rehabilitation is about overcoming and adapting to the effects of your stroke.

Your therapists will give you exercises and advice to help you relearn abilities you have lost and show you new ways of doing things, such as dressing with one arm. Starting your rehabilitation immediately will help to avoid further problems from developing and give you the best chances for recovery.

Rehabilitation encourages neuroplasticity and helps the brain to reorganise itself, especially in the early stages after stroke. This is why beginning intensive rehabilitation as soon as possible is so important.
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What can I do?

Time and practice play an important role in your recovery. The more you practice the more likely you are to relearn skills and adapt to new ways of doing things. Ask your therapist if there are things you can practice by yourself or with a friend or family member in between your therapy sessions.

Be careful not to push yourself too hard though. Your therapy is likely to make you tired, especially in the early stages of recovery. Make sure you take the advice of your therapists about exactly what and how much you should be doing.

Remember that recovery takes time and patience, as well as practice and determination. Some days will be harder than others but thinking of ways to make it fun and involving your friends and family will help you to keep going.

Don’t be disheartened if you’re not seeing improvements as quickly as you would like. Focus on the things you can do and remind yourself of the improvements you’ve made so far. Never assume that you won’t get any better, you may just need more time.

Coping with the effects of stroke

Stroke brings a lot of questions and uncertainty with it. Coping with this can be overwhelming for both you and the people around you. Fear of another stroke, anger and grief about the things you’ve lost, shock and helplessness are all natural emotions to have after a stroke.

We know the emotional impact of stroke can be particularly significant for younger stroke survivors. Our research shows that nearly three quarters of stroke survivors aged between 30 and 59 report feelings of anxiety and over half experience depression and fear.

Dealing with both the emotional and physical effects of stroke is difficult, but there are things you can do to help you cope.

What can I do?

If you are experiencing emotional changes or struggling with feelings such as anxiety or depression it’s important to speak up. Your doctor may not think to ask about how you are feeling, but there will be support available if you need it.

Talking to the right people and finding answers to some of your questions will help you feel more in control of your situation and help you plan for the future.

In England, Northern Ireland and Wales stroke survivors should have a review with someone at six weeks, six months and 12 months after their stroke to make sure they are receiving the care and support they need. In Scotland each health authority has its own guidelines about the follow up you should expect to receive after your stroke.

Our leaflets When a stroke happens (L04) and The road to recovery (L06) offer more information about what to expect when you’ve had a stroke and the people who can help you in your recovery.
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If you’ve not had one of these reviews speak to your GP or someone in your community stroke team.

But you don’t have to wait until your next review if you have concerns or need some help. Over the next few pages we’ll look at some of the questions you may have and what you can do to find information and support.

Need to talk?
Whatever your concern is, our helpline team can help. Whether you want to know more about stroke and its effects, are looking for practical information and support or simply need someone to talk to, we’re here for you.

Call us on 0303 3033 100 or email info@stroke.org.uk

Will I have another stroke?

For many stroke survivors, their greatest fear is having another stroke. Once you’ve had a stroke your risk of having another is increased, but understanding what factors caused your stroke will help you know how to reduce your risk of having another one.

Certain medical conditions like diabetes and high blood pressure can cause stroke as well as lifestyle factors, such as diet, drinking too much alcohol, taking drugs, smoking and lack of exercise.

However, there are some factors that tend to affect younger adults in particular:
• Sometimes tears in the lining of an artery can develop and allow blood to get between the layers in your artery walls. This is known as arterial dissection and can happen for no clear reason or it can be the result of a “trauma” or injury such as whiplash. As the blood builds up a clot can form. If this clot restricts the flow of blood to your brain or moves up into your brain, it can cause a stroke. It’s thought that arterial dissection causes up to 25% of strokes in people aged 45 or younger.

• Certain genetic conditions can cause strokes in younger adults. Sickle cell disease, for example, is a genetic disorder that affects your red blood cells. Twenty four per cent of people with sickle cell disease will have a stroke by the age of 45.

• Although it is more common as you get older, high blood pressure is an important risk factor for younger adults too and it contributes to 53% of all strokes.

• Smoking can double your risk of having a stroke because it increases your blood pressure, narrows your arteries and makes your blood more likely to clot.

• Drinking too much alcohol increases your blood pressure. Research shows that drinking a large amount of alcohol greatly increases your risk of stroke.

• Using drugs is also a risk factor for stroke. Some drugs pose a particularly high risk because they cause a dramatic and sudden rise in your blood pressure.

• Although uncommon, some women have a stroke during or after pregnancy. For a number of different reasons your risk is slightly increased whilst you are pregnant and for a short time after childbirth.
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What can I do?
Whilst you are in hospital your doctor should explain what he or she thinks caused your stroke and what action needs to be taken to reduce your risk of it happening again. This could mean taking medication or making changes to your lifestyle or both. Make sure you understand what you need to do and why.

