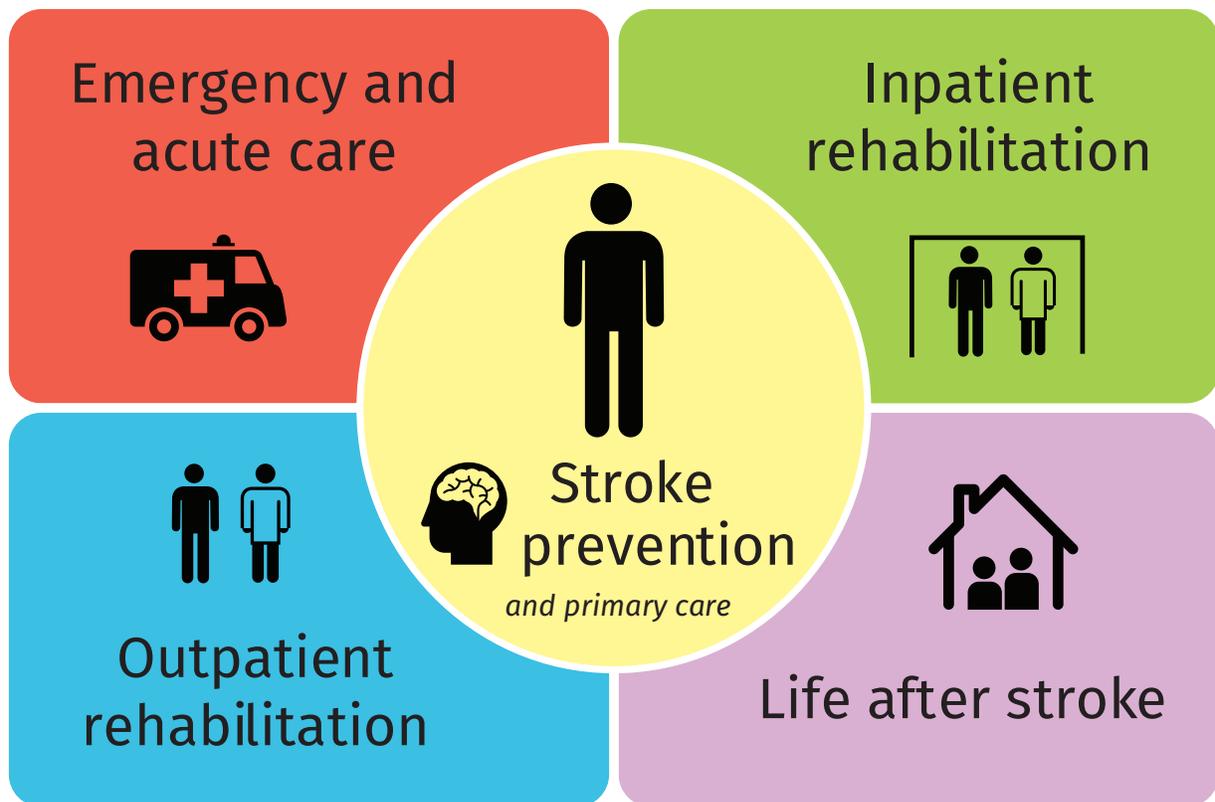


Guide for Stroke Recovery

Information and resources for persons
and families recovering from stroke



Journey to stroke recovery



This visual allows you to identify the 5 main areas in the journey to stroke recovery. Each person's journey is different. You may or may not experience all 5 areas. Read further to learn more about:

- What to expect;
- The health care team members you will meet; and
- Where you can find more information in this Guide

Questions?

Speak to a member of your health care team

Emergency and Acute Care



I have been taken to the hospital because I have had a stroke.

What will happen?

- I will be cared for by a 'stroke team'. They will assess my medical needs and decide if I will be admitted to the hospital.
- I will be assessed for the type of stroke I had and if a clot-busting drug will help me.
- I will learn about the type of stroke I had, why I had it and what will happen next.

What tests are involved?

These may include: Computed Tomography (CT) scan, Computed Tomography Angiogram (CTA), Magnetic Resonance Imaging (MRI), Magnetic Resonance Angiogram (MRA), Carotid Doppler, Cerebral Angiography, Echocardiogram (Echo), Electrocardiogram (ECG), Holter monitor, blood work, swallowing.

What to expect if I am admitted?

- 24 hour nursing care.
- I may have a restriction or change in foods or liquids I am allowed to have.
- I may get Intravenous (IV) therapy and/or a nasogastric (NG) tube.
- I may be started on new medications to reduce my risk of another stroke.
- I may expect to stay here about 5–7 days but my stay could be shorter or longer depending on my overall care needs.

Who will I see?

- Nurses, doctors, physiotherapist, occupational therapist, speech-language pathologist, registered dietitian, social worker, pharmacist, etc. See section on Health Care Team.

Sections to refer to:

- What Happens With a Stroke
- Managing the Effects of Stroke
- Leaving the Hospital

Inpatient Rehabilitation



Recovery from a stroke begins right away. The goal of inpatient rehabilitation is to help me to regain as much of my independence as possible so I can return to live in the community. I may also learn ways to do things differently than before.

What will happen?

- I will stay in a rehabilitation hospital. As I improve, I may be able to go home on weekends.
- I will receive therapy to help me to regain my ability to move safely inside and outside of my home, take care of myself, communicate my needs and interact with others.
- I will participate in my therapy as much as possible.
- I may spend several hours a day in individual and/or group activities.
- I will spend time learning new skills that will help me to recover and be more independent.
- It is helpful to have a family member or friend (if available) to support me.

Who will I see?

- Nurses, physiatrist, physiotherapist, occupational therapist, speech-language pathologist, registered dietitian, recreation therapist, social worker, pharmacist, etc. See section on Health Care Team.

How long will I stay?

- Soon after I have been admitted, the care team will plan with me how long I will stay.
- I may be here for 1 to 7 weeks. The length of my stay will depend on my rehabilitation needs/goals.

Sections to refer to:

- Leaving the Hospital
- Managing the Effects of Stroke

Stroke Prevention Clinic



It is important to monitor my health and risk factors to prevent another stroke from happening. If the doctors think that I have had a stroke, I may be referred to a Stroke Prevention Clinic.

What will happen?

- Review the type of stroke I had, my test results, risk factors, medications.
- Undergo a neurological exam. Discuss whether more tests are needed.
- Develop a plan for how I can prevent another stroke.
- Discuss the plan to follow up with my family doctor and/or another specialist or health care professionals.

Who will I see

- Neurologist
- Nurse Practitioner or Clinical Nurse Specialist
- Other health care professionals depending on my needs

Sections to refer to:

- What Happens With a Stroke
- Managing the Effects of Stroke
- Good Health

Outpatient Rehabilitation



Recovery from a stroke is ongoing. The goal of outpatient rehabilitation is to help me to be independent and participate in meaningful activities when I am back living in the community.

What will happen?

- I will attend an outpatient program on average 2-3 times per week.
- I will learn how to continue to manage my health and well-being.
- I will learn how to find resources in the community to support my interests.
- I may be assessed for my ability to return to driving or return to work when appropriate.
- It is helpful to have a family member or friend (if available) to support me.

Who will I see?

- Psychiatrist, physiotherapist, occupational therapist, speech-language pathologist, registered dietitian, social worker, etc. See section on Health Care Team.

How long will I stay?

- Soon after I start therapy, the care team will plan with me how long I will attend outpatient rehabilitation.
- The length of time will depend on my rehabilitation needs/goals.

Sections to refer to:

- Managing the Effects of Stroke
- Getting Back Into Life

Life After Stroke



Ongoing recovery is possible. There is life after stroke.

What will happen?

- I will continue to work on my home exercise program and improving my skills to participate in everyday life.
- I will get involved with community programs.
- I will ensure my caregiver (if available) is managing and getting assistance when needed.
- I will continue to make informed lifestyle choices to stay healthy and reduce my risk of another stroke.

Who will I see?

- Community care providers will assess my ability to return to meaningful leisure or social activities, to driving and/or working if appropriate.
- Ongoing visits with my care providers to reduce the risk of another stroke and ensure I am managing my concerns well. See section on Health Care Team.

Sections to refer to:

- Good Health
- Getting Back Into Life
- Managing the Effects of Stroke

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Introduction

People who have had a stroke often call their recovery a journey. Each person's journey is different. As you, your caregiver and your family start your own journey, we hope this Guide will help you along the way.



Guide for Stroke Recovery is for you and your caregivers to use during your recovery after a stroke. You can use it to:

- record information about your health and care
- identify your needs and questions
- set goals to recover, live well, and prevent another stroke
- keep track of your progress
- communicate with your health care team and caregivers
- find resources and support services to meet your needs

Using ***Guide for Stroke Recovery*** will help you gain the knowledge, skills and confidence to take charge of your health. We call this 'self-management'.

Managing your own health and keeping a positive outlook, with help from your health care team and caregivers, is the best way to recover and live well after a stroke.

You can decide what information you wish to share with your health care team. Sharing information keeps your health care providers informed, so they can help you make decisions and get the best possible care. They may add the information you share to your medical record.

You can bring your Guide to your appointments or meetings with your health care team. You may find it helpful to keep a file folder and/or journal to keep track of:

- the names and phone numbers of health care providers working with you
- dates and times of upcoming tests or medical appointments
- therapy and doctors' notes, test results, and other important information.



For further tips and strategies, access this guide online by visiting

www.strokerecovery.guide

Acknowledgements

Guide for Stroke Recovery (previously My Guide for Stroke Recovery) was created by health professionals from the Toronto Stroke Networks, people recovering from stroke and their caregivers. We are grateful to all who generously gave their insights, advice, commitment and contributions. By working together, we hope this guide will support you through each step in your journey.

Disclaimer: This Guide is a place to record information for your personal use. It is not intended to provide medical advice or replace the advice from your health care team. Health care providers may give you information from your medical record to enter on some pages. However, the Guide is not part of the medical record. This Guide is not a complete list of all programs and services available in the Greater Toronto Area. We are not responsible for the accuracy of the information contained within the links provided. Mention of products and services should not be assumed to be endorsement of any kind. Please contact the service providers for details about their products, programs and fees.

A message of Hope

Stroke is a very sudden damage to the brain done in an instant. Not a disease or sickness. It is not progressive. You have been stabilized. Your stroke is a passed life event. A successful recovery is your option. Develop an attitude of unstoppable determination, optimism, self-encouragement, hope, confidence and gratitude.

Emotional and physical recovery must start immediately in your mind. You must develop a positive mindset. Change the thoughts you think and change yourself to get back what has been lost. It is hard work. It can only get better from here but only you can make that happen and you will. Hope transforms pessimism into optimism. Hope is invincible. It is your own choice to make the rest of your life the best of your life. You can either get better or get bitter. The decision does not belong to fate, it belongs to you.

Please give Hope a chance and enjoy this Guide.

Bob, a Peers Fostering Hope volunteer and person recovering from stroke

How to use this Guide

Each section of the Guide has been organized in three parts:



Information to help you know what to expect.

The 'Information' section summarizes the topic in plain language. This can help to answer questions you may have.



Questions to ask yourself and your health care team.

The 'Questions' section helps you confirm what you know, and identify what additional information you may need. It helps you know what questions to ask your health care team. Answering the questions encourages self-reflection and setting goals, which are important steps in self-management.



Where to get more information, help and support.

The 'Help' section lists resources that can give you information, practical help and support. At the back of the Guide, you will find a Directory with contact information, where available. Although we have included many resources, the lists may not be complete. Information and services change, and new resources become available. If you have a resource to recommend, please let us know by emailing us at info@tostroke.com.

What Happens With a Stroke?

You may have a lot of questions after a stroke. You may feel scared or nervous about what is happening with your health. You may wonder what happens next. This is normal.

Learning as much as you can about stroke and recovery will help you:

- Understand what has happened (the stroke and what caused it)
- Know what to expect, including the tests you will need
- Feel confident when talking with your health care team
- Take your medications safely
- Manage changes in your life
- Improve your overall health and recovery
- Reduce your risk of having another stroke

This section covers topics about:

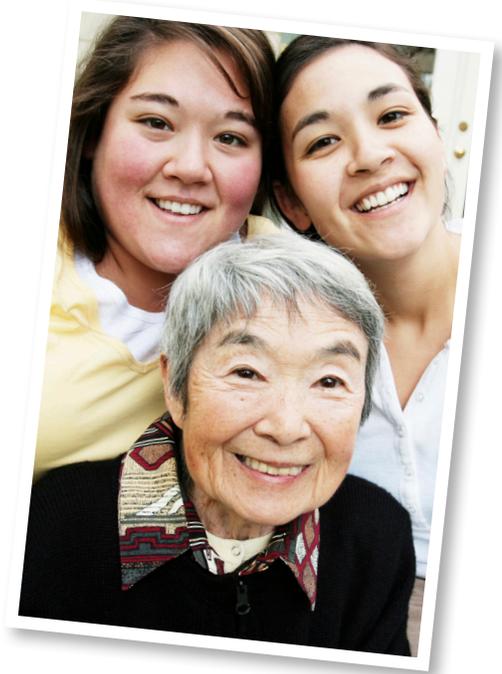
Stroke

Tests

Medications

Health Care Team

Advance Care Planning



For further tips and strategies, access this guide online by visiting

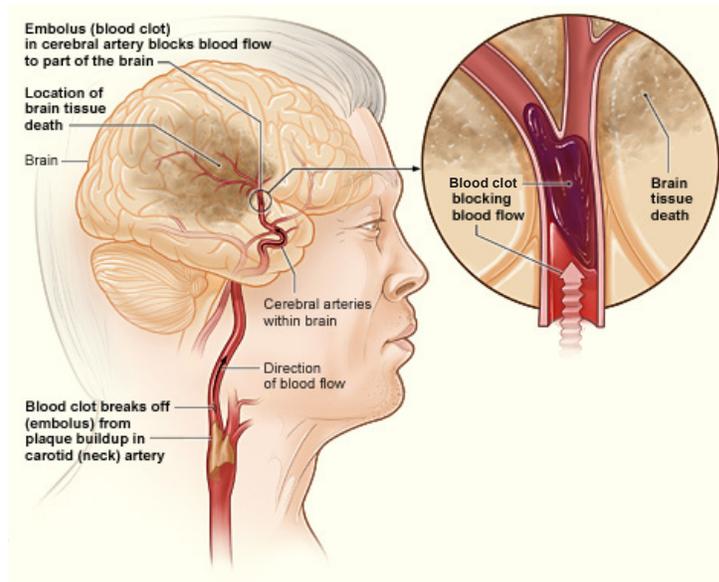
www.strokerecovery.guide

Stroke

A stroke is an injury to a part of the brain. It happens when something goes wrong with the flow of blood to the brain. There are two main types of stroke:

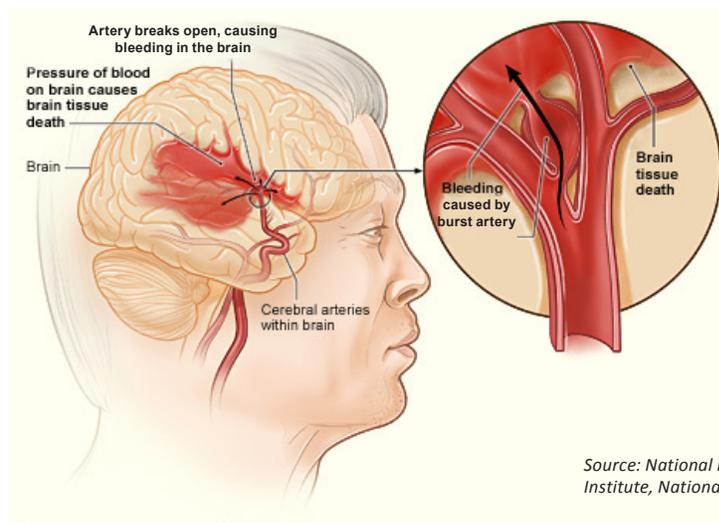
1. Ischemic stroke

When an artery to the brain becomes blocked



2. Hemorrhagic stroke

When an artery to the brain bursts or bleeds



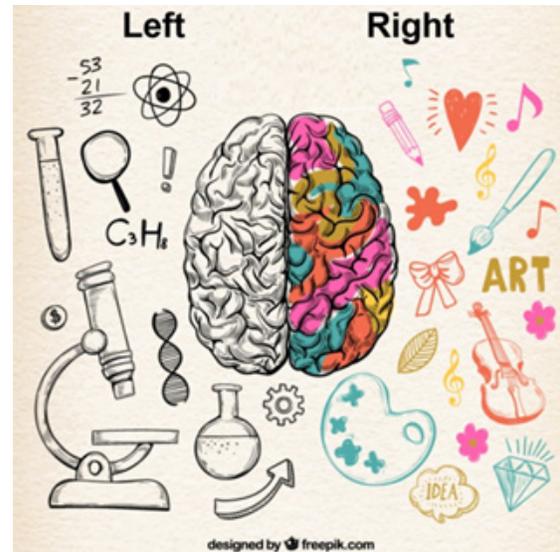
Source: National Heart, Lung, and Blood Institute, National Institutes of Health

In both types, the part of the brain damaged by the stroke can affect how you think, see, move, feel and/or speak.

Functions of the brain

The brain is divided into two large halves called hemispheres.

The right hemisphere controls the left side of your body, and the left hemisphere controls the right side of your body



Left Hemisphere

Analytical - The left side helps us with tasks that have to do with logic such as science and math. For most people (97%) it helps with communication including understanding, speaking and writing.

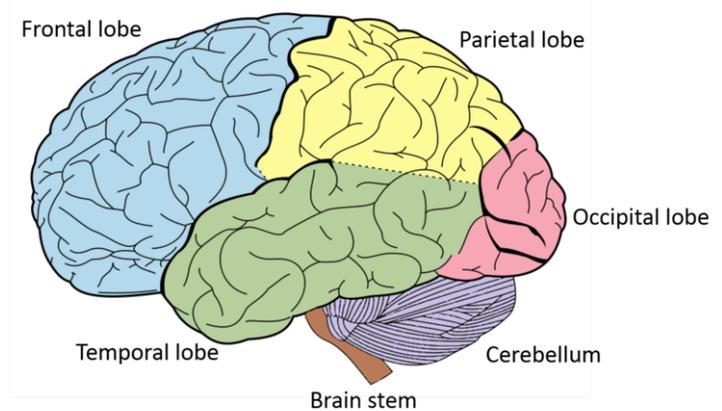
Right Hemisphere

Creative - The right side helps us with tasks that are artistic and creative. It also controls things such as paying attention, memory, insight, problem solving, reasoning, and even understanding a joke.

Areas of the brain

The brain is divided into four big areas called lobes:

- 1) Frontal lobe (blue colored area)
- 2) Parietal lobe (yellow colored area)
- 3) Temporal lobe (green colored area)
- 4) Occipital lobe (pink colored area)



Other parts of the brain include the cerebellum (purple) and the brain stem (brown) which are located at the base of the brain.

A stroke can happen in any part of the brain. The effects of a stroke will depend on where and how much of the brain was damaged. Each area of the brain has a different function.

A stroke in any of these areas may cause problems with some of the functions listed below.

Frontal lobe	Brain stem	Cerebellum	Parietal lobe	Right and Left Temporal lobes
Reasoning	Swallowing	Balance	Intelligence	Speech
Behaviour	Heart beat	Coordination	Reasoning	Behaviour
Memory	Blood pressure	Fine muscle control	Sensation	Hearing
Movement	Breathing		Language	Word recognition
Intelligence			Reading	Emotions
Personality			Knowing right from left	Memory

Questions about stroke

Having read the information in this section, consider the following questions.

- Do I know what kind of stroke I had?
- Do I know what caused my stroke?
- Do I know what the symptoms of a stroke are?
- Will I know what to do if I have symptoms of a stroke?
- Do I have a plan in place if I have an emergency?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.

Resources about stroke

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Aphasia Institute

- Visit www.aphasia.ca/shop and search for the pictographic book 'Stroke and Aphasia'.

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Click on 'Stroke'.
- Your Stroke Journey: A Guide for People Living with Stroke. Click on 'Stroke', then 'Recovery and support'. Find 'Your Stroke Journey' in this section

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources', and 'Understanding my stroke'.

Personal Emergency Response System

MedicAlert

- Visit www.medicalert.ca
- To find other services in your area, visit Toronto Central Healthline at www.torontocentralhealthline.ca. Click on 'Stroke Resources' then 'Safety in the home' and 'Personal Emergency Response Systems'.

Tests

There are many tests that can help your health care team find out what type of stroke you had, and why you had a stroke. Knowing this information allows you to better manage your health and lifestyle, and reduce your risk of having another stroke. Some tests can be done in the hospital or after you are home.

The chart below can help you keep track of your tests. Your doctors may want to see this chart so they will know which tests have been done. If you have questions about test results, what they mean for you, and what needs to happen next, speak with your doctor.