Don’t be afraid to ask questions, even if it’s days, weeks or months later. It’s important that you understand what happened to you and why.

Knowing what you can do to reduce your risk of having another stroke will help you to feel more confident and in control. If it helps, take this factsheet with you to your appointment and use it as a prompt.

Unfortunately the cause of a stroke cannot be identified in every case. Your doctor should do all he or she can to check potential factors, but sometimes it won’t be possible to identify an exact cause. Although it can be difficult not knowing why you had a stroke, the best you can do is be aware of the risk factors and what you can do to reduce your risk.

We have lots of information about the risk factors for stroke. See How can I find out more? at the end of this factsheet.

What impact will this have on my loved ones?
Stroke can be a real shock and affects everyone around you. Your stroke will probably cause worry and uncertainty and planning for the future may be difficult.
We know that many stroke survivors worry about the impact their stroke has on their partner and family members, fearing that they may become a burden. However, you may find it difficult to talk about this and feel you have to “stay strong” for your family instead.

Stroke can also put a strain on relationships. In a survey we carried out with stroke survivors nearly two thirds of people aged 30-59 had experienced relationship difficulties following their stroke.

You may feel frustrated if you can no longer participate in family life in the same way as before, while your partner may feel overwhelmed if they suddenly have to take over things that you used to do. If you have young children, there may be additional emotional, practical and financial considerations.

What can I do?
Share information with your family and involve them in making decisions – the more they understand your situation and feel involved in planning for the future the less anxious they may feel. Make sure they understand your needs and how things will change when you return home so that they know what to expect and how they can help you.

Try to continue with your family responsibilities as soon as you can. Even if you can’t carry out exactly the same tasks you performed before your stroke, there’ll still be a role for you within your family and activities that you can enjoy together, which will help you feel more confident and less isolated from them.
Friendships can slip away after a stroke but **friends are important** as they can offer support and challenge you in ways that your family may not be able to. Talk to them about what has happened as they may not appreciate the impact that your stroke has had – they may not understand how tired you get or that you can’t get out as much as you used to, for example. **Be open about what you need** and what they can do to help you.

Coping with the impact of stroke is not easy but the best thing to do is talk about it – with the people around you and professionals who can offer support.

After your stroke you may have had **a health and social care assessment or community care assessment** with a social worker from your local authority. This should take into account any family responsibilities you have and should provide you with support so that you can meet these needs.

If you have not been offered an assessment and you are concerned about looking after your children or other family members you can contact the adult social services team at your local council (Health and Social Care Trust in Northern Ireland). It is a good idea to **make a list of the type of support you need before an assessment**. This might include help with getting your children ready for school or specialist equipment such as adapted pushchairs.

**What about my partner?**

Recognise that **your stroke will have an emotional impact on your partner** as well as you. He or she may also be dealing with feelings of anger, grief or anxiety.

It can be difficult to talk about these kinds of feelings with someone you love, which is why **counselling can often help**. Relate and Relationships Scotland are organisations that offer counselling and support for relationship difficulties, or your doctor may be able to help you find another counselling service that can offer help.

The physical and emotional changes you experience after **a stroke can affect your sex life**. Muscle weakness or pain, for example, can make sex difficult or uncomfortable, and if you’re feeling low you may lose interest in having sex. Although sex can be an embarrassing subject to bring up, **it will help to talk about any problems you’re having**. All health professionals who work with stroke should understand these issues and be able to discuss sex and relationships with you if want to.

Many people also find it helpful to **talk to someone who has been through a similar experience**. There is likely to be a stroke club or group near to where you live, where people who have experienced stroke get together. There may also be a group specifically for younger stroke survivors.

**Stroke clubs** can provide a safe and supportive way for you to begin to socialise and build your confidence again. It can give you the chance to get out of the house, and perhaps give you and your partner some time away from each other, which can often help. There are also carers’ centres in many areas of the UK who can give advice and support as well.

You can find details of local groups on our website or by calling our helpline (see **How can I find out more?** for details).
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**Taking part in leisure activities** is another important part of life after stroke. You may want to return to interests you enjoyed before, or try out some new ones. Our factsheet *Leisure activities after stroke (R09)* can tell you more.

You or your family members could also visit our online discussion forum TalkStroke. This is an online community for anyone who has been affected by stroke, where you can share your experiences or concerns, ask questions and receive advice and encouragement from people in similar situations. Take a look at stroke.org.uk

**Will I be able to go back to work?**

**With the right care, support and advice many people do return to work.** Whether you are able to return to work and how long it takes will depend on the effects of your stroke, what work you were doing before and the amount of support your employer can give you.

What this means depends on the size and nature of your employer, but they may be able to slightly adjust your previous role, for example, or offer you another that is more suitable. They may also be able to offer training, install equipment that will help you or allow you to work a reduced amount of hours, especially when you first return.

Most employers are keen to do all they can for their employees, but it’s likely that they will need some advice. **Putting your employer in touch with your occupational therapist is a good starting point**, as he or she will be able to give them information about stroke, and how it has affected you in particular, and tell them about other sources of information and support if they need it.

If returning to your current job isn’t possible, you could look for a different role elsewhere, or retrain for a different type of job.

**A disability employment adviser can help you gain new skills** and tell you about disability friendly employers in your area. He or she can also tell you about other support that is available, such as grants that can help pay for taxi fares to work if you can’t take public transport, for example, or pay for disability awareness training for your colleagues. You can ask to speak to a disability employment adviser at your local JobCentre Plus.

Even though you may be eager to get back to work, it’s important to be aware of any lasting effects. Lots of people have problems with fatigue after their stroke and you may get tired far more quickly than you used to. You may find that you can cope with the physical aspect of work but your concentration levels are reduced, and you may not notice until you begin to

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**Returning to work doesn’t necessarily mean returning to the same job with the same roles and responsibilities.**

Even if you can no longer do exactly the same role you did before, there are still lots of options to explore so don’t write yourself off too soon.

**Your employer has a legal responsibility to do all they can** to ensure that your stroke does not stop you from keeping your job or having the same rights and access to opportunities that you had before.
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work again. This is why many people find returning to work part time and gradually increasing their hours is helpful.

What do I need to do?
The first thing to do is to talk to your occupational therapist. He or she should ask you about the work you were doing before your stroke and help you to set realistic goals about returning. They can advise on aids or equipment that you may need or refer you to a disability employment advisor or to a specialist vocational rehabilitation team who can provide additional assistance or advice.

Make sure you keep in touch with your employer. This should help you feel less isolated and ease your worries about returning to work. When you think you may be ready to return, your employer should work with you to identify what your needs are and what adjustments they can make to help you.

Whether you plan to return to work or not you should find out what financial support you may be entitled to. Depending on your circumstances you may be able to claim benefits from the government. To find out more read our Benefits and financial assistance (R01) factsheet or contact your local Citizens Advice Bureau for advice.

If you weren’t working before your stroke you may still be entitled to financial support. If you were studying at university or college when you had your stroke, you may be able to get help with equipment or the support of professional care staff.

Every college or university will have a disability adviser or learning support co-ordinator who can tell you about the sorts of help available. Some of the organisations listed in the Other useful contacts section of this factsheet can also offer advice on returning to education.

How can I find out more?

Talk to us
At the Stroke Association, our helpline team can give you information about stroke and tell you about services and support available in your local area.

Call us on 0303 3033 100 (Monday to Friday, 9am-5pm) or email info@stroke.org.uk

Get online
We have lots of information about stroke and how to prevent it on our website. Go to stroke.org.uk

Read our publications
We also produce a range of other leaflets and factsheets about stroke and related issues. You can download these for free or order a printed copy to be posted to you via our website stroke.org.uk or by calling the helpline on 0303 3033 100.

Some of our other factsheets include:
• How to prevent a stroke (L03)
• Emotional changes after stroke (F36)
• Stroke: A carer’s guide (F04)
• Women and stroke (F38)
• Benefits and financial support (R01)
• Driving after stroke (F02)
• Leisure activities after stroke (R09)

Go to stroke.org.uk for a full list
Other useful contacts
If you’re looking for more information the following organisations may also be able to help. All are UK wide unless otherwise stated.

Please note that details of these organisations are for information only. We are not recommending or endorsing anyone by including them in this factsheet.

Different Strokes
Website: www.differentstrokes.co.uk
StrokeLine: 0845 130 7172
Provides information and support for younger stroke survivors, including guides on work after stroke for survivors, family and employers.

Brain and Spine Foundation
Website: www.brainandspine.org.uk
Tel: 0808 808 1000
Provides information and support to people affected by neurological conditions including stroke. The helpline is manned by neuroscience nurses.

Carers UK
Website: www.carersuk.org
AdVICeline: 0808 808 7777
Email: advice@carersuk.org
Provides information, advice and support for carers.

Chest, Heart and Stroke Scotland
Website: www.chss.org.uk
Tel: 0845 077 6000 (Helpline)
Email: adviceline@chss.org.uk
Provides information on local stroke groups in Scotland. It also runs an advice line staffed by nurses.

Disabled Living Foundation
Website: www.dlf.org.uk
Tel: 0300 999 0004
Email: helpline@dlf.org.uk
A national charity that provides free, impartial advice about all types of equipment for people with disabilities, their carers and families.