Keep a calendar or journal of important dates, times and location of any tests you may be having

Computerized Tomography scan (CT scan)	A test that uses X-rays to take a series of pictures of the brain or other body organs. It is one of the first tests done for someone suspected of having a stroke. A CT scan can usually identify whether a stroke was due to bleeding (hemorrhagic stroke) or a blockage (ischemic stroke).
Date of test:	How do the results change my care:
Computerized Tomography Angiogram (CTA)	A test that uses X-rays to see blood flow in arteries throughout the body such as the brain, lungs, kidneys, arms and legs.
Date of test:	How do the results change my care:

<p>Magnetic Resonance Imaging (MRI)</p>	<p>A test used to examine the brain and other parts of the body. MRI uses a non-harmful magnetic field and radio waves to make a three-dimensional image of a part of the body such as the brain. These images are more detailed than CT scans. Sometimes called nuclear magnetic resonance or NMR.</p>
<p>Date of test:</p>	<p>How do the results change my care:</p>
<p>Magnetic Resonance Angiogram (MRA)</p>	<p>A newer imaging technique used to detect any blockage or hardening of the arteries in the neck or brain. Similar to MRI, MRA uses a strong magnetic field and radio waves to make an image of the blood vessels.</p>
<p>Date of test:</p>	<p>How do the results change my care:</p>
<p>Angiogram</p>	<p>A test in which dye is injected into blood vessels which are then examined using X-rays. The test gives information about the condition of the blood vessels and detects if there are blood clots.</p>
<p>Date of test:</p>	<p>How do the results change my care:</p>
<p>Carotid ultrasound (Doppler)</p>	<p>A non-invasive test that uses high frequency sound waves to determine the amount of blood flow through the blood vessels in the neck (carotid arteries) or the extent to which the vessels may be narrowed. It is also called a carotid ultrasound.</p>
<p>Date of test:</p>	<p>How do the results change my care:</p>

Transcranial Doppler (TCD)	A test that measures the speed of blood flow through the brain's blood vessels.
Date of test:	How do the results change my care:
HOLTER monitor	A portable device worn around the neck and shoulders that records the electrical activity of the heart. A holter monitor is similar to an electrocardiogram but allows the information to be recorded over longer periods of time (24 to 48 hours) either in hospital or at home.
Date of test:	How do the results change my care:
Electrocardiogram (ECG or EKG)	A test that records the electrical activity of the heart. It is used to find abnormal heart rhythms, which can affect how well blood flows through the body. When blood does not flow well there is a greater risk of developing a blood clot that can lead to a stroke.
Date of test:	How do the results change my care:
Echocardiogram (Echo)	Painless ultrasound waves take a picture of your heart and the circulating blood. The ultrasound probe is placed over your chest.
Date of test:	How do the results change my care:

Trans-Esophageal Echocardiogram (TEE)	Painless ultrasound waves take a picture of your heart and the circulating blood. The ultrasound probe is placed through your mouth and throat.
Date of test:	How do the results change my care:
Trans-Thoracic Echocardiogram (TTE)	Painless ultrasound waves are used to take a picture of your heart and the circulating blood. The ultrasound probe is placed deep in your throat.
Date of test:	How do the results change my care:
Videofluoroscopic Swallow Study (VFSS)	A test done by a speech and language pathologist for a person who has trouble swallowing. An X-ray is taken of the person as they swallow food and drink with different textures. This test helps determine if the person can safely eat and drink.
Date of test:	How do the results change my care:



Questions about tests

Having read the information in this section, consider the following questions.

- Do I know the types of tests that the doctor has ordered?
- Do I understand the results of the tests I have had?
- Do I know what I need to do next and why?

If you still have questions, review the suggested resources and use the ‘Notes’ section at the back of this Guide to write them down. Talk to your health care team and family doctor.

Resources about tests

The following resources may be helpful. To connect directly with an organization, see the ‘Directory’ at the end of the Guide for their contact information.

Aphasia Institute

- Visit www.aphasia.ca/shop and search for the pictographic books ‘Medical tests’ and ‘Transitions’.

Medications

Different medications help to:

- prevent blood clots
- regulate your heart rhythm
- lower your blood pressure
- lower the bad cholesterol levels in your blood
- manage your blood sugar levels



Medications help lower your risk of having another stroke.

Take each medication as directed by the doctor. Even if you feel well, continue to take your medication. Do not stop taking any medications without talking to your doctor first.

It is a good idea to get all your prescriptions filled at the same pharmacy.

My Pharmacy

Name: _____

Address: _____

Phone number: _____

Check with your pharmacist or doctor before taking any new medications, since some medications may affect one another. This includes:

- prescription medications
- over-the-counter medications such as aspirin, laxatives, cough and cold medicines, pain medications, vitamins and herbal remedies

The pharmacist can suggest ways to manage your medications, such as:



Using a pill box (dosette)



Packaging the medication in single doses (blister pack)

Identifying your medications

In order to properly take the medications prescribed by your doctor, here are some tools that can help:

Tool 1: Pill pictures

Tool 2: Medication instructions

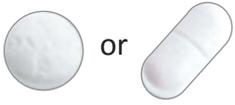
Tool 3: Medication tracker

Tool #1: Pill pictures

The pill pictures found on the following pages are commonly used to prevent a stroke. Please note that this is not a complete list of all medications used for this purpose. Medications are listed with the generic name first, followed by the brand name (in brackets). There may be more than one brand of the same medication so pictures may vary. Use this to remind you what each pill looks like and what it is used for.

Platelet Inhibitors

Stops platelets from sticking together

<p>Acetylsalicylic acid, ASA (Aspirin)</p>  <p>81 mg</p>	<p>Acetylsalicylic acid, ASA (Aspirin)</p>  <p>81 mg chewable</p>	<p>Acetylsalicylic acid, ASA (Aspirin)</p>  <p>325 mg</p>	<p>Acetylsalicylic acid, ASA (Aspirin)</p>  <p>325 mg coated</p>	<p>Clopidogrel (Plavix)</p>  <p>75 mg</p>
<p>Dipyridamole/ASA (Aggrenox)</p>  <p>200 mg/25 mg</p>				

Anticoagulants

Prevents blood clots

<p>Apixaban (Eliquis)</p>  <p>2.5 mg</p>	<p>Apixaban (Eliquis)</p>  <p>5 mg</p>	<p>Dabigatran (Pradaxa)</p>  <p>110 mg</p>	<p>Dabigatran (Pradaxa)</p>  <p>150 mg</p>	<p>Rivaroxaban (Xarelto)</p>  <p>15 mg</p>
<p>Rivaroxaban (Xarelto)</p>  <p>20 mg</p>	<p>Warfarin (Coumadin)</p>  <p>1 mg</p>	<p>Warfarin (Coumadin)</p>  <p>2 mg</p>	<p>Warfarin (Coumadin)</p>  <p>2.5 mg</p>	<p>Warfarin (Coumadin)</p>  <p>3 mg</p>
<p>Warfarin (Coumadin)</p>  <p>4 mg</p>	<p>Warfarin (Coumadin)</p>  <p>5 mg</p>	<p>Warfarin (Coumadin)</p>  <p>6 mg</p>	<p>Warfarin (Coumadin)</p>  <p>10 mg</p>	

Ace Inhibitors

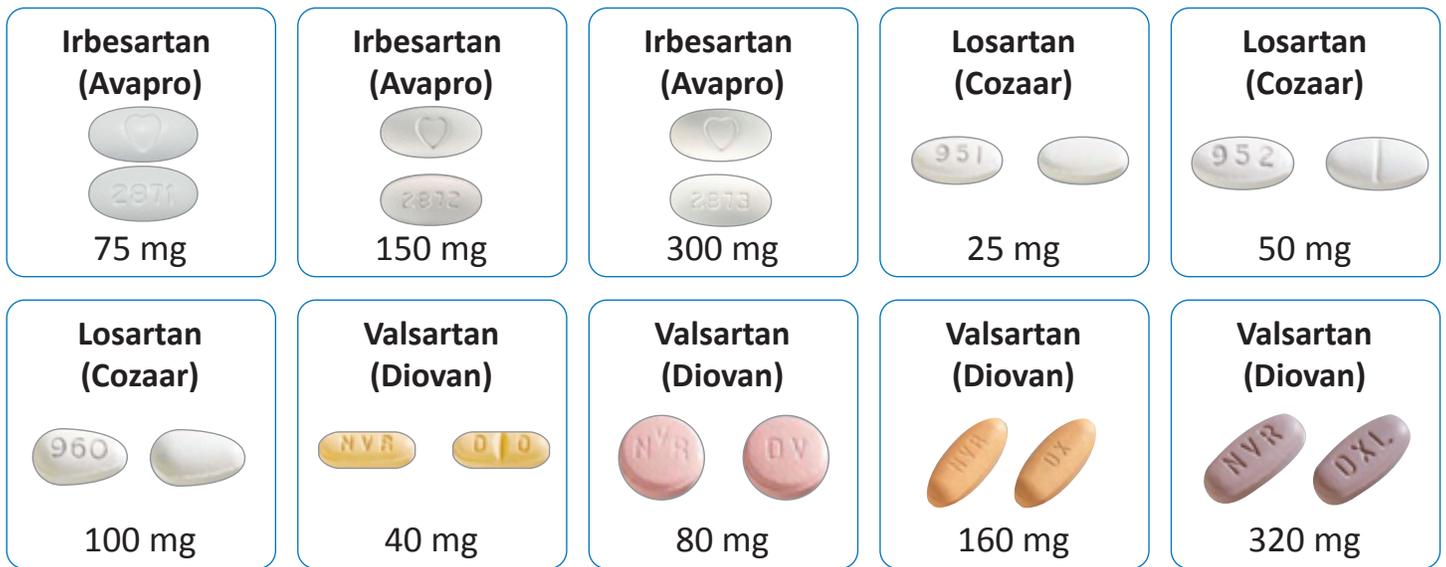
Lowers blood pressure

Enalapril (Vasotec)  2.5 mg	Enalapril (Vasotec)  5 mg	Enalapril (Vasotec)  10 mg	Enalapril (Vasotec)  20 mg	Perindopril (Coversyl)  2 mg
Perindopril (Coversyl)  4 mg	Perindopril (Coversyl)  8 mg	Perindopril- Indapamide (Coversyl Plus)  2 mg/0.625 mg	Perindopril- Indapamide (Coversyl Plus)  4 mg/1.25 mg	Perindopril- Indapamide (Coversyl Plus)  8 mg/2.5 mg
Quinapril (Accupril)  5 mg	Quinapril (Accupril)  10 mg	Quinapril (Accupril)  20 mg	Quinapril (Accupril)  40 mg	Ramipril (Altace)  1.25 mg
Ramipril (Altace)  2.5 mg	Ramipril (Altace)  5 mg	Ramipril (Altace)  10 mg		

Angiotensin II Receptor Blockers

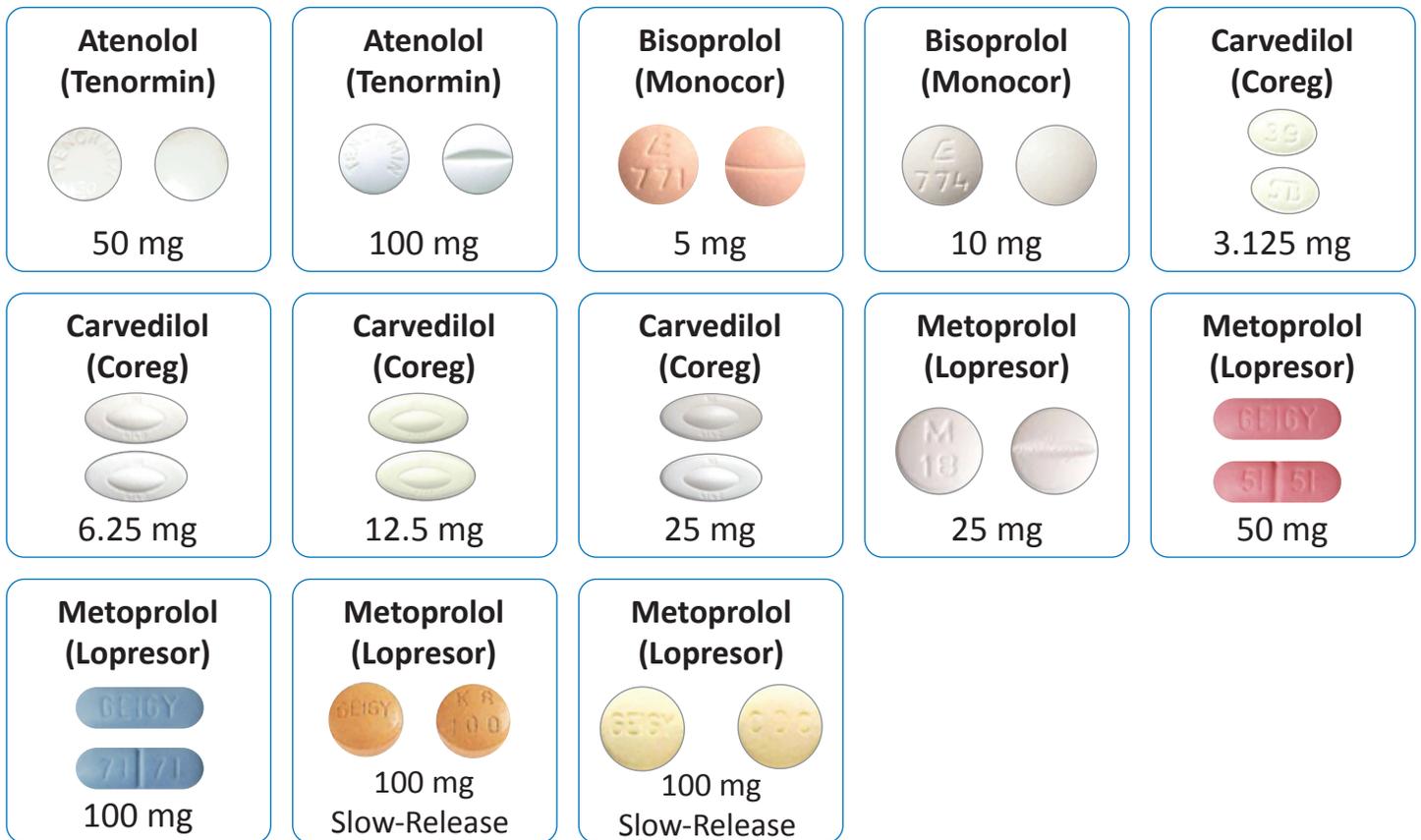
Lowers blood pressure

Candesartan (Atacand)  4 mg	Candesartan (Atacand)  8 mg	Candesartan (Atacand)  16 mg	Candesartan (Atacand)  32 mg
---------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------



Beta Blockers

Lowers blood pressure, lowers heart rate, and treats chest pain



Calcium Channel Blockers

Lowers blood pressure, lowers heart rate, and treats chest pain

Amlodipine (Norvasc)  5 mg	Amlodipine (Norvasc)  10 mg	Nifedipine (Adalat)  20 mg	Nifedipine (Adalat)  30 mg	Nifedipine (Adalat)  60 mg
Diltiazem (Cardizem)  120 mg	Diltiazem (Cardizem)  180 mg	Diltiazem (Cardizem)  240 mg	Diltiazem (Cardizem)  300 mg	Diltiazem (Tiazac)  120 mg
Diltiazem (Tiazac)  180 mg	Diltiazem (Tiazac)  240 mg	Diltiazem (Tiazac)  300 mg	Diltiazem (Tiazac)  360 mg	Verapamil (Isoptin)  80 mg
Verapamil (Isoptin)  120 mg	Verapamil (Isoptin)  180 mg	Verapamil (Isoptin)  240 mg		

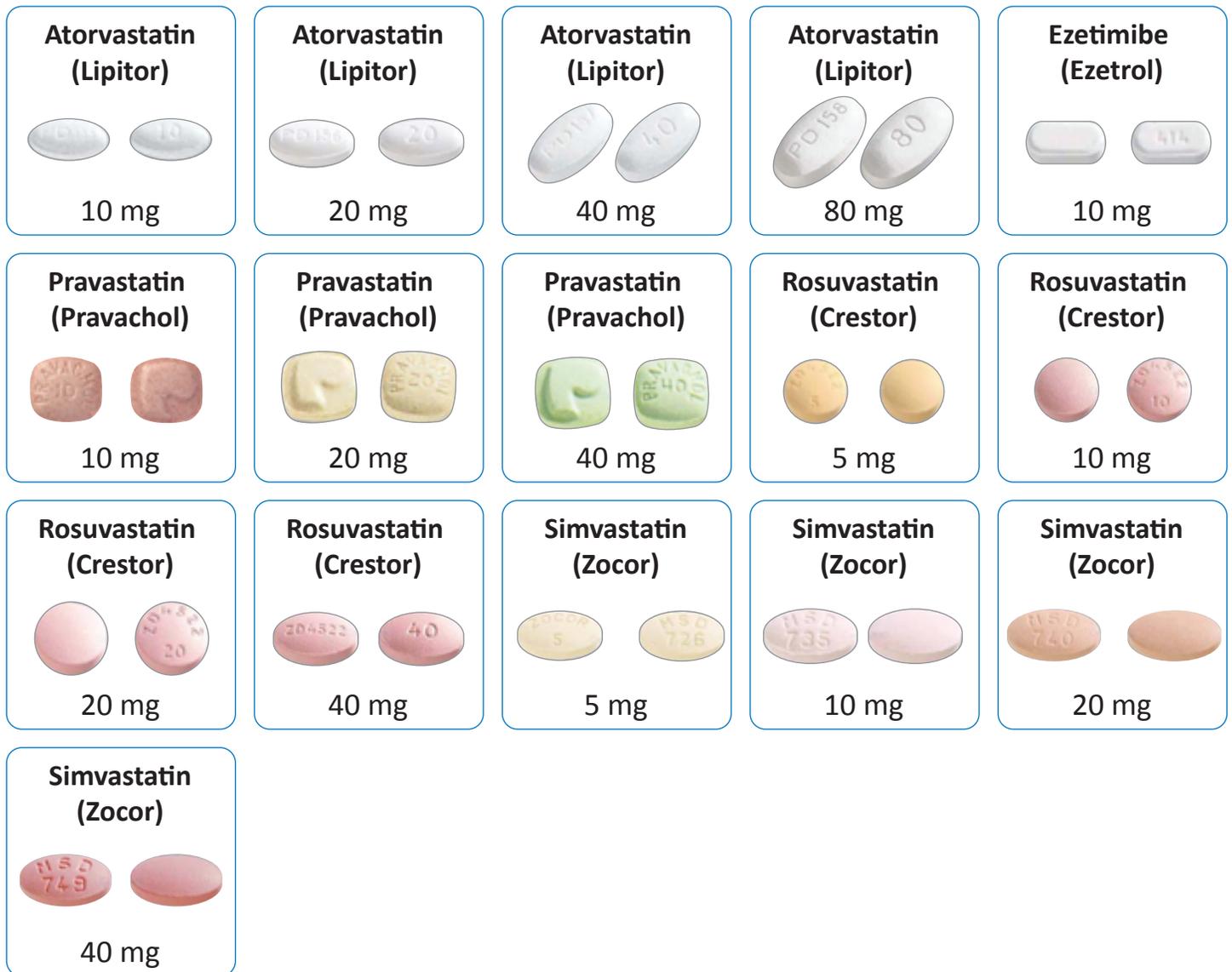
Diuretics

Lowers blood pressure

Chlorthalidone  50 mg	Hydrochlorothiazide  25 mg	Hydrochlorothiazide  50 mg	Indapamide (Lozide)  1.25 mg	Indapamide (Lozide)  2.5 mg
-----------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------

Lipid Lowering Agents

Lowers bad cholesterol and increases good cholesterol



Tool #2: Medication instructions

This chart can help you keep track of what medications have been prescribed to you, what they're used for, how to take them, and when to take them. If you need help filling this form out, talk to your pharmacist or doctor.

Medication	What it is for	How to take it	When to take it			
		Take __ pill(s) __ time(s) a day. Other special instructions.	Morning	Noon	Evening	Bedtime
<i>Example: Aspirin</i>	<i>Reduces clotting of my blood</i>	<i>1 pill (81mg) once a day. Crushed with food.</i>	X			

Tool #3: Medication tracker

This chart can help you make sure that you've taken all of your medications.

Make sure to check off each dose after you've taken it.

- 1) Write in your medications in the "MEDICATION NAME" column
- 2) For each medication, fill in the dose under when you have to take it
- 3) When you've taken the dose, cross out the box
- 4) Repeat for every day of the week

FOR THE WEEK OF:							
DAY	MEDICATION NAME	BREAKFAST	MORNING SNACK	LUNCH	AFTERNOON SNACK	DINNER	BEDTIME
Sample Day	<i>Aspirin</i>	<i>2 pills</i>				<i>2 pills</i>	
	<i>Plavix</i>			<i>1 pill</i>			
	<i>Insulin</i>		<i>1 injection</i>				<i>1 injection</i>
	<i>Gravol</i>			<i>1 pill</i>			
SUNDAY							
MONDAY							
TUESDAY							
WEDNESDAY							
THURSDAY							
FRIDAY							
SATURDAY							



Questions about medications

Having read the information in this section, consider the following questions.

- Do I have a list of medications I need to take?
- Do I know how each medication helps me?
- Do I know how to take each medication (for example: with meals, by mouth, injection, or crushed)?
- Do I know when to take each medication?
- Do I need reminders about when to take each medication?
- Do I know if these medications interact with other medications I take and the food I eat?
- Do I need a way to organize the medications I take (such as a blister pack or pill organizers)?
- Does the pharmacy I use deliver medications to the home?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about medications

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Aphasia Institute

- Visit www.aphasia.ca/shop and search for the pictographic books 'Medication' and 'Daily Living'.

Drug Coverage.ca

- Information about reimbursement for prescription medications through private insurance, provincial or federal drug benefit programs.
- Visit www.drugcoverage.ca

Health Canada - The Drug and Health Product Register

- Search for information on medication use, safety and side effects.
- Visit www.canada.ca and search for 'Drug and Health Products Register'.

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Click on 'Stroke', then 'Treatments'
- Type in the search bar: Your Stroke Journey: A Guide for People Living with Stroke

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources', then 'My health' and 'Taking my medications'.



Stroke Prevention Clinics

Stroke prevention clinics provide early assessment, treatment and education to people who have had a transient ischemic attack (TIA) or stroke, their families and caregivers. The goal is to help you lower your risk of having another stroke. Their team of stroke experts can help you make changes in your lifestyle to reduce the chance of having another stroke. Ask your doctor or nurse in the hospital or Stroke Prevention Clinic to fill out the “Stroke Prevention Progress Report” on the next page. Then, share this information with your family doctor.

Here are clinics in the Toronto area.

Stroke Prevention Clinics	
Humber River Hospital	Professional Medical Building, 2115 Finch Avenue West, Room 103 (Lower Level), Downsview, ON, M3N 2V6 Tel: 416-747-3896
North York General Hospital	4001 Leslie Street, 6th Floor, North Wing, Room 605, Toronto, ON, M2K 1E1 Tel: 416-756-6545
St. Michael’s Hospital	30 Bond Street (Martin Family Centre: B1 Queen Wing, Ground Level, or Shuter Wing, 3rd Floor, Room 3-001), Toronto, ON, M5B 1W8 Tel: 416-864-6060 x3576
Sunnybrook Health Sciences Centre	2075 Bayview Avenue, 4th Floor, A Wing, Room A-442, Toronto, ON, M4N 3M5 Tel: 416-480-4473 or 416-480-4866 Fax: 416-480-5753
Toronto Western Hospital	399 Bathurst Street, 5th Floor, West Wing, Toronto, ON, M5T 2S8 Tel: 416-603-5413
The Scarborough Stroke Clinic	3000 Lawrence Avenue East, Building B, Suite 2202, Scarborough, ON, M1P 2V1 Tel: 416-431-9713, Fax: 416-431-5259

Patient Visit Record

On Target
 Needs Improvement

Visit Dates:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anticoagulating Medications Target: <input checked="" type="checkbox"/> Taking ASA, Aggrenox, or Plavix daily <input checked="" type="checkbox"/> Taking Warfarin or Dabigatran	<input checked="" type="checkbox"/>								
Blood Pressure Target: 130/80 mmHg or less Initial BP: _____	<input checked="" type="checkbox"/>								
ACE Inhibitor or ARB Target: Taking an ACE or ARB at optimal dose	<input checked="" type="checkbox"/>								
Cholesterol Target: LDL < 2.0 mmol/L, TC/HDL – C < 4.0 mmol/L	<input checked="" type="checkbox"/>								
Diabetes Control Target: HbA1c < 7.0 %	<input checked="" type="checkbox"/>								
Smoking Target: Does not smoke	<input checked="" type="checkbox"/>								
Exercise Target: 30 – 60 min moderate exertion 4 – 7 times/week	<input checked="" type="checkbox"/>								
Diet Target: Low in saturated fat and sodium (salt), high in fruits, vegetables & whole grains	<input checked="" type="checkbox"/>								
Alcohol Intake Target: < 14 drinks/week (males) < 9 drinks/week (females)	<input checked="" type="checkbox"/>								
Weight Target: Waist circumference Caucasians: ≤ 94 cm (M), ≤ 80 cm (F) Asians: ≤ 90 cm (M), ≤ 80 cm (F)	<input checked="" type="checkbox"/>								



University Health Network



Toronto Western Hospital

Stroke Prevention

My Progress Report

Place
addressograph
here

Please bring to ALL medical appointments

Stroke Neurologist: _____

Contact Number: _____

Stroke Nurse: _____

Contact Number: _____

My Stroke/TIA Event

Date of Event: _____

Type of Event:

Transient Ischemic Attack (TIA)
 Ischemic Stroke
 Intracerebral Hemorrhage
 Other _____

Cause: _____

My Risk Factors

- Hypertension (high blood pressure)
- Hyperlipidemia (high cholesterol)
- Diabetes
- Atrial fibrillation (irregular heart beat)
- Ischemic heart disease
 - Previous heart attack/ angina
 - Bypass surgery
 - Coronary angioplasty and/or stent
- Valvular heart disease
- Peripheral vascular disease
- Carotid artery disease
 - Right _____%, Left _____% narrowed
- Obesity
- Smoking: _____ pack(s)/day for _____ years
 - Ex-smoker
- Alcohol consumption: _____ drink(s)/day for _____ years

My Stroke Prevention Medications

Medication Name & Dosage	Medication Changes
Anticlotting Medications <input type="checkbox"/> Antiplatelet _____ <input type="checkbox"/> Anticoagulant _____	
Hypertension Medications <input type="checkbox"/> ACE inhibitor _____ <input type="checkbox"/> ARB _____ <input type="checkbox"/> Beta blocker _____ <input type="checkbox"/> CCB _____ <input type="checkbox"/> Diuretic _____ <input type="checkbox"/> Other _____	
Hyperlipidemia Medications (lower cholesterol levels) <input type="checkbox"/> Statin _____ <input type="checkbox"/> Other _____	
Diabetes Medications (maintain blood-sugar levels) <input type="checkbox"/> Oral hypoglycaemic _____ <input type="checkbox"/> Insulin _____ <input type="checkbox"/> Other _____	

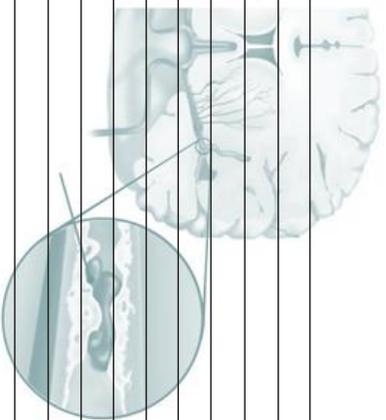
My Rehabilitation Goals

My Personal Goals Following Stroke/TIA

I have been assessed/educated about:

- Carotid endarterectomy or stenting
- Atrial fibrillation
- Need for physical therapy
- Need for occupational therapy
- Need for speech language pathology
- Fitness to drive Non - driver
- Depression
- Need for stress management
- Community service support
- Knowledge about stroke/TIA and stroke prevention

Assessed	Educated	Date	Notes
Y N	Y N	_____	_____
Y N	Y N	_____	_____
Y N	Y N	_____	_____
Y N	Y N	_____	_____
Y N	Y N	_____	_____
Y N	Y N	_____	_____
Y N	Y N	_____	_____
Y N	Y N	_____	_____
Y N	Y N	_____	_____
Y N	Y N	_____	_____





Health Care Team

A team of health professionals caring for you may include:

Doctors

Doctors supervise the overall medical care of people who have had a stroke.

Some types of doctors that may be part of the care team are:

- a family doctor
- a neurologist (doctor who specializes in the nervous system)
- a physiatrist (rehabilitation specialist)
- a cardiologist (doctor who specializes in the heart)
- a neuropsychiatrist (doctor who specializes in depression and anxiety)
- a neuropsychologist (doctor who specializes in mental function such as concentration and problem solving)

Nurses

Nurses work closely with persons with stroke and their caregivers to help manage their health and personal care needs, such as taking medications, bathing, dressing and toileting.

Some types of nurses that may be part of the care team are:

- a registered nurse (RN)
- a registered practical nurse (RPN)
- a nurse practitioner (NP)
- a clinical nurse specialist (CNS)

Occupational Therapists (OT)

Occupational therapists assess, treat, provide education and teach skills that enable safe and independent living in the home and community. They help people resume activities such as work, school, driving and child care.

Personal Care Assistants (PCA)

Personal Care Assistants help persons with stroke to manage their daily personal care such as bathing, dressing and toileting. They may provide care in hospitals or at home. They may also be called Personal Support Workers (PSW).

Pharmacists

Pharmacists prepare and dispense medications. They provide education and counselling about the purpose, side effects, cost, and safety of medications.

Physiotherapists (PT)

Physiotherapists assess mobility and what affects a person's ability to move. They develop a treatment plan to improve strength, balance, coordination and mobility, and help plan for next steps in stroke recovery. The physiotherapist may suggest specific mobility aids to promote safety and independence.

Social Workers (SW)

Social workers help people cope with feelings of anger, sadness, depression, confusion, and anxiety. Social workers offer counselling, assist with planning for the future and coordinating community support services.

Speech-Language Pathologists (SLP)

Speech-language pathologists assess and provide ways to help people who have trouble swallowing. They also assess and treat people who have trouble speaking, understanding, reading and/or writing. They can help by providing activities to improve speech and teach other ways to communicate.

Recreation Therapists

Recreation therapists assess and develop a treatment plan based on a person's leisure interests. They help people learn the skills and resources needed to take part in hobbies and other interests to help achieve independence.

Registered Dietitians (RD)

Registered dietitians assess and develop a nutrition plan. They help people learn how to prepare food for those who have difficulties swallowing. They also help people learn about healthy eating, managing diabetes, cholesterol, blood pressure and weight.

Other Professionals

Other professionals may also be part of the care team:

- An orthotist makes special braces to support weak joints and muscles.
- A urologist helps with bladder problems.
- Vocational counselors help people to go back to work or school.

You, your family and/or caregivers, and community service providers are also important members of this team.

Advance Care Planning

Making your own choices can be important to your sense of identity and well-being. This is true of decisions about your personal care including:

- food
- living arrangements and housing
- clothing
- hygiene
- safety
- health care
- finances

It is important for your family, friends and health care team to know what your wishes are in the event that you can no longer make decisions. This will avoid any confusion later on. This is called an **advance directive**, a legal document that allows you to express decisions about your care and finances ahead of time.

What is Advance Care Planning?

1. Making choices, while you are capable, about how you wish to be cared for in the future if you become incapable of making decisions.
 - The personal care wishes you express while capable are legally binding. This means they will be enforced by law.
2. Giving someone you trust the information and authority to act on those wishes for you. This person is called your **Substitute Decision Maker (SDM)**.
 - To appoint a SDM, you must write their name in a 'Power of Attorney for Personal Care' document.
 - You can appoint a different SDM to manage your finances.
 - Choose someone who you feel would best honour and carry out your wishes. This person does not have to be a family member.

What happens if I do not have a SDM?

**If you do not have a SDM through a Power of Attorney for
Personal Care or Finances**

AND

You are not capable of making your health care and/or financial decisions



The health care team will turn to the following people (in this order) to make these decisions:

1. Your spouse, common-law spouse or partner
2. Your child (over 16) or parent
3. Custodial parent
4. Brother or sister
5. Any other relative by blood, marriage or adoption



Questions about advance care planning

Having read the information in this section, consider the following questions.

- Are my care wishes known by my family/caregiver?
- Do I have my wishes written down?
- Have I legally named someone as my Substitute Decision Maker or Power of Attorney to make decisions for me when I am no longer able?
- Have I made my wishes known to that person?
- Have I written down this information?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about advance care planning

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Government of Ontario: A Guide to Advanced Care Planning

- Visit www.seniors.gov.on.ca and enter 'A Guide to Advanced Care Planning' in the search box (top right corner).

Ministry of the Attorney General

- To download your own Power of Attorney and Living Will documents visit www.attorneygeneral.jus.gov.on.ca and click on 'Wills & Estates' on the left side of the page.

Speak Up

- Information about advance care planning
- Visit www.advancecareplanning.ca

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources', then 'Managing my money' and 'Knowing my rights'.

Your local Public and Guardian Trustee office

- Call toll free 1-800-366-0335 or 416-314-2800 (Toronto).

Leaving the Hospital

Getting ready to leave the hospital can be an exciting time, but it can also be stressful. It is important to feel prepared when you leave the hospital to go home.

This section covers topics about:

- Questions to ask your health care team. Knowing the answers will help you feel ready to go home.
- Common assistive devices. Talk with your health care team to find out which devices would best meet your needs at home.
- Self-reflection and setting goals.



For further tips and strategies, access this guide online by visiting

www.strokerecovery.guide



Things to consider

Tests

- What tests do I need to have done?
- When do I need to have them done?
- Where am I having these tests done?
- Have I asked for my discharge summary and list of tests (and results) that were done in hospital?

Refer to the section on **Tests** for useful tips.

Medications

- What medications do I need to take and why?
- Do I know how to take them?
- Do I need a way to organize my medications so I remember to take them (for example, a dosette or blister pack)?
- Who do I ask if I run out of the medications that were prescribed while I was in the hospital?
- Do I know which pharmacy to go to for prescription refills? Who will pick up my medications and when?

Refer to the section on **Medications** for useful tips.

Good Health

- Do I know what I need to do to help prevent another stroke?
- Do I know the signs of stroke and the action I should take?
- Have I been referred to a Stroke Prevention Program or Clinic?
- Do I know when I should follow up with my family doctor?

Refer to the section on **Good Health** for useful tips.

Swallowing Difficulties

- Do I know what textures of food or drink are safe for me?
- Do I know how to prepare these (for example, pureed foods or thickened drinks)?

Refer to the section on **Swallowing Difficulties** for useful tips.

Self-Care

- Do I know how to arrange for help to look after myself if I need it (for example: help with bathing, dressing, meal preparation or grocery shopping)?
- If I need help at home (for example, from Home and Community Care) when can I expect them to come to my home?

Refer to the section on **Self-Care** for useful tips.

Communication

- If my ability to communicate has changed, do I know how to express my needs so I will be understood?

Refer to the section on **Communication** for useful tips.

Ability To Think and Understand What I See

- If my thinking and/or vision have changed, do I know how to keep myself safe?

Refer to the section on **Ability To Think and Understand What I See** for useful tips.

Where I Live

- What equipment or assistive devices do I need at home to be independent and safe?
- Do I need someone to come to my home to do a home safety assessment?

Refer to the section on ***Where I Live*** for useful tips.

Getting Around

- Has my health care team recommended that I use a mobility aid to help me get around?
- If I need a mobility aid such as a walker or cane, have I made arrangements to get one?
- Do I need help with transportation to attend appointments or run errands?
- Have I been assessed for accessible transit (for example, Wheel-Trans)?
- Do I know how to book a ride?

Refer to the section on ***Getting Around*** for useful tips.

Social Support

- What arrangements have been made for more therapy if I need it?
- If I am referred to an outpatient therapy program, do I know where I am going? Do I have contact information?
- What kinds of activities can I do to help with my recovery after stroke?

Refer to the section on ***Social Support*** for useful tips.

Caregiver Support

- Can my caregiver safely manage my care?
- Has my caregiver been linked with a support group if needed?

Refer to the section on **Caregiver Support** for useful tips.

Work or School

- Am I able to return to work or school at this time?
- If not, do I know how to get back to work or school if I can?

Refer to section on **Work and School** for useful tips.

Return to Driving

- Has my stroke been reported to the Ministry of Transportation and my driver's license suspended?
- If I am not currently safe to drive, do I know the process to be approved for driving again?

Refer to the section on **Return to Driving** for useful tips.

Finances and Money

- Can I manage my bills (for example: paying rent or utility bills, buying medications or equipment)?
- Do I need to apply for employment insurance, short term disability or other financial assistance programs? Do I know how to apply?

Refer to section on **Finances and Money** for useful tips.

Upcoming Appointments

This chart can help you keep track of your appointments. You can also use a journal to track this information.

Appointment with whom	When	Where	Contact information

Assistive Devices

Assistive devices are pieces of equipment that make it easier and safer for you to manage your daily activities. In this section we list the most commonly used assistive devices. Other assistive devices are available to help with eating, dressing, grooming, kitchen work and household chores. One handed devices are also available. **Your health care provider can advise you on what assistive devices may be helpful for you.**

You can buy or rent assistive devices at your local health care or medical supply store. As prices will change, please ask your local store for their current cost.

Bath seat with back rest

Purchase: \$60+

Rent: \$15-\$28 per month



Transfer bench with back rest

Purchase: \$120+

Rent: \$20-\$32 per month



Non-slip bath mat

Purchase: \$20+



Commode chair

Purchase: \$200+



Raised toilet seat with arm rests

Purchase: \$70+

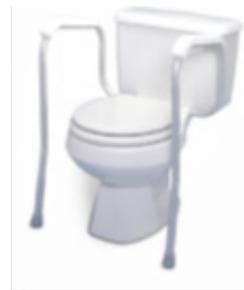
Rent: \$15-\$28 per month



Versa Frame

Purchase: \$60+

Rent: \$12-\$22 per month



Rollator walker

Purchase: \$250-\$550

Rent: \$70 per month



Two-wheeled walker

Purchase: \$100+

Rent: \$20-\$40 per month



Single point cane

Purchase: \$20+



Quad cane

Purchase: \$35+



Wheelchair

Purchase: \$400+

Rent: \$100 per month



Transport chair

Purchase: \$200+

Rent: \$90 per month



Long handled shoe horn

Purchase: \$7



Long handled reacher

Purchase: \$15+



Male urinal

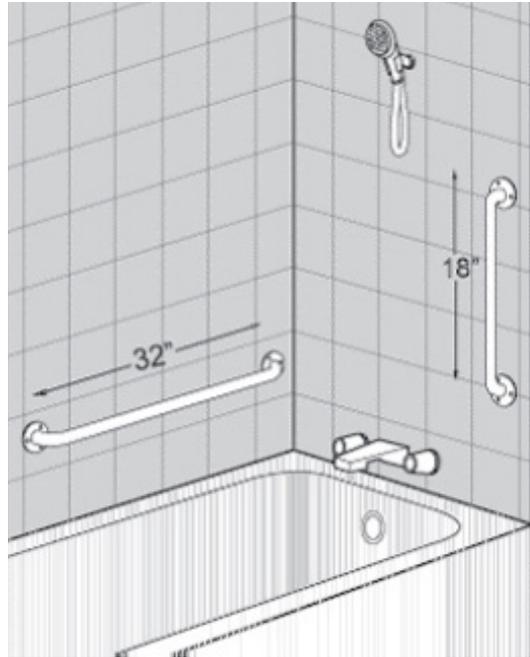
Purchase: \$10+



Grab bars

Purchase: \$25+

Rent: \$10 per month



Bedpan

Purchase: \$20+



Hospital bed

Purchase: \$1500-\$5200

Rent: \$180-\$360 per month



Bed wedge

Purchase: \$55+





Resources about assistive devices

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Aphasia Institute

- Visit www.aphasia.ca/shop and search for the pictographic book 'Transitions'.

Canadian Red Cross – Health Equipment Loan Program (HELP)

- Short-term loans of health equipment
- Visit www.redcross.ca, search term 'Health Equipment Loan Program'

Health care or medical equipment and supply stores

- Check your phone book or www.Canada411.ca for listings or search the Toronto Central Healthline at www.torontocentralhealthline.ca. Click on 'Stroke Resources', then 'Where I live' and 'Assistive Devices and adaptive equipment.'

Financial help for assistive devices

Ministry of Health and Long Term Care - Assistive Devices Program (ADP)

- Provides funds to people with physical disabilities so they can buy medical equipment.
- Visit www.health.gov.on.ca and search for 'Assistive Devices Program'.

Ministry of Children, Community and Social Services – Ontario Disability Support Program (ODSP)

- Provides long-term financial help to people who cannot work for medical reasons or because of disability.
- Visit www.mcscs.gov.on.ca and search for 'ODSP'.

Self-Reflection

After a stroke, it is helpful to spend time thinking about what is most important to you, and how to reduce the chances of having another stroke.



This section of your Guide and the ‘Self-Reflection Worksheet’ can help you:

- Consider your risk factors. These are the things that put you at risk of another stroke.
- Learn what lifestyle changes could benefit your health and help to prevent another stroke.
- Decide what changes you wish to focus on.

When you feel ready for making some changes, don't take on too many at once. Trying to make 1 or 2 small improvements at a time will be easier to manage and will more likely lead to success.

Your health care providers will continue to work with you on your risk factors and your outlook about making changes for better health. You may want to share your worksheet with them. They can help you get support for the areas where you feel most motivated for change.

When speaking with your health care team, share any concerns you have about the changes you wish to make. They can help you find ways to make simple changes that can be easy to adopt. Over time you will see the progress you are making.

Self-Reflection Worksheet

Risk Factor	Room to improve	Motivation	Confidence
<i>Example: Blood Pressure</i>	9	10	4
Alcohol			
Atrial Fibrillation			
Being Smoke-Free			
Blood Pressure			
Cholesterol			
Diabetes			
Healthy Weight			
Nutrition			
Physical Activity			
Sleep Apnea			

Use this self-reflection to help set goals.



Setting Goals



Setting goals is an important part of your recovery after stroke. This can help you to regain control over your health and well-being.

How to set goals:

1. Pick a goal that is important for you, so that you want to reach it.
2. Think of each step needed to reach the goal.
3. Decide when you will achieve the goal.
4. Write this down!
5. Review your progress often and adjust your goal if you need to.

Your goals will change over time. As you get better, you can adjust goals and set new ones.

You can use the goal worksheets at the end of this section.

If you need more, you can print some from this website www.tostroke.com/for-the-public/community-resources.

You are more likely to be successful if you aim for something important to you and plan for how to achieve your goal.

Here is an example of a goal:

Goal
I will walk my grandchildren to school on their first day of class on September 4th
How will I reach this goal?
<ol style="list-style-type: none">1. I will do my home exercises 3 times a week.2. I will walk for 5 minutes around the block, 3 times a week.3. Each week I will increase my walking time until I can walk for 30 minutes without stopping.4. I will walk to the school and back (30 minutes) with my husband 2 times a week.5. In the last 2 weeks before school starts I will walk there by myself.6. I will make arrangements with my daughter to take my grandchildren to school on their first day.