Headway
Website: www.headway.org.uk
Tel: 0808 800 2244
Email: helpline@headway.org.uk
A national charity supporting people with a brain injury. They have local groups and branches, which include rehabilitation programmes, carer support, social activities, community outreach and respite care.

Momentum
Website: www.momentumuk.org.uk
Tel: 0141 419 5299
Email: headoffice@momentumuk.org.uk
Provides rehabilitation, training and care services for people with disabilities in Scotland, north east England and the Midlands. Runs a social enterprise that employs disabled people.

Family and relationships

Disabled Parents Network
Website: disabledparentsnetwork.org.uk
Tel: 0300 3300 639
Provides information, advice and peer support to disabled people who are parents or hoping to become parents and their families.
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**Relate (England and Wales)**
**Website:** www.relate.org.uk  
**Tel:** 0300 100 1234
**Relate (Northern Ireland)**
**Website:** www.relateni.org  
**Tel:** 028 9032 3454
**Relationships Scotland**
**Website:** www.relationships-scotland.org.uk  
**Tel:** 0845 119 2020
All offer relationship, sex and family counselling in centres, online and over the phone. Websites offers information and advice on relationship difficulties.

**The Sexual Advice Association**
**Website:** www.sda.uk.net  
**Helpline:** 020 7486 7262
Works to improve sexual health and wellbeing. The helpline is staffed by professionals who can provide information on sexual problems.

**Work, education and finance**

**Advice4me**
**Website:** www.advice4me.org.uk
Website providing information on debts, benefits, housing and employment aimed at people aged 25 and under.

**Citizens Advice Bureau (CAB)**
**Website:** www.adviceguide.org.uk
Offers advice and information on a range of issues including debt, benefits, legal issues and housing.

**Disability Rights UK**
**Website:** disabilityrightsuk.org  
**Tel:** 020 7250 3222  
**Email:** enquiries@disabilityrightsuk.org
Works to create a society where everyone with a disability or health conditions can participate equally in society.

**Gov UK (England, Scotland, Wales)**
**Website:** www.gov.uk  
**NI Direct (Northern Ireland)**
**Website:** www.nidirect.gov.uk
Government websites providing information on a range of subjects including benefits and looking for work. Use these sites to find your local Jobcentre Plus or Jobs and Benefits Office where you can speak to a disability employment adviser.

**LEAD Scotland**
**Website:** www.lead.org.uk  
**Tel:** 0800 999 2568  
**Email:** info@lead.org.uk
A voluntary organisation set up to widen access to learning for disabled young people and adults and carers across Scotland.

**Shaw Trust**
**Website:** www.shaw-trust.org.uk  
**Tel:** 01225 716 300
Helps people with disabilities find employment.

**Disabled Students Helpline** (provided by Disability Rights UK)
**Tel:** 0800 328 5050  
**Email:** students@disabilityrightsuk.org
Provides advice to disabled students who are studying in England.

**Emotional support**

**British Association for Counselling and Psychotherapy (BACP)**
**Website:** www.bacp.co.uk  
**Tel:** 01455 883300  
**Email:** bacp@bacp.co.uk
Offers information for anyone seeking information on counselling and psychotherapy in the UK. You can use the website to search for a registered counsellor or psychotherapist in your area.
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The Stroke Association is a charity. We rely on your support.
Text STROKE 5 to 70300 to donate £5. 100% of your donation goes to the Stroke Association. Find out how your support helps at stroke.org.uk/savelives

MIND/ MIND Cymru
Website: www.mind.org.uk
Tel: 0300 123 3393 (Infoline)
Email: info@mind.org.uk
Mental health charity working in England and Wales, offering a range of publications and information on local services and support groups.

Niamh Wellbeing (Northern Ireland Association for Mental Health)
Website: www.niamhwellbeing.org
Tel: 028 9032 8474
Charity focusing on mental health and wellbeing services in Northern Ireland. Its Beacon programme is a network of support services throughout Northern Ireland.

Scottish Association for Mental Health
Website: www.samh.org.uk
Tel: 0800 917 3466
Email: info@samh.org.uk
Provides information and advice on mental health and provides community-based support services for people across Scotland.

Samaritans
Website: www.samaritans.org
Tel: 08457 90 90 90
Provides confidential, non-judgemental emotional support 24 hours a day, 365 days a year.

How did we do?
Your feedback will help us to improve our publications, making sure that they answer your questions and are easy to understand.

To let us know what you think of this factsheet email info@stroke.org or go to stroke.org.uk and complete our online form.

About our information
We are committed to producing clear, accurate and unbiased information for stroke survivors, their families and friends. To produce our publications we use information from professional bodies and other reliable sources including NICE, SIGN, Royal College of Physicians, medical journals and textbooks. For a list of all the sources used in this factsheet go to stroke.org.uk

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