Goal Worksheet

Goal
How will I reach this goal?

Goal

How will I reach this goal?

Goal

How will I reach this goal?

Good Health

Once you have had a stroke, your chance of having another one is greater.

The good news is there are many things you can do to prevent another stroke.

This section helps you:

- learn how you can lower your risk of stroke
- think about ways you can be healthier

This section covers topics about:

Alcohol

Diabetes

Atrial Fibrillation

Healthy Weight

Being Smoke-Free

Nutrition

Blood Pressure

Physical Activity

Cholesterol

Sleep Apnea

It is important that your family doctor be involved in your care. A family doctor checks your health as you recover. If you don't have a family doctor, there are resources in the 'Help' section to help you find a doctor who is accepting new patients.



For further tips and strategies, access this guide online by visiting

www.strokerecovery.guide



Resources for good health

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Aphasia Institute

- Visit www.aphasia.ca/shop and search for the pictographic book 'Your Life: Looking Back, Moving Forward'.

Community Health Centres (CHCs)

- CHCs provide primary health care. You may be able to get health services at some CHCs even if you do not have a Health Card (OHIP).
- To find CHCs in central Toronto visit www.torontocentralhealthline.ca/listServices.aspx?id=10652
- To find CHCs in Ontario, visit www.health.gov.on.ca/en/common/system/services/chc/locations.aspx

Family Health Teams

- These teams of health care providers work together to provide primary health care.
- To find Family Health Teams in Ontario, visit www.health.gov.on.ca/en/pro/programs/fht/fht_progress.aspx

I Am Sick

- Visit www.iamsick.ca for healthcare, when and where you need it
- Visit www.cpsso.on.ca/public-register/all-doctors-search to find local family doctors and specialists.

Ontario Healthcare Connect

- Refers those who don't have a physician to a family health care provider who may be accepting new patients
- Visit www.ontario.ca/healthcareconnect

Alcohol

Drinking alcohol may increase your blood pressure and triglycerides. If you drink alcohol often you can gain weight. These factors may increase your risk of stroke.

Avoiding alcohol is recommended if you:

- are on medications
- have liver disease
- have atrial fibrillation
- have high triglycerides

If you drink alcohol, talk with your health care provider to find out if it is safe for you.

This chart shows the recommended guidelines for drinking alcohol:

	Maximum standard drinks a day	Maximum standard drinks a week
Men	0 to 3 drinks	0 to 15 drinks
Women	0 to 2 drinks	0 to 10 drinks

Sources: Heart and Stroke and Centre for Addiction and Mental Health

One standard drink is equal to:



One bottle (12 oz or 341 ml) of 5% beer



One glass (5 oz or 142 ml) of 12% wine



One shot (1½ oz or 43 ml) of 40% spirits

Drinking alcohol may be harmful to your health.

- Keep track of how many drinks you have on an average day and an average week. This can help you stay within the recommended limits.
- If you decide to limit alcohol, set a goal and make a plan.
- If you feel unable to limit your drinking, speak with your health care provider for support.



Questions about alcohol

Having read the information in this section, consider the following questions.

- Do I know how much alcohol is in one standard drink?
- Do I know how alcohol can affect my health?
- Is it safe to drink alcohol if I am taking medication?
- Do I have too many alcoholic drinks in a day or week?
- Do I need help in managing how much alcohol I drink?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about alcohol

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Alcoholics Anonymous Meetings

- Help for people with drinking problems.
- Visit www.aa.org and enter Toronto to find local offices and A.A. groups.

Canadian Centre on Substance Use and Addiction

- Learn the guidelines for safer drinking.
- Visit www.ccsa.ca

Center for Addiction and Mental Health

- Learn about alcohol, its effects, and treatment for alcohol dependence.
- Visit www.camh.ca. Click on 'Health Information', then 'Mental Health and Addiction Information A-Z', and select 'Alcohol'.

Drinks Diary

- Use the 'Drinks diary' for a week to see how much alcohol you drink.
- Visit www.nhs.uk/Livewell/alcohol/Documents/drink_diary.pdf

Hypertension Canada

- Visit www.hypertension.ca. Click on 'Public', then 'What can I do?' and 'Limit alcohol consumption'.

Toronto Central Healthline

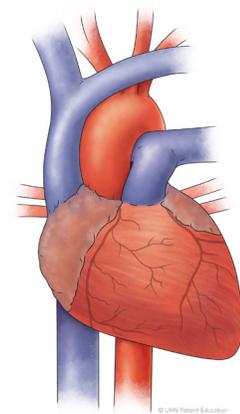
- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources', then 'My health', 'Preventing another stroke' and 'Alcohol and drug' or 'Check your drinking'.

Stroke Association

- Read the fact sheet 'Alcohol and Stroke' to learn how alcohol can increase your risk of stroke and why you should think about cutting down.
- Visit www.stroke.org.uk/resources/alcohol-and-stroke-0

Atrial Fibrillation

Having a regular heartbeat helps to pump the right amount of blood to the rest of the body. Atrial fibrillation is an irregular heartbeat. During atrial fibrillation, the heartbeats are uneven or too fast and cause poor blood flow to the body. Blood can get stuck in the heart, where blood clots can form. These clots can then get pumped to the body, and possibly to the brain which can result in a stroke.



Symptoms of atrial fibrillation

People with atrial fibrillation may feel fine and not know they have it.

Others may feel the following symptoms:

- irregular and fast heartbeat
- heart palpitations or a rapid thumping in their chest
- chest discomfort, chest pain or pressure
- shortness of breath, particularly with exertion or anxiety

- fatigue
- dizziness, sweating or nausea
- light-headedness or fainting

An electrocardiogram is a simple test to find out if you have atrial fibrillation.
See your family doctor if you think you may need one.

What can cause atrial fibrillation?

The cause of atrial fibrillation is not always known. It is often related to the heart, other health problems, or lifestyle. Here are some conditions that may lead to atrial fibrillation:

- high blood pressure (the most common cause)
- abnormal structure of the heart
- infection or inflammation of the heart (myocarditis or pericarditis)
- diseases that damage the valves of the heart
- congenital heart disease
- overactive thyroid (hyperthyroidism)
- a blood clot in the lung (pulmonary embolism)
- excessive use of alcohol
- smoking

What can you do?

It is important to speak to your doctor to help you decide on the best treatment for you. Your treatment will be based on:

- your age
- your needs
- your medical history
- how much the symptoms are interfering with your quality of life

Some people will take blood thinners like a daily Aspirin® or an anticoagulant to prevent clots from forming and travelling to the brain.

Visit your doctor regularly to have your atrial fibrillation monitored.

It is a good idea to make healthy lifestyle choices. Any lifestyle changes that lower blood pressure can also reduce your chance of developing atrial fibrillation or help you to control it.

Review the sections on **Nutrition** to learn about:

- eating foods lower in saturated and trans fats
- eating more vegetables, fruit, fibre and lean protein

Other helpful sections include:

- **Healthy Weight**
- **Physical Activity**
- **Being Smoke-Free**
- **Alcohol**



Questions about atrial fibrillation

Having read the information in this section, consider the following questions.

- Do I have any symptoms of atrial fibrillation?
- Do I need to be tested for atrial fibrillation?
- Do I know what my medications are to manage my atrial fibrillation?
- Do I know how exercise affects my atrial fibrillation?
- Do I know how I can continue to lower my blood pressure?
- Do I know how to eat healthy to control my blood pressure?

If you still have questions, review the suggested resources and use the ‘Notes’ section at the back of this Guide to write them down. Talk to your health care team and family doctor.

Resources about atrial fibrillation

The following resources may be helpful. To connect directly with an organization, see the ‘Directory’ at the end of the Guide for their contact information.

Heart and Stroke Foundation

- Visit www.heartandstroke.ca/heart/conditions/arrhythmia

Being Smoke-Free

Being smoke-free decreases your risk of stroke. If you smoke, talk with your health care team about how to quit.

Smoking:

- increases your risk for developing blood clots and causing damage to your blood vessels
- increases your risk of heart disease, chronic lung disease and cancer
- is the most preventable cause of disease and death in Canada

Tips to Quit Smoking

- List your reasons for quitting.
- Set a 'quit date' and mark it on your calendar.
- Tell your family and friends about your plan to quit. Ask for their help and support.
- Ask your doctor about counselling, nicotine replacement and medications that can help you quit.
- If you slip up, don't give up. Keep trying until you can quit for good.

Being smoke-free will benefit your health and the health of everyone around you.



Use a chart like the one found here to keep track of your smoking.

Quit Date is: _____

Date DD/MM/YY	Number of cigarettes per day	Am I on target? ✓ ✗



Questions about being smoke-free

Having read the information in this section, consider the following questions.

- Do I know why smoking increases my risk of stroke?
- Am I ready to quit smoking?
- Do I know where to find help to stop smoking?
- Do I know where to find support to continue to be smoke-free?

If you still have questions, review the suggested resources and use the ‘Notes’ section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about being smoke-free

The following resources may be helpful. To connect directly with an organization, see the ‘Directory’ at the end of the Guide for their contact information.

Canadian Cancer Society - Smokers’ Helpline

- Provides a free online quit program, self-help workbooks, and professional help by phone or text, to help you quit successfully.
- Call 1-877-513-5333 or visit www.smokershelpline.ca

Centre for Addictions and Mental Health – Nicotine Dependence Clinic

- Assessment, treatment and support for people who want to quit or reduce their tobacco use.
- Visit www.camh.ca. Search ‘Nicotine Dependence Clinic’

Health Canada – Quit4Life

- Order the Quit4Life handbook to learn why you smoke and how to quit.
- Visit www.quit4life.com

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Click on ‘Stroke’, then ‘Risk and prevention’.

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on ‘Stroke Resources’, then ‘My health’, ‘Preventing another stroke’ and ‘Smoking’.

Blood Pressure

Blood pressure is the force of blood pushing against the walls of an artery.

High blood pressure is the number one risk factor for stroke. You may not feel differently if your blood pressure is high so it is important to check it often.

Having your blood pressure checked at each visit with your doctor or health care provider will help you manage your blood pressure.

When your blood pressure is checked, two measurements are taken:

- **Systolic pressure** is the pressure in the blood vessels as the blood is pumped from the heart.
- **Diastolic pressure** is the pressure in the blood vessels when the heart is at rest between beats.



An example:

120 Systolic is the top number

80 Diastolic is the bottom number

The good news is that blood pressure can be controlled.

Your health care provider will help you find ways to improve your blood pressure and keep it within the numbers that are right for you.

Some of the steps are:

- eating healthy
- being active
- managing your weight
- taking medications as prescribed

For more information about these steps, refer to these sections:

- ***Nutrition***
- ***Healthy Weight***
- ***Physical Activity***
- ***Being Smoke-Free***
- ***Alcohol***
- ***Medications***

Take your blood pressure when you are sitting down and relaxed.

- Choose a blood pressure monitor from those recommended at <http://hypertension.ca/en/devices-endorsed-by-hypertension-canada>

Keep track of your blood pressure.

- Use a chart to record your blood pressure, see your progress, and manage your blood pressure. You can print more charts from this website www.tostroke.com/for-the-public/community-resources.

Sample chart to keep track of your blood pressure.

Your Blood Pressure is: _____				
Blood Pressure Chart				
Date DD/MM/YY	Time AM/PM	Blood pressure Systolic/Diastolic	Am I on target? ✓ ✗	
			Systolic	Diastolic

Use the goal worksheet on page 51 and write down what you need to work on. This will help you to keep your blood pressure in the target area that is right for you.



Questions about blood pressure

Having read the information in this section, consider the following questions.

- Do I know what my target blood pressure should be?
- Do I know how often my blood pressure should be checked?
- Should I use blood pressure machines at pharmacies?
- Do I know what I can do to control high blood pressure?
- Do I know how exercise affects my blood pressure?
- Do I know what foods will affect my blood pressure?
- Do I know what my daily sodium (salt) limit should be?
- Do I know if I should be on blood pressure medication?

If you still have questions, review the suggested resources and use the ‘Notes’ section at the back of this Guide to write them down. Talk to your health care team and family doctor.

Resources for managing blood pressure

The following resources may be helpful. To connect directly with an organization, see the ‘Directory’ at the end of the Guide for their contact information.

Bridgepoint Active Healthcare – Mindfulness Based Stress Reduction Program

- A 9-week program that helps you learn to calm your mind and body, which helps you cope with illness, pain and stress. There is a fee and a doctor referral is required.
- Visit www.bridgepointhealth.ca and search for ‘Mindfulness Based Stress Reduction Program’.

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Click on ‘Stroke’, then ‘Risk and Prevention’

Hypertension Canada

- Visit www.hypertension.ca. Select the ‘Public’ tab and click on ‘What do I need to know’ and ‘What can I do’.

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on ‘Stroke Resources’, then ‘My health’ and ‘Preventing another stroke’.

Cholesterol

Cholesterol refers to fats in the blood. There are three main types of fats:

- Low-density lipoprotein (LDL) which we call ‘bad cholesterol’
- High-density lipoprotein (HDL) which we call ‘good cholesterol’
- Triglycerides

Bad cholesterol (LDL) causes plaque to build up on the walls of your arteries. This narrows your arteries, making it hard for blood to flow through them.

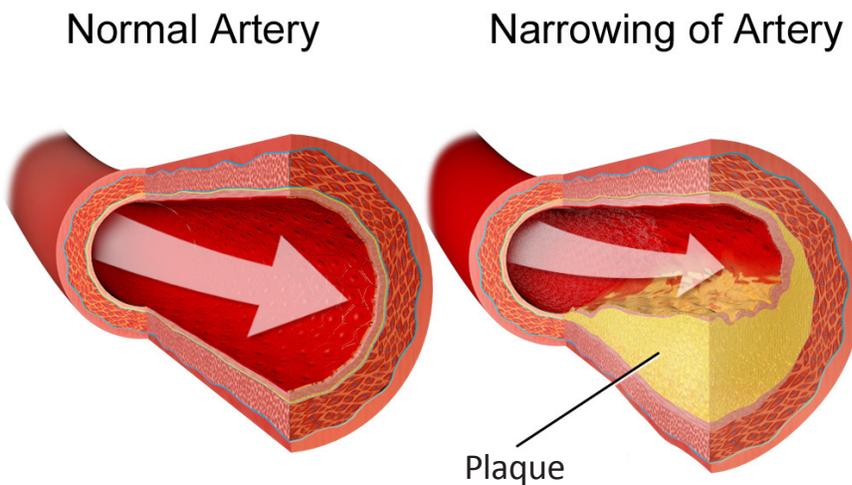


Image by Blausen Medical Communications, Inc. / CC BY 3.0

Good cholesterol (HDL) helps carry the bad cholesterol away from artery walls.

Having too much ‘bad cholesterol’ and not enough ‘good cholesterol’ increases your risk of heart disease and stroke.

Triglycerides are used for energy. You need some triglycerides for good health. But high triglycerides can increase your risk of heart disease. High triglycerides can be caused by being overweight, drinking too much alcohol and poorly controlled diabetes. Your triglyceride level is usually measured at the same time as your blood cholesterol.

Have your blood fats checked every 3 to 6 months by your family doctor to help you manage your cholesterol.

Here is an easy way to help you understand your results:

“LDL” is the amount of “bad cholesterol” (think L for lousy).



“HDL” is the amount of “good cholesterol” (think H for healthy).



Recommended Targets for Cholesterol Levels

LDL cholesterol (bad)	Less than 2.0 mmol/L
HDL cholesterol (good)	Women: Greater than 1.3 mmol/L Men: Greater than 1.0 mmol/L
Triglycerides	Less than 2.0 mmol/L

Sample chart to keep track of your cholesterol levels.

Date DD/MM/YY	LDL mmol/L	HDL mmol/L	Triglycerides mmol/L	Total Cholesterol mmol/L
	My target is _____	My target is _____	My target is _____	My target is _____

Working with your health care team will help you develop the best plan to get to or stay in the target range.

Taking these steps will help you manage your cholesterol and triglycerides:

- eating healthy
- being active
- managing your weight
- taking medications as prescribed

For more information refer to these sections:

- ***Nutrition***
- ***Physical Activity***
- ***Healthy Weight***
- ***Medications***

If your results are not within the target, set a goal and work with your health care team to improve your cholesterol levels.



Questions about cholesterol

Having read the information in this section, consider the following questions.

- Do I know who I should speak with about my cholesterol levels?
- Do I know what my cholesterol levels should be?
- Do I know what makes my cholesterol levels go up?
- Do I know what I can do to lower my cholesterol levels?
- Should I be taking medication to lower my cholesterol?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about cholesterol

The following resource may be helpful. To connect directly with an organization, see the ‘Directory’ at the end of the Guide for their contact information.

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Click on ‘Stroke’, then ‘Risk and prevention’.



Diabetes

People with diabetes have a greater risk of having a stroke or heart attack. When diabetes is treated and well-managed, those risks decrease.

It is important to manage your diabetes with the support of your diabetes team. This includes your family doctor, diabetes nurse educator and Registered Dietitian. Some people may also see other health care providers such as a diabetes specialist called an Endocrinologist.

Types of Diabetes	Description
Type 1	<ul style="list-style-type: none"> • 10% of people with diabetes • The pancreas does not make insulin • Insulin injections are required
Type 2	<ul style="list-style-type: none"> • 90% of people with diabetes • The pancreas cannot make enough insulin or the body does not properly use the insulin it makes, or both • Managed with diet alone or diabetes medications (pills, insulin or both)
Gestational	<ul style="list-style-type: none"> • Can occur during pregnancy • Can increase risk of developing Type 2 diabetes

Blood Sugars:

- People with diabetes may have blood sugars that go too low or too high. This can cause serious health problems. Checking your blood sugar levels regularly can help.
- A member of your diabetes team will help you learn the best times to test your levels. Some people need to check often and others less often or not at all.
- Keeping track of your blood sugar levels, on your glucose meter (glucometer) or recording them in a log book, can help you and your health care team manage your blood sugars.

Here are general blood sugar targets:

Times to check	Targets (mmol/L)
Fasting blood sugar (when you wake up, before any food or drink)	4 to 7
2 hours after a meal	5 to 10

Hemoglobin A1C:

- A blood test called hemoglobin A1C (A1C for short) helps you and your health care team know how your blood sugars have been over the past 3 months.

Most people with diabetes should aim for an A1C of 7.0% or below.

Have your A1C tested every 3 months and see your diabetes team regularly.

Tips for Managing Your Diabetes

What you can do to help manage your diabetes	
Taking part in physical activity	<ul style="list-style-type: none"> • Stay active with regular exercise <p>Review the Physical Activity section for helpful tips.</p>
Eating healthy	<ul style="list-style-type: none"> • Eat 3 balanced meals per day. Eat snacks as needed. • Space meals no more than 4 to 6 hours apart • Eat more high fibre foods • Choose foods lower in salt, sugar and fat more often • If you are thirsty, drink water • Talk to a Registered Dietitian <p>Review the Nutrition section for helpful tips.</p>
Monitoring blood sugars	<ul style="list-style-type: none"> • Monitor as discussed with your health care team
Knowing the signs of low blood sugars	<ul style="list-style-type: none"> • Signs of low blood sugar may include: rapid heart rate, sweating, shaking, hunger and headache • Know how to treat low blood sugar. Speak with your health care team to find out what works best for you.
Knowing the signs of high blood sugars	<ul style="list-style-type: none"> • Signs of high blood sugar may include: increased thirst, passing more urine, weight loss, fatigue, increased appetite, blurred vision, feeling light-headed, feeling sick (nausea) or vomiting • Know how to treat high blood sugar. Speak with your health care team to find out what works best for you.

<p>What you can do to help manage your diabetes, continued</p>	
<p>Reaching your targets for A1C, blood pressure and LDL (bad) cholesterol</p>	<ul style="list-style-type: none"> • Work with your health care team to reach the targets recommended for you <p>These are generally:</p> <ul style="list-style-type: none"> • A1C less than or equal to 7.0% • Blood pressure of less than or equal to 130/80 • LDL cholesterol of less than or equal to 2.0 <p>Review the Blood Pressure and Cholesterol sections for helpful tips.</p>
<p>Taking medications</p>	<ul style="list-style-type: none"> • Take your medications as prescribed • Continue taking them even if you feel well
<p>Managing body weight</p>	<ul style="list-style-type: none"> • If needed, work towards a weight that is healthy for you <p>Review the Healthy Weight section for helpful tips.</p>
<p>Reducing stress</p>	<ul style="list-style-type: none"> • Find ways to manage stress • Make time for pleasant activities • Speak to your health care team for more support if you are not coping well
<p>Quitting smoking</p>	<ul style="list-style-type: none"> • If you smoke and you cannot stop on your own, speak to your health care team <p>Review the Being Smoke-Free section for helpful tips.</p>
<p>Caring for your feet</p>	<ul style="list-style-type: none"> • Check your feet often and see a foot care specialist
<p>Monitoring your vision</p>	<ul style="list-style-type: none"> • Visit your eye care specialist regularly

Carbohydrate Counting to Help You Manage Your Diabetes

Carbohydrates are nutrients found in many foods and drinks. There are three types of carbohydrates: sugar, starch and fibre. They turn to sugar in our bodies and are used for energy.

Here are examples of foods and drinks that contain carbohydrate:

- bread, pita, pasta, cereal, rice, crackers, dry beans, lentils, corn, squash and potato
- fruit and fruit juice
- milk, soymilk, almond milk, rice milk and yogurt
- sugar, honey, cookies, pies, pastries, pudding, chips, pretzels, popcorn, candy, chocolate bars



For people with diabetes, eating or drinking too much carbohydrate can raise blood sugar levels. Eating too little can lead to a low blood sugar.

Nutritious foods that contain moderate amounts of carbohydrate are part of a well-balanced diet.

- A well-balanced carbohydrate meal for persons with diabetes is about 45 to 60 grams for women and 60 to 75 grams for men.
- A typical snack is about 15 to 30 grams.

Your Registered Dietitian can help you with your food choices to create a meal plan that will provide the right amount of carbohydrates for you.

Foods and drinks that contain carbohydrates	Portion size that contains 15 grams (1 serving) of carbohydrate
Fruit	<ul style="list-style-type: none"> • 1 medium apple • 1 medium pear • 1 small banana • 15 cherries • 15 grapes
Starchy vegetables	<ul style="list-style-type: none"> • ½ medium white potato • ½ medium sweet potato • ½ corn on the cobb
Milk and milk alternatives	<ul style="list-style-type: none"> • 1 cup / 250 ml milk • 1 cup / 250 ml soymilk • 1 cup / 250 ml almond milk
Yogurt	<ul style="list-style-type: none"> • ¾ cup / 175 ml plain yogurt
Breads	<ul style="list-style-type: none"> • 1 slice whole wheat bread • 1 slice pumpernickel bread
Legumes	<ul style="list-style-type: none"> • ½ cup chickpeas • ½ cup lentils
Cereals	<ul style="list-style-type: none"> • 1 oz plain uncooked oatmeal • ½ cup bran flakes
Rice	<ul style="list-style-type: none"> • 1/3 cup cooked brown rice • 1/3 cup cooked white rice

Example of meals that contain 60 grams of carbohydrate:

- One turkey sandwich with 1 cup (250 ml) of blueberries and 1 cup (250 ml or 8 oz) of milk
- Half a cup (125 ml) of cooked rice with 2 cups (500 ml) of Chinese vegetables, one medium sized apple, and 3 oz of chicken breast with 1 cup (250 ml or 8 oz) of soy milk
- One whole grain pita with 1 cup (250 ml) of grilled vegetables, two tablespoons (30 ml) of hummus, one fruit and $\frac{3}{4}$ cup (175 ml) of plain yogurt
- One cup (250 ml) of chickpeas with 2 cups of lettuce, tomato, cucumber, with 1 cup (250 ml or 8 oz) of almond milk and one medium sized pear
- Three oz of baked salmon with one medium baked potato, half a plate of broccoli and carrots, and $\frac{3}{4}$ cup (175 ml) plain yogurt with $\frac{1}{2}$ cup (125 ml) of unsweetened apple sauce



Reading Food Labels

- ✓ Carbohydrates include sugars, fibre and starch. They provide your body with energy.
- ✓ Reading food labels helps you understand carbohydrate portions and make healthy food choices.

Carbohydrate and the Nutrition Facts Table

The Nutrition Facts table is a great source of information to help you know how much carbohydrate you are eating.

There are four main steps in label reading:

1. Look at the AMOUNT of food

Each Nutrition Facts table is based on a specific amount of food or beverage. This amount is **not** a recommendation for how much you should eat or drink.

2. Look at the amount of CARBOHYDRATE

The heading 'Carbohydrate' includes sugar and fibre. Look at the amount or number of grams of carbohydrate in the food or beverage.

3. Look at the amount of FIBRE

Fibre is not digested by our bodies so it should not be counted towards the carbohydrate. Subtract the amount of fibre from the amount of carbohydrate.

4. Do the MATH

Compare the serving size to how much you eat or drink. If you are having more or less than the amount specified you will need to calculate the amount of carbohydrate in your portion.

Nutrition Facts	
Per 90 g serving (2 slices)	
Amount	% Daily Value
Calories 170	
Fat 2.7 g	4 %
Saturated 0.5 g + Trans 0 g	5 %
Cholesterol 0 mg	
Sodium 200 mg	8 %
Carbohydrate 36 g	13 %
Fibre 6 g	24 %
Sugars 3 g	
Protein 8 g	
Vitamin A 1 %	Vitamin C 0 %
Calcium 2 %	Iron 16 %

In this example:

36 g (carbohydrate) - 6 g (fibre) =
30 g of available carbohydrate

We wish to acknowledge UHN's Sunlife Financial Banting and Best Diabetes Clinic for this information



Questions about diabetes

Having read the information in this section, consider the following questions.

- Do I know what my blood sugar targets are?
- Do I know what the signs are if my blood sugar is too low?
- Do I know what can cause low blood sugars?
- Do I know what to do if my blood sugar level gets too low?
- Do I know what the signs are if my blood sugar is too high?
- Do I know what can cause high blood sugars?
- Do I know what to do if my blood sugar level gets too high?
- Do I know how often I should be checking my blood sugars?
- Do I know what medications I should be taking and when to take them?
- Do I know how to plan my meals to help manage my diabetes?
- If I need a glucometer kit, do I know how to use it? Do I know what my glucometer readings mean?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about diabetes

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Aphasia Institute

- Call 416-226-3636 or visit www.aphasia.ca/shop and search for the pictographic book 'Diabetes'.

Canadian Diabetes Association

- Visit www.diabetes.ca/about-diabetes

Dietitians of Canada

- Find resources about how to make healthy food choices for your needs.
- Find a Registered Dietitian in your area for nutrition counselling.
- Visit www.dietitians.ca

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Click on 'Stroke', then 'Risk and Prevention', click 'Diabetes'

Ministry of Health and Long Term Care - Insulin Syringes for Seniors Program Application Form

- People who are 65 years or older and are on daily insulin injections may apply for funding for syringes.
- Visit www.forms.ssb.gov.on.ca/mbs/ssb/forms/ssbforms.nsf and search for 'insulin syringes'.

UnlockFood.ca

- Find information about food and nutrition, meal planning, healthy eating tips and recipes.
- Visit www.unlockfood.ca

Healthy Weight

Reaching and maintaining a weight that is healthy for you can decrease your risk of stroke, heart disease and diabetes. A healthy weight can help improve blood pressure, cholesterol, triglycerides and blood sugar levels.

Some people benefit from **losing weight**.

- Losing weight gradually is best for your health. Just a small amount of weight loss (5 – 10%) over 6 months can benefit your health.

Some people benefit from **gaining weight**.

- Sometimes, after a stroke, people lose weight because they are not eating well.
- Speak to your doctor or a Registered Dietitian about tips to help you with healthy weight gain.



For more information, refer to the sections on Nutrition and Physical Activity. Speak with a Registered Dietitian.

When you think about a healthy weight for you, consider:

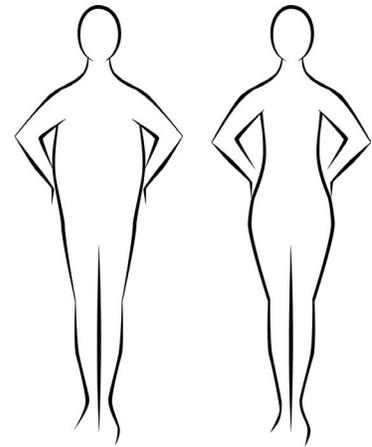
- your shape
- the size of your waist
- your weight

Work with your health care team to achieve a healthy weight through regular physical activity and healthy eating.

What is your shape?

How your weight is distributed matters. Some people are shaped like an apple. They carry a lot of weight around their waist. Others are shaped like a pear, with more weight around their hips.

Being shaped more like an apple than a pear can put you at a higher risk of stroke, heart disease and diabetes.



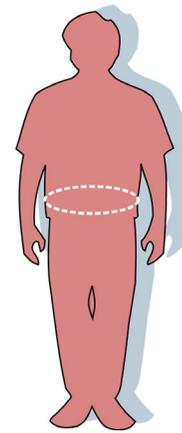
Apple

Pear

What is your waist size?

The size of your waist matters. Waist size is the measure of distance around the abdomen. To measure your waist:

1. Locate the top of the hip bone.
2. Place the tape measure evenly around the abdomen at the level of this bone.



Recommended targets for waist size

Men	Women
Aim for less than or equal to 40 inches (102 centimeters)	Aim for less than or equal to 35 inches (88 centimeters)

If your waist measurement is above the target, you can benefit from gradually reducing the size of your waist. Even small decreases can benefit your health.

A realistic waist size goal is: _____

Date DD/MM/YY	Waist size (inches or centimeters)	Am I on target? ✓ ✗

How much do you weigh?

Your health care team can help you decide what a healthy weight is for you.

- The goal for some people is to lose weight. Losing weight gradually is best for your health. Aim for 1 to 2 pounds (0.5 to 1 kilogram) a week. Some people will lose weight more slowly.
- The goal for some people may be to prevent weight gain.
- Others may need to gain weight.



A Registered Dietitian or exercise specialist can give you information and support to help you reach and maintain your healthy weight.

Use the goal worksheet to set a weight goal. Review your progress in 6 months and set another goal to build on your success.

A realistic weight goal is: _____

Date DD/MM/YY	Weight (pounds or kilograms)	Am I on target? ✓ ✗



Questions about reaching a healthy weight

Having read the information in this section, consider the following questions.

- Do I know what a healthy weight is for me?
- Do I know how to lose weight if I need to?
- Do I know how to gain weight if I need to?
- Do I have a plan for how best to do this?

If you still have questions, review the suggested resources and use the ‘Notes’ section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about reaching a healthy weight

The following resources may be helpful. To connect directly with an organization, see the ‘Directory’ at the end of the Guide for their contact information.

Dietitians of Canada

- Find resources about healthy eating and weight management.
- Visit www.dietitians.ca

eatracker.ca

- Use this website or phone app to plan your meals, analyze your food, track your activities and meet your goals.
- Visit www.eatracker.ca

Hypertension Canada

- Visit www.hypertension.ca. Click on 'Public', then 'What can I do?' and 'Maintain a healthy weight'.

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources', then 'My health' and 'Preventing another stroke'.

UnlockFood.ca

- Find information on food and nutrition, meal planning, healthy eating tips and recipes.
- Visit www.unlockfood.ca

Nutrition

Healthy eating and lifestyle habits can decrease your risk of stroke, heart disease, diabetes and obesity.



Healthy eating can:

- ✓ improve your blood pressure, blood sugar, cholesterol and triglyceride levels
- ✓ help you manage your weight and overall health
- ✓ give you more energy for exercise and recreational activities

Using the **'Action Plan for Healthy Eating'** (on the next page) can help you reduce your risk of stroke. Following the healthy food choices can help you:

- reach your targets for blood pressure, cholesterol, triglycerides and weight
- improve blood sugar control if you have diabetes

Making 1 or 2 changes per week is a great start!

Working with a Registered Dietitian can also help you meet your nutrition goals.

Action Plan for Healthy Eating

Healthy food choices for stroke prevention	Use this list to make 1 or 2 changes per week. Check off ✓ what you will commit to changing.
<p>I can improve my blood pressure by making these choices</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Eat more fruits and vegetables <input type="checkbox"/> Include lower fat dairy products such as 1% milk or skim milk, cheeses with less than 15% M.F. (milk fat content), yogurt with 0% to 1% M.F. <input type="checkbox"/> Include whole grains <input type="checkbox"/> Choose fresh, unprocessed foods often <input type="checkbox"/> Flavour foods with spices, herbs, lemon and garlic instead of salt <input type="checkbox"/> Read food labels and choose foods lower in sodium (120 mg or less, or 5% Daily Value or less, per serving)
<p>I can improve my cholesterol levels by making these choices</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Prepare foods with little or no oil by baking, steaming, sautéing, grilling or broiling <input type="checkbox"/> Use heart healthy fats and oils such as olive and canola oil, non-hydrogenated margarine, avocado, unsalted nuts and seeds in small amounts <input type="checkbox"/> Choose lean meats. Trim visible fat. Remove skin from chicken. <input type="checkbox"/> Choose low fat dairy products such as 1% milk or skim milk, cheeses with less than 15% M.F. (milk fat content), yogurt with 0% to 1% M.F. <input type="checkbox"/> Choose at least 2 vegetarian dishes per week such as tofu, beans and lentils <input type="checkbox"/> Eat more foods rich in soluble fibre such as oatmeal, oatbran, barley and psyllium (found in All Bran Buds™ cereal)

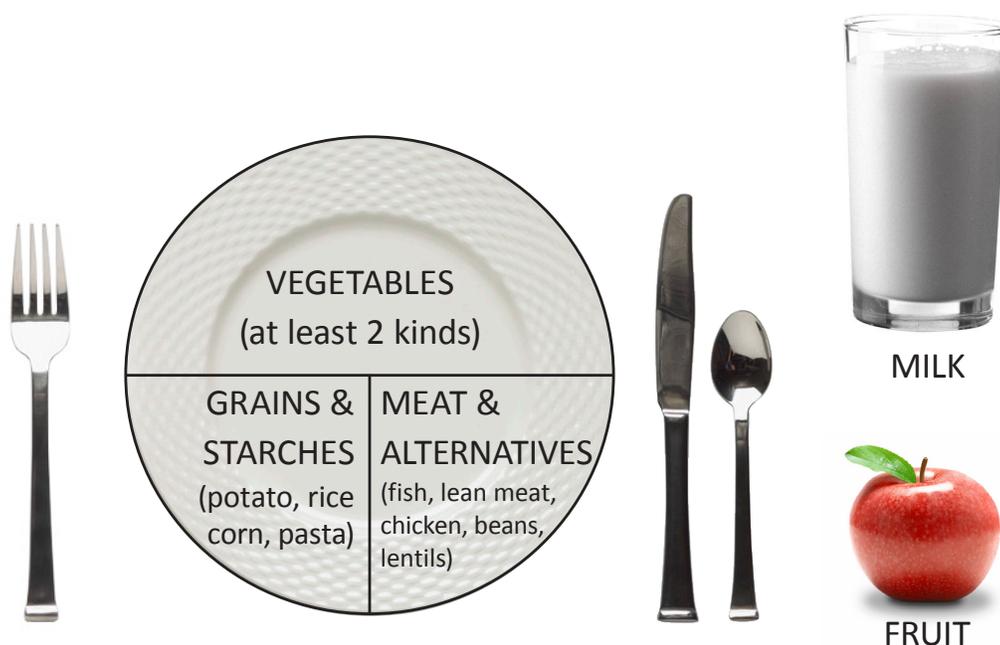
Healthy food choices for stroke prevention	Use this list to make 1 or 2 changes per week. Check off ✓ what you will commit to changing.
I can improve my triglyceride levels by making these choices	<ul style="list-style-type: none"> <input type="checkbox"/> Add 2-3 servings per week of fish rich in Omega-3 fats such as salmon, herring, trout, mackerel and sardines <input type="checkbox"/> Eat less sugar, honey, jam, jelly <input type="checkbox"/> Drink water and sugar-free beverages in place of fruit juice and regular pop <input type="checkbox"/> Drink less or avoid drinking alcohol
Choosing to follow a healthy eating plan will improve my weight and overall health	<ul style="list-style-type: none"> <input type="checkbox"/> Eat balanced meals by choosing a variety of healthy foods from Canada's Food Guide (see Help section) <input type="checkbox"/> Include foods rich in fibre such as fruit and vegetables and whole grains <input type="checkbox"/> Eat 3 meals a day at regular times <input type="checkbox"/> Watch portion sizes <input type="checkbox"/> Take healthy snacks if needed such a vegetables, fruit or low fat dairy products <input type="checkbox"/> Have water in place of juice and regular pop

Foods to Limit

Consider limiting foods	Examples of foods you can try to limit
High in sodium (salt)	<ul style="list-style-type: none"> <input type="checkbox"/> Processed meats such as ham, deli meats, hotdogs, bacon, sausages <input type="checkbox"/> Canned soups <input type="checkbox"/> Salty snacks such as chips <input type="checkbox"/> Fast foods <input type="checkbox"/> Frozen dinners <input type="checkbox"/> Pickled foods <input type="checkbox"/> Salty dressings and sauces

With the words “trans fats” or “hydrogenated” in the ingredients	<input type="checkbox"/> Shortening <input type="checkbox"/> Certain margarines (read labels to choose non-hydrogenated ones) <input type="checkbox"/> Fast foods <input type="checkbox"/> Store bought baked goods Try to avoid these foods as they raise the bad LDL cholesterol and lower the good HDL cholesterol.
High in saturated fats	<input type="checkbox"/> Homogenized milk, high fat cheeses, butter and cream <input type="checkbox"/> Fatty meats and poultry skin <input type="checkbox"/> Palm and coconut oil
High in dietary cholesterol	<input type="checkbox"/> High fat dairy products <input type="checkbox"/> Organ meats such as liver <input type="checkbox"/> Eggs yolks (limit to 2 per week) <input type="checkbox"/> Shrimp and squid

Here is an example of a well-balanced meal:



Source: Diabetes Canada

Understanding Food Labels Can Help You Make Healthy Choices

Learn how percentage (%) Daily Value can help you make healthy choices.

Nutrition Facts	
Per 125 mL (87 g)	
Amount	% Daily Value
Calories 80	
Fat 0.5 g	1 %
Saturated 0 g	0 %
+ Trans 0 g	
Cholesterol 0 mg	
Sodium 0 mg	0 %
Carbohydrate 18 g	6 %
Fibre 2 g	8 %
Sugars 2 g	
Protein 3 g	
Vitamin A 2 %	Vitamin C 10 %
Calcium 0 %	Iron 2 %

Serving Size

This serving size is for 125 mL or ½ cup.

Compare the serving size to how much you eat.

% Daily Value (%DV)

This tells you if there is a little or a lot of a nutrient in one serving.



5% DV or less is a little

15% DV or more is a lot

- ✓ Look for products which are less than or equal to 5% Daily Value per serving size more often if you want less of a nutrient.
- ✓ Look for products which are greater than or equal to 15% Daily Value per serving size more often if you want more of a nutrient.

What to look for on food labels can help improve your blood pressure and cholesterol.

Total Fat
 ✓ Aim for less than 3 g per serving.

Saturated and Trans Fats
 ✓ Aim for 2 g or less or 10% Daily Value (DV) or less of saturated and trans fats together per serving.
 *Best to choose 0% trans fats

Cholesterol
 ✓ Aim for 5% Daily Value (DV) or less per serving.

Nutrition Facts	
Per 125 mL (87 g)	
Amount	% Daily Value
Calories 80	
Fat 0.5 g	1 %
Saturated 0 g + Trans 0 g	0 %
Cholesterol 0 mg	
Sodium 0 mg	0 %
Carbohydrate 18 g	6 %
Fibre 2 g	8 %
Sugars 2 g	
Protein 3 g	
Vitamin A 2 %	Vitamin C 10 %
Calcium 0 %	Iron 2 %

Sodium
 ✓ Aim for 120 mg or less or 5% Daily Value (DV) or less per serving.

Sodium per serving		
Go ahead	0-120 mg	0-5% daily value
Watch out	121-360 mg	6%-14% daily value
Too much	> 360 mg	≥ 15%



Questions about nutrition

Having read the information in this section, consider the following questions.

- Do I know what a well-balanced meal is?
- Do I eat well-balanced meals?
- Do I need to change the way I eat to help prevent another stroke?
- Do I need information on how to prepare healthy meals?
- Do I need help preparing my meals?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about nutrition

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Canada's Food Guide to Healthy Eating

- A guide to help you with healthy food choices and meal planning.
- Visit www.canada.ca and 'search for Canada Food Guides'.

Canadian Diabetes Association

- Find information on diet, nutrition, meal planning and recipe ideas
- Visit www.diabetes.ca

Dietitians of Canada

- Find a Registered Dietitian in your area for nutrition counselling.
- Visit www.dietitians.ca

Heart and Stroke Foundation

- Visit www.heartandstroke.ca search 'Healthy Eating'

Hypertension Canada

- Visit www.hypertension.ca. Click on 'Public', then 'What can I do?', and 'Limit salt/sodium intake'.

National Institutes of Health – Dietary Approaches to Stop Hypertension (DASH)

- An eating plan that can help you to lower blood pressure, reduce cholesterol and improve how your body uses insulin.
- Visit www.dashdiet.org

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources', then 'My health' and 'Preventing another stroke'.

UnlockFood.ca

- Information on food and nutrition, meal planning, healthy eating tips and recipes.
- Visit www.unlockfood.ca

Physical Activity

Being active reduces your risk of stroke.

Regular physical activity:

- ✓ improves your blood pressure and 'good cholesterol' levels
- ✓ helps control your blood sugars
- ✓ gives you more energy
- ✓ helps you to sleep better
- ✓ helps reduce stress
- ✓ prevents constipation
- ✓ gives you a feeling of well-being
- ✓ helps you stay at a healthy weight



Being active is good for your body and mind. Ask your doctor or health care provider about the type and amount of activity that is right for you.

Talk to your doctor or health care provider before increasing your level of activity. If you have heart disease or other health problems, you need to be monitored by a doctor.



To increase your activity, start by choosing activities that you enjoy. Some examples are walking, swimming and taking part in group exercise classes.

If you have difficulty with certain movements or with balance, speak to your Physiotherapist or your health care provider. They can help you adapt exercises to your abilities.

General advice about activity:

1. Aim for 30 to 60 minutes of moderate activity (such as walking, swimming or dancing) at least 5 days a week.
 - Moderate means the effort is not too easy or too hard. You should be able to talk comfortably while doing the activity, and not be out of breath.
 - Go at your own pace. Start slowly and gradually increase over time. For example, you can increase your activity levels by adding an extra 10 minutes of activity each week.
2. Do stretching and strengthening exercises 2 to 3 days a week to stay flexible and strong.

I should be exercising _____ (number of minutes) a day,
at least 5 days a week.

Use this table or keep a journal to track your progress.

Week of _____ (month and day)			
<i>For example: Week of July 13</i>			
Weekday	Activity	Duration (how long)	Effort from 1 – 10
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			
Total duration of activities this week:			
Am I on target? ✓ ✗			
What helped you reach your physical activity goal for the week:			



Questions about physical activity

Having read the information in this section, consider the following questions.

- Do I know how exercise helps to reduce my risk of stroke?
- Do I know what types of exercise to do?
- Do I know where to go to exercise?
- Would I like to talk to my doctor about starting an exercise program?
- Do I know how to get started with an exercise program?
- Do I know how to stay physically active?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about physical activity

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Abilities Canada

- Connects people with disabilities to sport, recreation and other areas of interest.
- Visit www.abilities.ca

Active Living Alliance for Canadians with a Disability

- Provides support for Canadians with disabilities to lead active, healthy lives.
- Visit <http://ala.ca/content/home.asp>

Heart and Stroke Foundation

- Visit www.heartandstroke.ca/get-healthy/stay-active

Hypertension Canada

- Visit www.hypertension.ca. Click on 'Public', then 'What can I do?' and 'Exercise regularly'.

Together in Movement and Exercise (TIME)

- A group exercise program designed by physiotherapists, and led by fitness instructors in community centres across Canada.
- For more information or to find where TIME is offered, visit www.uhn.ca/TorontoRehab/PatientsFamilies/Clinics_Tests/TIME/Pages/about_us.aspx

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources', then 'My health' and 'Preventing another stroke'.

Cardiovascular Rehabilitation Centres

- Offers programs with exercise, education and counselling to help you recover and reduce your risk factors for stroke.
- Find your local Cardiovascular Rehabilitation Centre at the Cardiac Health Foundation at www.cardiachealth.ca

Cardiac Rehabilitation Network of Ontario

- Visit www.crno.ca. Search the directory to find a program location near you.

Sleep Apnea

Sleep apnea is a condition where your breathing briefly stops or becomes very shallow during sleep. The changes in breathing can last up to 10 seconds or more, many times a night. This will cause less air to reach your lungs which results in less oxygen to your brain. Over time, you may begin to have poor sleep and feel tired during the day.

Sleep apnea can lead to health problems over time, and is linked to high blood pressure, stroke, heart disease and weight gain. But with treatment you can control the symptoms, get your sleep back on track, and begin to feel rested and refreshed every day.



What are signs of sleep apnea?

See your doctor if you or your partner notices these signs:

- snoring loudly enough to disturb your sleep or others
- pauses in breathing, gasping or choking sounds during sleep
- waking up feeling short of breath
- feeling overly tired during the day, which may be causing difficulty concentrating or remembering things

Other problems to watch for can include:

- waking up often to go to the bathroom
- waking up with a dry mouth or sore throat
- waking up with headaches
- feeling irritable, depressed, or having mood swings
- personality changes



What causes sleep apnea?

The muscles in your airway usually relax while you sleep. Gravity causes the tongue to fall back when sleeping on your back. This will make your airway smaller and reduce the amount of air that can reach your lungs. A smaller airway can cause your throat to vibrate which is heard as snoring.

When the airway becomes too small and little to no air is getting in, your body responds by getting you to start breathing again, usually with a gasp or choking sound.

Who is more likely to be at risk for sleep apnea?

You are more likely to be at risk for sleep apnea if you:

- are an older adult
- have a family member that snores or has sleep apnea
- are overweight
- are a heavy smoker (smoking can increase the swelling and amount of fluid in the throat)
- are a heavy drinker (drinking alcohol can relax the muscles in the throat which interferes with breathing)

What can you do?

You can reduce your risk for developing sleep apnea by making healthy lifestyle changes such as:

- doing regular exercise
- quitting smoking
- drinking little or no alcohol

For more information, review the sections on

- ***Physical Activity***
- ***Being Smoke-Free***
- ***Alcohol***

Speak to your doctor if you think or know you have sleep apnea. You can see a sleep specialist or have a sleep assessment in an overnight sleep clinic.

The good news is that there is treatment for sleep apnea.

One option is to use a breathing device during sleep that keeps your airway open, called a CPAP machine. Your doctor will help you decide the best treatment for you.



Questions about sleep apnea

Having read the information in this section, consider the following questions.

- Has anyone ever told me that I stop breathing or gasp when I am asleep?
- Do I feel tired when I wake up?
- Do I often doze off or fall asleep during the day when I am not busy or active?
- Do I know who to talk to about getting tested for sleep apnea?
- Do I know what treatment is best for me to manage sleep apnea?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources for managing sleep apnea

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources', then 'My health', 'Preventing another stroke' and 'Sleep and Wake Disorders'.

Also refer to the resources in the section on Fatigue and Sleep.

Sleep Clinics	
Centre for Sleep Health and Research	<ul style="list-style-type: none"> • Cares for people with snoring and sleep apnea. • Provides diagnostic services, treatment and follow-up care. • Part of the University Health Network in Toronto. • Call 416-603-5800 ext. 5075 or visit www.uhn.ca/MCC/PatientsFamilies/Clinics_Tests/Sleep_Health_Research
MedSleep	<ul style="list-style-type: none"> • A network of clinics across Canada that provides diagnostic and treatment services for people with sleep disorders. • Call 416-488-6980 or visit www.medsleep.com
Ontario Sleep Clinics	<ul style="list-style-type: none"> • Provides care to people with sleep and wakefulness problems. • Call 416-603-5075 or visit www.sleepontario.com

<p>St. Michael's Hospital Sleep Laboratory</p>	<ul style="list-style-type: none"> • A 6-bed laboratory for sleep assessment. • Conducts research to learn about the links between sleep disorders and heart disease. • Visit www.stmichaelshospital.com/programs/sleep
<p>Sunnybrook Sleep Disorder Clinic</p>	<ul style="list-style-type: none"> • A laboratory for the assessment of sleep and sleep habits in day-to-day life. • Located at the Bayview Campus of Sunnybrook Health Sciences Centre. • Call 416-480-4475 or visit http://sunnybrook.ca/content/?page=bsp-sleep-home
<p>The Sleep Management Group</p>	<ul style="list-style-type: none"> • Provides information, treatment and support for people with sleep disorders. • Call toll free 1-877-446-9880 or 416-484-9880 (Toronto) or visit www.sleepmanagement.ca
<p>Toronto Sleep Institute</p>	<ul style="list-style-type: none"> • Provides diagnostic and treatment services for people with sleep disorders. • Call 416-488-6980 or visit www.torontosleep.ca

Managing the Effects of Stroke

This part of *Guide for Stroke Recovery* can help you and your caregiver as your recovery journey continues in the community.

People who have had a stroke and their caregivers identified these topics as most important when resuming life after stroke:

Ability To Think and Understand What I See

Communication

Depression

Fatigue and Sleep

Getting Around

Living at Home

Pain

Self-Care

Swallowing Difficulties



Managing the effects of stroke will help you become comfortable in your daily life and be as healthy and active as possible.



For further tips and strategies, access this guide online by visiting

www.strokerecovery.guide



Ability To Think and Understand What I See

A stroke can affect your ability to think clearly, complete activities, learn tasks, and remember new information.

Others around you may not understand your day-to-day struggle and this may be frustrating to you. Also, the changes to your thinking and memory may not be noticeable until you go home or back to work.

A stroke can also affect your vision and make driving and related activities unsafe.

The good news is that your health care team can help. They can help you make a plan to share with your family and friends that will address your unique concerns and needs to promote your independence. For example, your health care team, working with your doctor, can help to determine if driving a motor vehicle will be safe for you after your stroke. If this is a concern for you, please refer to the section on ***Return to Driving*** for more details.



Questions about my ability to think and understand what I see

Having read the information in this section, consider the following questions.

- Can I focus and think clearly?
- Do I have any difficulty starting or completing tasks?
- Do I have trouble with my memory (for example, do I forget to turn off the stove, or lock the door)?
- Do I find it difficult to remember new information?
- Am I aware of where I am and how to get to familiar places?
- Do I feel confused when I am asked a question, or given instruction?
- Is my vision affecting my day-to-day activities?
- Am I bumping into things on one side of my body?
- Do I understand some of the issues I might be having because of my stroke, and plan for how they may affect me?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about my ability to think and understand what I see

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Click on 'Stroke', then 'Recovery and support'. Scroll down to find information about behavior, thinking and memory.
- Type in the search box: 'Taking Action for Optimal Community and Long-Term Stroke Care'
- Type in the search box: 'Your Stroke Journey: A Guide for People Living with Stroke'

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources', and 'My health'.

Communication

If your stroke affected the area in your brain that controls language, you may have difficulty with communication. This is called aphasia.

Aphasia affects people in different ways. You may find it harder to:

- express your thoughts
- speak clearly
- understand what others say
- read or write

Aphasia means that you have difficulty with language, NOT with thinking, planning or making decisions.

There are many things you can do and tools you can use to communicate.

Augmentative and Alternative Communication (AAC) is a term used to describe extra ways of helping people who find it hard to communicate. AAC includes gestures, strategies, materials or technology to help people communicate more easily. With help from the Speech-Language Pathologist, you can learn what works best for you. Your family and caregivers can also learn how to better communicate with you.

You may find it helpful to join an aphasia or stroke support group. Groups provide a supportive setting for people living with aphasia to practice communication skills so they can more fully participate in life activities.

To find an aphasia centre or stroke support group in your community, check the resources at the end of this section, or ask your health care team or Speech-Language Pathologist.



Questions about communication

Having read the information in this section, consider the following questions.

- Can I communicate my needs and wishes so that I am understood?
- Can my family and close friends communicate well with me?
- Do I know how to tell people that I have difficulty communicating?
- Can I join in on social situations?
- Do I need any special supports (such as a computer or communication board) to help me communicate?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about communication

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Aphasia centres

Find social, recreational and therapeutic programs and services for people with aphasia to build communication skills, and to provide support and education for families.

Aphasia Centres	
The Aphasia Institute	<ul style="list-style-type: none"> • Buy illustrated books to guide your conversations with health care providers. • Join a support group, conversation group or other programs offered. • Call 416-226-3636 or visit www.aphasia.ca
Aphasia and Communication Disabilities Program	<ul style="list-style-type: none"> • Serves York, Simcoe, Durham regions, Peterborough and the Greater Toronto Area. • Call 1-800-567-0315 ext. 6216 or 905-773-7758 ext. 6216, email acd@marchofdimes.ca or visit www.marchofdimes.ca/EN/programs/ydac/Pages/AphasiaAndCommunicationDisabilitiesProgram.aspx
Halton Aphasia Centre	<ul style="list-style-type: none"> • Call 905-877-8805 or visit www.haltonaphasiacentre.com

Heart and Stroke Foundation

- Visit www.heartandstroke.on.ca. Click on 'Health Information', then 'Stroke', 'Stroke Recovery', and 'Daily living'.
- Type in the search bar: Taking Action for Optimal Community and Long-Term Stroke Care

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources' and 'Communication'.

Augmentative and alternative communication (AAC)

- AAC clinics provide assessment, prescription and training for devices to help with communication.
- Generally, a referral from a doctor is required and you must have a valid OHIP card.
- There are costs for equipment. You may be eligible for financial help for equipment funding through Ontario's Assistive Devices Program.

Augmentative and Alternative Communication (AAC) Clinics	
Bridgepoint Active Healthcare: Augmentative Communication and Writing Aids Clinic	Call 416-461-8252 ext. 2278 or visit www.bridgepointhealth.ca/en/what-we-do/ACWC.asp
Sunnybrook Health Sciences Centre: Assistive Technology Clinic – Augmentative and Alternative Communication Program	Call 416-480-5756 or visit www.assistivetechologyclinic.ca/services_aac.html
Toronto Rehab, Bickle Centre: Augmentative and Alternative Communication Clinic	Call 416-597-3028 or visit www.uhn.ca/TorontoRehab/PatientsFamilies/Clinics_Tests/AAAC_Clinic/Pages/about_us.aspx
West Park Healthcare Centre: Augmentative and Alternative Communication Clinic	Call 416-243-3600 ext. 4614 or visit www.westpark.org/Services/OutpatientClinicsServices.aspx
<p>For a list of AAC clinics in Ontario go to the following link:</p> <p>http://web.cepp.org/w/wp-content/uploads/2014/04/AAC-Clinic-Mandates-2014.pdf</p>	

Canadian Hearing Society

- Provides information and services to remove barriers to communication and improve hearing health.
- Visit www.chs.ca

International Society for Augmentative and Alternative Communication

- Provides information and increases awareness about Augmentative and Alternative Communication.
- Visit www.isaac-online.org

Ontario Association of Speech-Language Pathologists and Audiologists

- Provides information to help people with communication disorders, swallowing difficulties or hearing health care needs.
- To find a Speech-Language Pathologist or Audiologist, visit www.osla.on.ca

Depression

The changes to your mind and body after a stroke can affect how you feel. It is normal to feel the following emotions after a stroke:

- grief
- anxiety
- anger
- frustration
- sadness
- fear



These feelings can affect how you view life and how you cope with recovering after stroke.

Some people develop depression – sadness that doesn't go away and starts to affect daily activities. Depression may be due to a chemical imbalance in the brain.

Depression is common after stroke. It is a medical illness that can be treated.

Learn the warning signs of depression.

Only a doctor can diagnose you with depression, but others may be able to tell if you are showing signs of depression. Talk to your doctor if you have two or more of these warning signs for more than two weeks:

- feeling hopeless, ashamed or guilty about being a burden
- loss of interest in things you used to enjoy
- changes in your sleep pattern
- changes in appetite
- changes in weight
- feeling restless, irritable or impatient
- constant or frequent headaches, stomach upset or pain
- difficulty concentrating
- feeling tired, sluggish or lacking energy

**Having thoughts of suicide?
Call your doctor, a helpline or 911 right away!**

**You can find emergency phone numbers on the
first page of the phone book.**

It is important to get help for depression as soon as possible. You are not alone – help is available.

Many people find it hard to talk about their feelings with others. However, getting treatment from a skilled health care provider(s) will help with your recovery. The treatment you receive will depend on your needs. Treatment can include counselling, taking medications, or both.



Questions about depression

Having read the information in this section, consider the following questions.

- Have I lost interest in things I used to enjoy?
- Has there been a change in my behaviour or personality?
- Do I have trouble sleeping?
- Do I sleep more than usual?
- Has my appetite changed?
- Do I have difficulty concentrating?
- Do I feel hopeless?
- Have I had thoughts about ending my life?
- Do I know where to get help if I answered ‘yes’ to any of the questions above?

If you still have questions, review the suggested resources and use the ‘Notes’ section at the back of this Guide to write them down. Talk to your health care team and family doctor.

Resources to help with depression

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Scroll to the website's black footer, click on 'Health Information Publications'.
- Type in the search bar: Your Stroke Journey: A Guide for People Living with Stroke
- Type in the search bar: Taking Action for Optimal Community and Long-Term Stroke Care

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources', then 'My health' and 'Stroke and depression'.

Counselling

ConnexOntario

- Access to Addiction, Mental Health, and Problem Gambling Services
- Visit www.connexontario.ca

Family Service Toronto

- Support and counselling services for individuals and families.
- Visit www.familyserVICEToronto.org

Ontario Association of Social Workers

- Social Workers provide counselling and help people develop coping skills and find needed resources.
- Visit www.oasw.org

Ontario Brain Injury Association

- Support and education for people and families living with acquired brain injury.
- Visit www.obia.ca

The Scarborough Hospital Crisis Program

- Crisis response services for people 16 years of age and older in Scarborough and East York who are experiencing a mental health crisis.
- Telephone crisis response is available 24/7 by calling 416-495-2891.
- Visit www.tsh.to/areas-of-care/mental-health/regional-crisis-programs

Centre for Addiction and Mental Health

- Support and education for people and families with depression, mood and anxiety issues.
- Visit www.camh.ca



Fatigue and Sleep

Recovering from stroke takes a lot of energy. It is very common to feel tired (fatigue) after a stroke.

Feeling tired may be due to:

- changes to your brain from your stroke
- mental activity
- physical activity

The good news is that you should feel less tired with time. As you become more active, you will begin to have more energy.

Some people feel tired for a long time. If you continue to feel tired, here are some helpful tips to manage fatigue.

Tips to help you feel less tired

1. Eat a healthy, balanced diet and drink plenty of fluids. Refer to the section on **Nutrition** for more details.
2. Try to be as physically active as you can.
3. Make a ‘to do’ list. Decide which tasks are most important to you and do those first.
4. Break up big tasks into smaller tasks.
5. Plan activities for the time of day when you have the most energy. Keep an activity log or ask a family member to help you monitor your energy levels.
6. Plan your day and week to include rest time. If you know you have a busy day make sure it’s followed by a rest day.
7. Take short rest breaks or naps if needed, but save your longest sleep for the night.
8. Try to go to sleep and wake up at the same times each day.

It is helpful to know what is “good sleep” and “poor sleep”, and how sleep affects your daily life.

Good sleep	Poor sleep
<ul style="list-style-type: none"> • is being able to fall asleep and sleep through the night • is vital to your recovery • helps your brain heal • gives your mind and body energy 	<ul style="list-style-type: none"> • is trouble falling asleep or not being able to sleep through the night • makes you feel tired during the day • can make it harder to concentrate or do things you enjoy

If you have poor sleep, talk with your doctor.

There are many ways to get better sleep. Some options are:

- establish a bedtime routine – you may want to include listening to relaxing music, use of the bathroom before bed, prayer, or deep breathing exercises
- counselling
- therapy (for example: mindfulness meditation, cognitive behavioural therapy, and others)
- medication
- help from a sleep specialist



Questions about fatigue and sleep

Having read the information in this section, consider the following questions.

- Do I have trouble sleeping?
- Am I worried, anxious or is my mind racing when I am trying to rest?
- Am I too tired to do the things I need to do or enjoy?

If you still have questions, review the suggested resources and use the ‘Notes’ section at the back of this Guide to write them down. Talk to your health care team and family doctor.

Resources to help with fatigue and sleep

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Bridgepoint Active Healthcare – Mindfulness Based Stress Reduction Program

- A 9-week program that helps you learn to calm your mind and body, which helps you cope with illness, pain and stress. There is a fee and a referral is required.
- Visit www.bridgepointhealth.ca/en/what-we-do/ Outpatient-Care.asp

Canadian Sleep Society

- Find information about healthy sleep and sleep disorders. Search for sleep clinics in your area.
- Visit <https://css-scs.ca>

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Type in the search bar: Your Stroke Journey: A Guide for People Living with Stroke

Getting Around

A stroke may affect your mobility. You may need to learn to move around in a different way.

To get around safely, you may need a mobility aid such as:

- a walker or cane
- an ankle brace
- a wheelchair or scooter



Your Physiotherapist or Occupational Therapist can recommend the right mobility aid for you.

You might consider borrowing, renting or buying a mobility aid. Talk with your health care team about what is the best option for you. You may also be able to get funding from community or government agencies to help cover the cost of buying a mobility aid.

If you do not drive or are unable to drive, you can make arrangements to use a transportation service for people with disabilities. Transportation services, such as Wheel-Trans or volunteer driving services, can help you get to where you need to go.



Questions about getting around

Having read the information in this section, consider the following questions.

- Am I safe when moving around in my house (for example, in the bathroom or climbing stairs)?
- Do I have comfortable footwear?
- Am I afraid of falling?
- Do I know how to prevent a fall?
- Will I know what to do if I fall?
- Do I have all of the equipment I need (for example: a wheelchair, walker, or cane)?
- Do I know where I can get the equipment I need?
- Can I get funding to help cover the cost of the equipment?
- Can I get out and go to places where I need to go (for example, can I cross the street safely or get to the grocery store)?
- Do I know which services I can access from my home if I can't get out (for example, online banking or grocery delivery service)?
- Do I know how to arrange for these services?
- If I need a ride to get somewhere, do I know how to find one?
- Do I need help to get around during the winter or in bad weather?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.

Resources for getting around

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Aphasia Institute

- Visit www.aphasia.ca/shop and search for the pictographic books 'Daily Living' and 'Falls Prevention', 'Transitions' and 'Transportation'.

Baycrest: Assistive Technology Clinic

- Seating and Mobility Program – Prescribes equipment from walkers and wheelchairs to high tech mobility aids to suit clients' needs.
- Gait Technology Program – Provides strengthening, education and balance training to improve walking and activities of daily living.
- Spasticity Management Program – Provides treatment for abnormal tone and spasticity to improve function.
- Upper Extremity Program – Provides treatment to improve function of the arm and hand after neurological injury.
- Visit www.assistivetechologyclinic.ca

Bridgepoint Active Healthcare

- Seating Clinic – Addresses seating needs of patients who require the use of an assistive device for mobility.
- Physiatry Services – Access doctors who specialize in physical medicine and rehabilitation.
- Visit www.bridgepointhealth.ca/en/what-we-do/clinics-and-services.asp

Community Navigation and Access Program (CNAP)

- Visit www.cnap.ca to connect with services for seniors in the Toronto area.

Home and Community Care

- Visit www.healthcareathome.ca to make a self-referral to your local office.

Toronto Central Healthline – Falls Prevention Clinics

- Visit www.torontocentralhealthline.ca. Click on ‘Stroke Resources’, then ‘Getting around’ and ‘Continuing my recovery’.

Toronto Rehab: Falls Prevention Clinic

- Provides group education and exercise sessions related to falls prevention.
- Visit [www.uhn.ca/TorontoRehab/ PatientsFamilies/Clinics_Tests/Falls_Prevention_Clinic](http://www.uhn.ca/TorontoRehab/PatientsFamilies/Clinics_Tests/Falls_Prevention_Clinic)

Toronto Rehab: Rocket Family Upper Extremity Clinic

- Provides treatment to improve arm and hand function after neurological injury. Services are not usually covered by OHIP.
- Visit [www.uhn.ca/TorontoRehab/ PatientsFamilies/Clinics_Tests/Rocket_Family_Upper_Extremity](http://www.uhn.ca/TorontoRehab/PatientsFamilies/Clinics_Tests/Rocket_Family_Upper_Extremity)

Toronto Rehab: Spasticity Management Clinic

- Provides a range of services to manage muscle spasms and tightness to improve function.
- Visit [www.uhn.ca/TorontoRehab/ PatientsFamilies/Clinics_Tests/Spasticity_Management](http://www.uhn.ca/TorontoRehab/PatientsFamilies/Clinics_Tests/Spasticity_Management)

West Park Healthcare Centre: Spasticity Management Clinic

- Provides special care and treatment for adults with spasticity.
- Visit www.westpark.org/Services/Spasticity.aspx

Transportation

Ministry of Transportation - Accessible Parking Permits

- Visit www.mto.gov.on.ca/english/dandv/vehicle/app.shtml

Toronto Central Healthline

- Visit www.thehealthline.ca and find your region on the map. Click on ‘Stroke Resources’, then ‘Getting around’ and ‘Transportation’.

Toronto Ride

- Provides assisted door-to-door transportation services in the Toronto area to seniors and adults with disabilities who are not eligible for Wheel-Trans.
- Visit www.torontoride.ca

Toronto Transit Commission - Wheel-Trans

- Provides door-to-door accessible transit service. Visit www.ttc.ca/WheelTrans

Living at Home

A stroke may affect your mobility and ability to do things around the house the same way you did before. To make it easier and safer to move around at home, you may wish to consider making changes such as:

- rearranging furniture and removing rugs from floors
- buying special equipment such as bath seats and grab bars
- adding ramps and handrails

Your Occupational Therapist (OT) can help you decide what equipment and changes are needed in your home. If you need help to pay for this, talk to your health care team. You may be able to get funding from community or government agencies.

To continue to live well and safely in your own home, you may need to request help from agencies in your community. You may need to get help with tasks around the house such as cooking (for example, Meal on Wheels) and cleaning (for example, homemaking services). Many cities will take care of clearing ice and snow on the city portion of the sidewalk for seniors and people with disabilities. Some cities may provide a list of companies that can help with yard work and home maintenance.

If you are unable to return to your home, your health care team and [Home and Community Care](#) (310-2222) will help you consider other options such as a retirement home or a long term care facility.



Questions about living at home

Having read the information in this section, consider the following questions.

- Do I need to make changes to my home so I can move around safely?
- Do I need any devices to get in and out of my home (for example: a railing, ramp or stairlift)?
- Do I know what funding is available to help with the cost of making changes to my home?
- Do I need help from family, friends or neighbours to manage at home?
- Will I need home care or other paid services to help me in my home?
- Do I have an alert system so I can call for help in case of an emergency (for example, a medical alert device or a cell phone)?
- Do I have any concerns about living safely on my own?
- Do I know what my options are if I can no longer live in my home?

If you still have questions, review the suggested resources and use the ‘Notes’ section at the back of this Guide to write them down. Talk to your health care team and family doctor.

Resources about living at home

The following resources may be helpful. To connect directly with an organization, see the ‘Directory’ at the end of the Guide for their contact information.

Aphasia Institute

- Visit www.aphasia.ca/shop and search for pictographic books ‘Daily Living’, ‘Falls Prevention’ and ‘Transitions’.

Community Navigation and Access Program (CNAP)

- visit www.cnap.ca to connect with services for seniors in the Toronto area.

Home and Community Care

- Visit www.healthcareathome.ca to make a self-referral to your local office.

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on ‘Stroke Resources’ and ‘Where I live’.

The Care Guide Source for Seniors

- Information about housing and services for seniors in Ontario.
- visit www.thecareguide.com

Assistive devices

Refer to Assistive Devices in the Leaving the Hospital Section

Financial help for home modifications

Canada Mortgage and Housing Corporation – Home Adaptations for Seniors’ Independence (HASI)

- Financial help for minor home adaptations that help low-income seniors to continue to live at home independently.
- Call toll free 1-800-668-2642

March of Dimes Canada – Home and Vehicle Modification Program

- Provides funding for home and vehicle modifications.
- visit www.marchofdimes.ca/EN/programs/hvmp/Pages/HomeandVehicle.aspx

Home maintenance, yard work and snow removal

City of Toronto

- Help with home maintenance, yard work or snow removal for seniors or persons with disabilities living in Toronto.
- Visit www.toronto.ca and search for ‘Seniors and disabled’ for a list of home-related supports.

Supportive and affordable housing

Bellwoods Centres for Community Living

- Provides community support services, independent living education programs and accessible housing for persons with physical support needs living in Toronto.
- Visit <http://bellwoodscentres.org>

Centre for Independent Living in Toronto (CILT)

- Information on attendant services, employment, housing, transportation
- for people with physical disabilities.
- Visit www.cilt.ca

Housing Connections

- Manages the centralized waiting list for subsidized housing in Toronto.
- Visit www.housingconnections.ca

Ontario Retirement Communities Association

- Provides information on retirement home living.
- Visit www.orcaretirement.com

PACE Independent Living

- Provides support services and housing for adults with physical disabilities.
- Call 416-789-7806 or visit www.pace-il.ca

Tobias House Attendant Care

- Provides 24 hour personal support services for people with physical disabilities.
- Call 416-690-3185 or visit www.tobiashouse.ca

Safety in the home – Personal emergency response systems

- An emergency response system lets you quickly call for help in a personal or medical emergency by simply pushing a button.
- To find services in your area, visit Toronto Central Healthline at www.torontocentralhealthline.ca. Click on ‘Stroke Resources’ then ‘Safety in the home’ and ‘Personal Emergency Response Systems’.

Pain

You may experience pain after stroke due to:

- physical changes in your body
- damage to a specific area of your brain that controls sensation and pain

Pain can sometimes be a sign of depression. Refer to the section on ***Depression*** for more information.

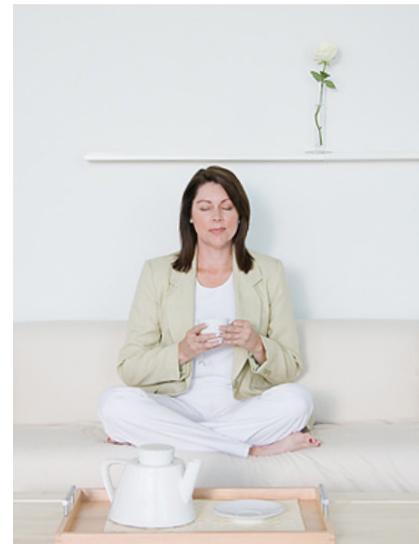
Managing your pain can help you be more active and allow you to participate in activities you enjoy.

If you have pain, talk to your health care team.

Your health care team can help you find ways to manage your pain.

Some options include:

- Medication
- Relaxation techniques
- Exercise
- Cognitive-behavioural therapy (therapy that helps you understand your thoughts and behaviour and make helpful changes)
- Acupuncture
- Massage therapy
- Aqua fit (exercising in water)



 Questions about pain

Having read the information in this section, consider the following questions.

- Does pain limit or prevent me from doing the things I need to do or enjoy?
- Do I know what to do if my pain is causing anxiety?
- Do I know what to do if my pain is causing problems with my memory?
- Do I know what to do if my pain is affecting my sleep?
- Do I know what to do if my pain is affecting my appetite?
- Do I know what to do if my pain is affecting my mobility?
- Do I know what to do if my pain gets worse, is more frequent or lasting longer?
- Do I have tightness in my muscles that is causing pain or limiting my function?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.

Resources to help with pain

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Scroll to the website's black footer, click on 'Health Information Publications'.
- Type in the search bar: Taking Action for Optimal Community and Long-Term Stroke Care

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources', then 'My health' and 'Pain'.

Botox®

- Headaches can sometimes be treated with Botox® treatments by a certified Neurologist. Speak to your doctor or nurse practitioner for more information.

Pain Management Programs	
Bridgepoint Active Healthcare: Pain Management Program	<ul style="list-style-type: none"> • A 10-week program that uses a cognitive-behavioural approach and physical activity to help people cope with pain. • There is a fee. • Call 416-461-8252 or visit www.bridgepointhealth.ca/en/what-we-do/Outpatient-Care.asp
Toronto Academic Pain Medicine Institute	<ul style="list-style-type: none"> • Provides assessment and treatment of soft tissue injuries and pain. • Funding is available through private or group health plans • Visit www.tapmipain.ca

<p>Mount Sinai Hospital: Wasser Pain Management Centre</p>	<ul style="list-style-type: none"> • Assessment and treatment for adults with chronic, non-cancer, disabling pain disorders. • Call 416-586-4800 ext. 5997 or visit www.mountsinai.on.ca/care/pain_management
<p>Rothbart Centre for Pain Care</p>	<ul style="list-style-type: none"> • A medical treatment centre that provides pain care for patients with chronic pain of the head, neck, face and back. • Cost is covered under the Ontario Health Insurance Plan (OHIP). Call 416-512-6407 or visit www.rothbart.com
<p>Toronto Western Hospital Comprehensive Pain Program</p>	<ul style="list-style-type: none"> • Treatment for pain that may include a combination of approaches • Call 416-603-5380 or visit www.uhn.ca/KNC/PatientsFamilies/Clinics_Tests/Comprehensive_Pain

Self-Care

A stroke can affect your ability to manage day-to-day activities related to your personal care such as:

- feeding
- grooming
- toileting
- bathing
- dressing



A stroke may also affect your ability to manage activities such as:

- organizing daily routines
- preparing meals
- grocery shopping
- doing laundry
- doing hobbies

Your health care team, including your Occupational Therapist (OT), can help you regain these self-care skills. This will help you work towards being more independent.



Questions about self-care

Having read the information in this section, consider the following questions.

- Can I tell when I have to go to the washroom?
- Can I control my bowel and bladder?
- Do I need help with activities like bathing, dressing, brushing my hair or my teeth?
- Do I need help to manage activities in the community (for example, getting groceries or banking)?
- Do I need assistive devices to help me with activities around my home and/or in the community (for example: use of a walker, shower chair, hand-held showerhead or one-handed devices)?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.

Resources for self-care

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Aphasia Institute

- Call 416-226-3636 or visit www.aphasia.ca/shop and search for Home and Community Care

Community Navigation and Access Program (CNAP)

- Call toll free 1-877-621-2077 or visit www.cnap.ca to connect with services for seniors in the Toronto area.

Heart and Stroke Foundation

- Visit www.heartandstroke.ca click on 'Stroke', then 'Stroke Recovery'.
- Type in the search bar: Taking Action for Optimal Community and Long-Term Stroke Care

Home and Community Care

- Visit www.healthcareathome.ca to make a self-referral to a local office.

March of Dimes Canada – Attendant Care Services

- Provides help with daily activities such as personal grooming, bathing, dressing, mobility and meals.
- Visit www.marchofdimes.ca/EN/programs/Attendant/Pages/Attendant.aspx

Ontario Community Support Association

- Search for community support services that help people live independently at home and stay connected to their community.
- Visit www.caredove.com/ocsa

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources', and 'My health', 'Where I live', or 'Caregiver support'.



Swallowing Difficulties

A stroke can affect the muscles you use to eat and swallow. Muscles in your lips, tongue and throat may be affected and cause difficulties swallowing (called dysphagia). Some swallowing problems are easy to see like drooling, coughing or choking. Others may be harder to notice such as the feeling that food is stuck in your throat. A Speech-Language Pathologist helps people who have difficulty with swallowing.

Watch for these common problems when eating and drinking after a stroke:

- coughing, throat clearing or choking while eating and drinking
- swallowing several times for each mouthful
- complaining of food sticking in the throat when eating or drinking
- holding food in the cheek or back of the mouth after swallowing (usually on the person's weaker side)
- eating too quickly or too slowly
- taking a long time to finish a meal
- repeated lung or chest infections, such as pneumonia
- less able to eat by themselves
- difficulty swallowing medicines

If you have difficulty swallowing, discuss this with your health care team.

There are many ways that families can help people with swallowing difficulties.

Ask the Speech-Language Pathologist how you can improve feeding and swallowing.

Some ways to help are:

Changing the texture of food and the thickness of drinks



Changing the feeding position



Illustrations courtesy of Ryan Wong

- Sit the person straight with their head slightly forward and chin slightly down
- If needed, use pillows to support them and to ensure they do not lean to their weak side when they eat
- Sit at eye level when feeding people who can't feed themselves
- You should always face the person you are feeding

Changing the environment and set-up of meals

- Keep the person from becoming distracted when eating by:
 - turning off the radio and television
 - limiting the number of people talking during meal times
- Place food, cups, and utensils close enough to help the person feed themselves.

A Registered Dietitian can:

- help you learn how to change food textures and drink thickness
- give you information about managing feeding tubes

Home and Community Care can help you set up equipment in the home and teach you how to use it. Your health care team can refer you, or you can call directly at 310-2222.

Tips for the caregiver for safer eating and swallowing

- Have the person eat and drink only when they are fully awake.
- Have them sit up straight in a chair or bed.
- Make sure that they wear their dentures, hearing aids and glasses at all meals.
- Make sure their mouth is clean and clear before meals.
- Encourage them to take small bites and sips.
- Make sure the first bite or sip is swallowed before the next is given.
- Watch for movement of the throat area to show the person has swallowed.
- Make sure their mouth is clean and clear of food after every meal.
- Make sure they remain sitting up straight for 20 to 30 minutes after eating.
- Try to make eating a slow and relaxed experience.
- Talk to a health care provider if there is trouble with eating or drinking.



Questions about swallowing

Having read the information in this section, consider the following questions.

- Do I have trouble swallowing?
- Do I need food minced or pureed so I can swallow safely?
- Do I need drinks thickened so I can swallow safely?
- If I have a feeding tube, do I know how to manage it?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about swallowing

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Aphasia Institute

- Call 416-226-3636 or visit www.aphasia.ca/shop and search for the pictographic book 'Eating'.

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Scroll to the website’s black footer, click on ‘Health Information Publications’.
- Type in the search bar: Your Stroke Journey: A Guide for People Living with Stroke
- Type in the search bar: Taking Action for Optimal Community and Long-Term Stroke Care

Home and Community Care

- Visit www.healthcareathome.ca to make a self-referral to a local office.

Pharmacies

- You can buy thickening powder at your local pharmacy.

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on ‘Stroke Resources’, then ‘My health’ and ‘Swallowing’.

Swallowing clinics

You may be referred to a swallowing clinic for assessment of your swallowing by a Speech-Language Pathologist.

Swallowing Clinics	
St. Michael’s Hospital	<ul style="list-style-type: none"> • A clinic for St. Michael’s patients only. • Call 416-864-6060 ext. 5282 or visit www.stmichaelshospital.com/programs/speech
University Health Network – Toronto Western Hospital	<ul style="list-style-type: none"> • A clinic for UHN patients only. Requires a doctor’s referral. • Call 416-603-5997 or visit www.uhn.ca/KNC/PatientsFamilies/Clinics_Tests/Swallowing_Clinic

Getting Back Into Life



Stroke affects each person in different ways. Stroke may change your roles, family balance and dynamics. Adjusting to these changes will take time. It is normal for you and your family to feel grief, sadness, anger, fear and frustration. However, many people will continue to improve, often over a number of years, after a stroke.

Recovery is about getting back to meaningful activities and living as independently as possible within your abilities. Working with your family and health care team to manage the changes in roles, relationships, and activities can help you to enjoy life to its fullest.

If you feel that there are areas that you would like to further improve, private therapy may be an option for you. If you need more information, speak to your rehabilitation team.

“I have the drive and the motivation to go back to the way my life use to be. It may frustrate me because of the fact that it may not happen right away but I have the drive, let’s say a year from now to be driving, to be moving around like normal, be back to do my own lawn care, be back to do my own stuff at home.” (Mr. J, age 65)

This section covers topics about:

Caregiver Support

Driving

Finances and Money

Life Roles

Sex and Intimacy

Social Support

Travelling

Work and School



For further tips and strategies, access this guide online by visiting

www.strokerecovery.guide



Caregiver Support

For the person with stroke:

A caregiver is someone who provides help to another person who has an injury or illness. Your caregiver could be a family member, a friend, or someone who is paid to help you. Your caregiver is an important source of long-term support as you recover from stroke.

Your caregiver:

- helps you to be as independent as possible
- keeps you safe
- respects your dignity
- supports your quality of life

You may rely on your caregiver for certain things. For example, you may need your caregiver to help:

- with your personal care (for example, dressing or bathing)
- with daily activities (for example, laundry or cleaning)
- with completing tasks that you were responsible for before your stroke

It is important to recognize that your caregiver has had to make changes in their life. Although being a caregiver can be a very positive experience, it is normal for your caregiver to need some time to focus on their needs so they can stay healthy.



For the caregiver:

As a caregiver you provide significant support to your loved one. This can be both demanding and rewarding. You and your family have had to make major changes in your lives. Adjusting to these changes and settling into a routine that works well for both of you will take time.



It is normal to feel:

- grief
- anxiety
- anger
- frustration
- sadness
- fear

Many caregivers need information, support, and training to learn how to adapt to a new way of life. Your loved one's health care team could be a source of support. You may also find it helpful to talk with others who know what you are going through.

Being involved in a peer support group for caregivers gives you a chance to:

- share your stories
- learn from others
- get support from others who have had a similar experience

Peer support helps you see that you and your family are not alone.

Although you may spend time and energy looking after your loved one, it is just as important to look after your own health. This includes your physical, emotional, mental, and social well-being.

If you are feeling depressed, it is important that you speak to your family doctor. It is also important to recognize when you might be feeling burnt out and need a break. Don't be afraid to ask for help from family, friends or local community services. Asking for help is not a sign of weakness or your inability to cope. It is normal to need a break so that you can focus on your needs.

As a caregiver, you must also care for yourself.

Signs of Caregiver Burnout

As a caregiver it can be easy to make your loved one the focus of your life. It is common for caregivers to let their own health suffer. Watch for the following signs. If you begin to experience these signs, you may want to speak with your family doctor.

- Muscle tension or body pain
- Being tired most of the time and/or not being able to sleep well
- Stomach or bowel upset
- Difficulty getting over illnesses (for example, a common cold) or worsening of existing health issues
- Difficulty concentrating or making decisions
- Feeling helpless, overwhelmed or lonely
- Appetite changes – either eating too much or too little
- Excessive use of sleeping pills or medications or alcohol
- Being more easily upset or irritated with others
- Losing control physically or emotionally, unintended neglect or rough treatment of the person whom you are caring for

Accessing respite services can provide you with the break that you need. Respite Care is short-term, temporary relief for caregivers. It can range from a few hours by having someone ‘relieve’ the caregiver in their home, to a few weeks allowing the caregiver to have some time away while their loved one receives care in a facility.

There may be a cost for respite care. Speak to a member of your health care team if you have questions or need help with decisions that you need to make.



Questions about caregiver support

For the person with stroke:

Having read the information in this section, consider the following questions.

- Do I need and/or have a caregiver to help me in my day-to-day life?
- Is my caregiver able and willing to help me in my day-to-day life?
- Do I know the signs of when my caregiver needs a break from caring for me?
- Do my caregiver and I know where to go for help if we need it (for example: family, friends, community services, respite programs or support groups)?
- Do my caregiver and I know how to access resources and services that we need?

If you still have questions, review the suggested resources and use the ‘Notes’ section at the back of this Guide to write them down. Talk to your health care team and family doctor.

For the caregiver:

Having read the information in this section, consider the following questions.

- Do I feel that I am managing well with looking after my loved one?
- Do I know how I can help my loved one to be more independent?
- If I need help, do I know how to access resources and services to support me?
- Do I know the signs of caregiver stress or burnout?
- Are there activities I enjoy that I want to continue but am unable to?
- Would I like to talk to someone about how I am feeling?
- Do I know how to find someone I can talk to if I need to?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.

Resources for caregiver support

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Community Navigation and Access Program (CNAP)

- Visit www.cnap.ca to connect with services for seniors in the Toronto area.

March of Dimes Canada

- Call the Warmline at 1-888-540-6666 or visit www.marchofdimes.ca

Toronto Central Healthline

- Privately-owned businesses that offer a range of support from a few hours a week of companionship and light housekeeping to around-the-clock care from a registered nurse.
- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources' and 'Caregiver support'.

Caregiving information

Canadian Caregiver Coalition

- Provides support, practical tools and information to improve the quality of life for family caregivers.
- Visit www.ccc-ccan.ca

Caregiver Action Network

- Provides online education, peer support and resources for family caregivers.
- Visit www.caregiveraction.org

National Stroke Association

- Read 'Hope: The Stroke Recovery Guide' at www.strokesmart.org

Stroke Network

- Provides on-line stroke support and information to persons with stroke and caregivers.
- Visit www.strokenetwork.org

The Family Caregiver

- Although not specific to stroke care, this website provides practical information to help people to find solutions for their caregiving questions and needs.
- Visit www.thefamilycaregiver.com

Victorian Order of Nurses

- Provides information and support to caregivers, with many links to community agencies.
- www.von.ca

Peer support

Stroke Recovery Canada®

- Provides support, education and community programs for people living with stroke, their caregivers and families.
- Call 1-888-540-6666 or visit www.strokerecoverycanada.com

Warmline – 1-888-540-6666	<ul style="list-style-type: none">• Confidential peer support for people living with stroke or caregivers.
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Counselling

ConnexOntario

- Access to Addiction, Mental Health, and Problem Gambling Services.
- Visit www.connexontario.ca

Family Service Toronto

- Provides support and counselling services for individuals and families.
- Call 416-595-9230 or visit www.familyserVICEToronto.org

Ontario Association of Social Workers

- Social Workers provide counselling and help people develop coping skills and find needed resources.
- Visit www.oasw.org

Ontario Brain Injury Association

- Provides support and education for people and families living with acquired brain injury.
- Visit www.obia.ca

The Scarborough Hospital - Crisis Program

- Crisis response services for people 16 years of age and older in Scarborough and East York who are experiencing a mental health crisis.
- Telephone crisis response is available 24/7 by calling 416-495-2891.
- Visit www.tsh.to/areas-of-care/mental-health/regional-crisis-programs

Books about caregiving

Resource Title	Author	Year
Caregiver's Guide for Canadians	Rich Lauber	2010
Living with Stroke: A guide for patients and families	Richard Senelick	2010
The Stroke Recovery Book: A guide for patients and families	Kip Burnkman	2010
Lessons Learned: Stroke Recovery From a Caregiver's Perspective	Berenice Kleinman	2007
Being a caregiver in a home setting	Elana Zucker	2013
One Hundred Names for Love: A Stroke, a Marriage, and a Language of Healing	Diane Ackerman	2011
Stroke! A Daughter's Story	Doris Thurston	2006
Stroke Diaries	Olajide Williams	2010
Your Mother has Suffered a Slight Stroke	Kathy Bosworthy	2001

Driving

Being able to drive again is important for many people after a stroke. This is possible and about half of people who have had a stroke return to driving.

Your doctor or stroke specialist will decide if, and when, it is safe for you to drive. This will depend on the effects of your stroke and how long they last.

A stroke can affect:

- your ability to focus, think, carry out tasks, learn, remember and understand how you see the world around you
- your physical skills, such as being able to use both hands to do tasks

These changes may affect your ability to drive safely.

If your stroke has affected you in ways that affect your driving safety, your doctor is required to report your stroke to the Ministry of Transportation of Ontario (MTO). The MTO may suspend your licence until you have recovered enough to be able to drive safely.



When the doctor has cleared you to start driving again, you may need to have a driving assessment before you can start driving again. Some people who have weakness after a stroke can successfully resume driving. It may be possible to adapt your vehicle so you can drive safely. Any restrictions or changes to your vehicle will be noted on your driver's licence.

Sometimes there are lasting effects of the stroke that make driving unsafe. When this happens, returning to driving may not be possible. Making arrangements with family or friends, or considering alternatives such as Wheel-Trans or volunteer driving services may be options. Refer to the resources in the **Getting Around** section in this guide for more information.



Questions about driving

Having read the information in this section, consider the following questions.

- Is driving something that is important for me to get back to doing?
- Do I know what steps to take to get my licence back?
- Has the doctor (neurologist, physiatrist) given me the OK to drive again?
- Do I need to have a driving test?
- Do I know where to go for this test?
- Do I know how much the test costs?
- Have I spoken with a driver rehab specialist about making changes to my vehicle?
- Do I know which companies can help me to make changes to my vehicle?
- Can I apply for funding to help cover the cost of these changes?
- Have I told my auto insurance company about any changes (for example, license or vehicle modification)?
- Do I know whether my insurance covers someone else to drive my car?
- Do I know what transportation options are available if I am no longer allowed to drive (for example, Wheel-Trans or volunteer driving services)?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about driving

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Click on 'Stroke', then 'Recovery and support'. Find 'Your Stroke Journey' under this section.
- Type in the search tab: Your Stroke Journey: A Guide for People Living with Stroke

March of Dimes Canada – Home and Vehicle Modification Program

- Provides funding for vehicle modifications.
- Visit www.marchofdimes.ca. Click on 'Programs and Services', then 'Accessible Modifications'.

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources' and 'Getting around'.

University Health Network – Toronto Rehab: Returning to Driving information pamphlet

- Tells you the skills needed to drive safely, how therapy can help, and what to do if your license is suspended.
- Visit www.uhn.ca/PatientsFamilies/Health_Information/Health_Topics/Documents/Returning_to_driving.pdf

Ministry of Transportation of Ontario

Accessible Parking Permits

- Call toll free 1-800-387-3445 or 416-235-2999 (Toronto) or visit www.mto.gov.on.ca and search for 'Accessible Parking Permits'.

Driver Improvement Office, Medical Review Section

- Provides information about medical reviews and the process for getting a license reinstated, including driver assessment.
- Call toll free 1-800-268-1481 or 416-235-1773 (Toronto) or visit www.mto.gov.on.ca/english/dandv/driver/medical-review

Approved driver assessment and training centres in Toronto

DriveAgain

- Visit www.driveagain.ca

Driver Rehab Therapist

- Visit www.driverrehabtherapist.com

Saint Elizabeth Health Centre – Driver Assessment and Training Services

- Visit www.saintelizabeth.com/page/driver-assessment-training

Vehicle modification

Car dealers that adapt and modify vehicles for people with disabilities

General Motors of Canada – Mobility Program

- Visit www.gm.ca. Click on 'Site Map', then 'Mobility Program'.

Savaria Vehicle Group

- Visit www.savaria.com/products/vans/index.php

Shoppers Home Health Care – Automotive Division

- Visit www.sparrowhawk.ca

Universal Motion

- Visit www.universalmotion.com



Finance and Money

When there is a change in your health such as having a stroke, it is normal to be worried about finances. You may be concerned:

- that you are not well enough to go back to work
- that your savings will run out
- about paying for the medications or special equipment you need

If you need income support, there are community and government services that can help. Your health care team can give you information and guide you to the services that best suit your needs.

Finding help with your finances lets you focus on your recovery.





Questions about finance and money

Having read the information in this section, consider the following questions.

- Do I need financial support (for example: to look after my family, pay for medications, equipment or changes to my home or car)?
- Am I eligible for assistance?
- Do I have private health insurance that can help pay for some of my costs (for example, Sun Life or Blue Cross)?
- Do I have disability insurance?
- Do I have short-term and long-term disability benefits through work?
- Do I know who to talk to about my work benefits (for example: my boss, human resources or occupational health)?
- Do I know about government funding programs and tax benefits available to persons with disabilities (for example: Registered Disability Savings plan (RDSP), Ontario Disability Support Program (ODSP) or T2201 tax form)?
- Am I able to manage my money (for example, pay bills or balance a budget)?
- Can my caregiver manage the finances?
- Do I have a will?
- Do I need a power of attorney to manage my money?
- Do I know when I should call the Office of the Public Guardian and Trustee?
- Do I feel that I am being taken advantage of when it comes to my money?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about finances and money

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Aphasia Institute

- Visit www.aphasia.ca/shop and search for the pictographic book 'Transitions'.

March of Dimes Canada – Assistive Devices Program

- Provides help to buy, repair or maintain some mobility devices.
- Visit www.marchofdimes.ca. Click on 'Programs and Services', then 'Assistive, Accessible Devices'.

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources' and 'Managing my money'.

Money management

Credit Counselling and Financial Planning

- search 211Toronto.ca to find credit counselling or financial planning services.

Ministry of the Attorney General - Office of the Public Guardian & Trustee

- Protects the legal, personal and financial interests of certain private individuals (including mentally incapable adults) and estates.
- Visit www.attorneygeneral.jus.gov.on.ca/english/family/pgt

Income

Employment Insurance – Sickness Benefits

- Apply on-line at www.servicecanada.gc.ca or visit your local Service Canada office.

Ministry of Children, Community and Social Services – Ontario Works (OW)

- Provides temporary financial help to help cover the costs of basic needs and health benefits. Also helps people find, prepare for and keep a job.
- To find the Ontario Works office near you, visit www.mcsc.on.ca

Old Age Security (OAS) and Guaranteed Income Supplement (GIS)

- These programs offer financial help to those 65 years or older.
- For information about Old Age Security, visit www.servicecanada.gc.ca and search for ‘Old Age Security’.
- For information about Guaranteed Income Supplement, visit www.servicecanada.gc.ca and search for ‘Guaranteed Income Supplement’.

Ontario Disability Support Program (ODSP)

- Visit www.mcsc.gov.on.ca/en/mcsc/programs/social/odsp

Service Canada – Public Pensions

Canada Pension Plan (CPP) – Retirement Pension and Disability Benefits

- Visit www.servicecanada.gc.ca and search for ‘Canada Pension Plan’.

Veterans Affairs Canada

- Provides services and disability benefits to veterans and their families.
- Visit www.veterans.gc.ca

Insurance coverage

It is important to understand your insurance coverage, whether it is through your employer or private insurance. Contact your insurance company to see what financial help is available (for example: short-term or long-term disability or critical illness).

Medical items and services

Canada Revenue Agency - Tax Returns

- You may be able to claim medical expenses for yourself, your spouse/partner or children on your income tax return.
- For information about eligible expenses visit www.cra-arc.gc.ca/disability

City of Toronto Hardship Fund

- Financial help for Toronto residents (not on social assistance) to buy medical items.
- Visit www.toronto.ca and enter 'Hardship fund' in the search box (top right of page).

Government of Ontario - Assistive Devices Program (ADP)

- Provides funds to people with physical disabilities so they can buy medical equipment.
- Visit www.health.gov.on.ca/en/public/programs/adp/

Ministry of Children, Community and Social Services Ontario Works (OW) and Ontario Disability Support Program (ODSP)

- These programs provide some coverage for medical equipment and supplies. They may also help with medical transportation costs.
- For information about Ontario Works, visit www.mcscs.gov.on.ca and search for 'OW'.
- For information about Ontario Disability Support Program, visit www.mcscs.gov.on.ca and search for 'ODSP'.

Tax credits

Canada Revenue Agency

Disability Tax Credit

- A non-refundable credit that a person with a qualifying disability can claim to reduce income tax payable on their income tax return.
- Visit www.cra-arc.gc.ca/disability

Registered Disability Savings Plans (RDSP)

- A savings plan for people who are eligible for the disability tax credit.
- Visit www.cra-arc.gc.ca and search for 'Registered Disability Savings Plan'.

City of Toronto Property Tax and Water Rebate Programs

- Low-income seniors and low-income persons with a disability can apply for one-time or temporary funding to defer or cancel property tax increases or get a water rebate.
- Visit www.toronto.ca/taxes/property_tax/tax_relief.htm

Drug coverage

Drug companies

- You can call some drug companies to request coverage for compassionate reasons.

Drug Coverage.ca

- Information about reimbursement for prescription medications from private insurance, provincial or federal drug benefit programs.
- Visit www.drugcoverage.ca

Local pharmacies

- Ask your pharmacy if they have any special programs to help you find funding.

Ministry of Health and Long Term Care - Ontario Drug Benefit Program (ODB)

- Provides coverage for the cost of some prescription drugs to persons 65 years or older. Low-income seniors can apply for a co-payment reduction.
- Visit www.health.gov.on.ca and search for 'ODB'.

Ministry of Health and Long Term Care - Trillium Drug Program

- Provides coverage for the cost of some prescription drugs for persons under age 65, who have high drug costs in relation to their household income.
- Visit www.health.gov.on.ca and search for 'Trillium Drug Program'.
- Application kits are also available at your pharmacy.

Nutrition

Food Banks

- Provide food to those in need.
- Call 416-203-0050 to find your local food bank.

Special Diet Allowance

- Available for persons receiving Ontario Works (OW) or Ontario Disability Support Program (ODSP). Only certain medical conditions qualify.
- To apply, contact your OW or ODSP caseworker.

Other

City of Toronto - Emergency Energy Fund

- Funds for low-income Toronto residents (who are not on social assistance) who have received a disconnection notice or have had their heat disconnected.
- Visit www.toronto.ca

Financial abuse

Advocacy Center for the Elderly (ACE)

- A legal clinic for low income seniors.
- Visit www.advocacycentreelderly.org

Office of the Public Guardian and Trustee – Victim Support Line

- A toll free information line, available in many languages, that provides a range of services to victims of crime.
- Call toll free at 1-888-579-2888 or 416-314-2447 (Toronto).

Life Roles

Each person plays many roles in life. Your roles may include being a:

- spouse, parent, sibling, grandparent, or friend
- student, volunteer, employee, or employer (if any of these apply to you please see section on **Work or School** for more details)



After a stroke, it is normal to question whether you will be able to fulfill these roles again. You may wonder if you will be able to take part in your usual activities and support your family as you did before.

The stroke will also have an impact on your family. As your role changes, the roles of family members may need to change too.

With time, your daily routines and life roles will adjust to suit your strengths and abilities.

If you are having difficulty adjusting, it can help to talk to:

- your health care team
- other people living with stroke and their families
- a therapist



Questions about life roles

Having read the information in this section, consider the following questions.

- Has there been a change in my day-to-day roles since my stroke (for example: taking care of my children, doing things around the house or at work)?
- Do I need to learn new strategies and skills to manage day-to-day?
- If I have a pet, am I still able to take care of it?
- Have my relationships with my partner, children, family or friends changed?
- Is there someone I can talk to about these changes if I need to?
- Can I continue to take part in spiritual/faith-based activities?
- Is the place of worship I attend accessible?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about life roles

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

March of Dimes Canada

- Provides support, education, community programs for stroke survivors, their caregivers and families.
- Call the Warmline at 1-888-540-6666 or visit www.marchofdimes.ca

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources' and 'My roles and activities'.



Sex and Intimacy

Stroke can change your body and how you feel about yourself. This may affect your sexuality. It will take time to adjust to these changes. As you recover, sexual feelings and your desire for sex will gradually return.



Most people can resume a healthy sex life after stroke.

As you resume your sexual relationship, communication with your partner is important. Talk openly about how the stroke has affected both of you. Share your feelings. Discuss what sexual activity would be comfortable for you.

Open communication can help you and your partner overcome challenges and enjoy a loving, fulfilling relationship

If you are not ready for sex, you may simply enjoy being close to your partner. You can be intimate with touching, kissing and hugging.

Your sexual relationship may be different than it was before your stroke, but it's not over. Give yourself time to discover what works best for you as a couple.



Questions about sex and intimacy

Having read the information in this section, consider the following questions.

- Do I know if it is safe to have sex again?
- Do I know who to talk to about intimacy after my stroke (for example: equipment, different positions or medications)?
- If I am unable to have intercourse, do I know how to be intimate?
- If I am unable to speak after my stroke, do I know how best to express my feelings?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about sex and intimacy

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Aphasia Institute

- Call 416-226-3636 or visit www.aphasia.ca/shop and search for the pictographic book 'Intimacy and Relationships'.

Heart and Stroke Foundation

- Visit www.heartandstroke.ca. Click on 'Stroke', then 'Recovery and support'. Find 'Your Stroke Journey' in this section.
- Type in the search box: Your Stroke Journey: A Guide for People Living with Stroke

Stroke Foundation of New Zealand

- Read the booklet 'Intimacy After Stroke' at www.stroke.org.nz/resources/Sexuality-Booklet.pdf

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources' and 'My roles and activities'.

Special equipment

IntimateRider

- A small swing chair that improves sexual mobility.
- Visit www.intimaterider.com

Social Support

The effects of stroke may require you to make changes in your daily life. It can be helpful to talk with others who have had a stroke for support. Peer support groups give you a chance to:

- talk about your experiences
- learn from others
- get support from others who have had a similar experience

Join a peer support group. It can be helpful to see that you and your family are not alone.

You don't have to give up the hobbies or leisure activities you enjoyed before your stroke. Your Occupational Therapist can help you to adapt some activities and learn to use assistive devices. You may also wish to explore new interests. Many community and day programs offer social, recreational and exercise activities for people living with stroke.



Physical activity is a great way for you to:

- stay active
- reduce the risk of another stroke
- meet people

Some programs or activities you may want to consider might include:

- adult day programs
- pool programs
- bowling leagues
- golf
- chair fitness classes
- yoga, pilates or tai chi classes
- gardening programs
- fishing



Questions about social support

Having read the information in this section, consider the following questions.

- Are there activities I enjoy and want to continue but am not sure how to?
- Am I able to visit the same places as before (for example, social events or place of worship)?
- Do I want to join any social, recreational or fitness programs?
- Do I need any assistive devices so I can take part in leisure activities?
- Are my family and I coping well?
- Am I interested in joining a support group for people who have had a stroke?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about social support

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

Aphasia Institute

- Visit www.aphasia.ca and search for the pictographic books 'Your Life: Looking Back, Moving Forward' and 'Recreation and Leisure'.
- The Aphasia Institute also offers a variety of programs for people with aphasia to get involved with their community.

March of Dimes Canada

- Provides support, education, community programs for stroke survivors, their caregivers and families.
- Visit www.afterstroke.marchofdimes.ca

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources' then 'Social Supports' (Recreational Programs) or 'My health' (Keeping active) for lists of programs.

Peer support

Abilities Canada

- Connects people with disabilities to sport, recreation and other areas of interest.
- Visit www.abilities.ca

Heart and Stroke Foundation

Connect and talk with others living with heart disease or stroke.

- Visit www.heartandstroke.ca Search: Community of Survivors Facebook group

Stroke Recovery Canada®

- Support, education and community programs for people living with stroke, their caregivers and families.
- Call 1-888-540-6666 or visit www.strokerecoverycanada.com

Toronto Central Chapter	<ul style="list-style-type: none"> • For more information call 416-425-3463 ext 7714.
Toronto Pathfinders Chapter	<ul style="list-style-type: none"> • For people who had their stroke before age 50. For more information call 416-425-3463 ext 7714.

<p>Warmline – 1-888-540-6666</p>	<ul style="list-style-type: none"> • Confidential peer support for people living with stroke or caregivers. • The Peers Fostering Hope program offers in-hospital visits from trained volunteers who have experienced a stroke themselves to people with who have just had a stroke and their caregivers. Peers Fostering Hope can also be accessed through the Warmline.
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Stroke Survivors Tattler

- Provides weekly news, insights from stroke survivors, research updates and useful links to resources, support groups and stroke survivor blogs.
- Visit www.strokesurvivors.blogspot.ca

Together in Movement and Exercise (TIME)

- A group exercise program designed by physiotherapists, and led by fitness instructors in community centres across Canada.
- For more information or to find where TIME is offered, visit www.uhn.ca/TorontoRehab/PatientsFamilies/Clinics_Tests/TIME/Pages/about_us.aspx

Books about recovery

Many people have written books about their experiences after having a stroke. You may find it helpful to read about other people's journeys with stroke recovery.

You can search online for these types of books but here are a few:

Title	Author	Year
Stronger After Stroke: Your Roadmap to Recovery	Peter G. Levine	2012
My Stroke of Insight: A Brain Scientist's Personal Journey	Jill Bolte Taylor	2008
The Brain That Changes Itself: Stories of Personal Triumph from the Frontiers of Brain Science	Norman Doidge	2007
How to conquer to world with one hand and an attitude	Paul Berger	2002
One Hundred Names for Love: A Stroke, a Marriage, and the Language of Healing	Diane Ackerman	2011

Travelling

You may not be thinking about travelling immediately after your stroke but at some point you may consider taking a holiday. You may want to travel for rest and relaxation, to see new places, or visit family and friends.

After a stroke, it is important to check with your doctor before you travel.

Considering your needs and planning ahead can help you have a safe and enjoyable holiday. It may be helpful to speak with your health care team for suggestions to make travel easier. For example, you may want to consider:

- checking that your destination is accessible
- renting a wheelchair or scooter for long distances
- checking that there is safety equipment in the bathroom if needed
- any accommodations that can be made with the airline

Learn from the experience of others. You can get ideas and suggestions from other people who have had strokes about what has worked well for them while travelling. For example, you may find answers to your travel questions at a peer support group or online.

Questions about travelling

Having read the information in this section, consider the following questions.

- Do I know if it is safe for me to travel after my stroke?
- Is it safe for me to travel by car, train, boat or plane?
- Is there anything specific I need to be aware of when travelling after a stroke (for example: precautions, medications, vaccinations)?
- Do I know how to plan a safe trip?
- Can I make sure that my needs will be met at my destination (for example, equipment and accessibility needs)?

- Do I need to call ahead before I leave to ensure things are in place at my destination?
- Do I have travel insurance?
- As a caregiver, do I know what to do if something happens while we are away from home?



If you still have questions, use the 'Notes' section located at the back of this Guide to write them down. Talk to your health care team and family doctor about them at future appointments.

Resources about travelling

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

March of Dimes Canada – TravelAbility Travel Insurance

- A travel insurance program for people with physical disabilities and their families.
- Visit www.marchofdimes.ca. Click on 'Programs and Services', then 'Recreation/Accessible Travel'.

Travel and insurance providers

- A local travel agent or your insurance provider may be able to provide you with information on travel insurance.

Work and School

If you were working or going to school when you had your stroke, you may wonder if you will be able to go back.

Your ability to go back to work or school will depend on:

- how you feel
- how your stroke has affected you
- the type of work that you do

Your stroke may have affected your body and mind. As well as physical changes, you may:

- feel tired
- have memory loss
- have trouble concentrating
- find it hard to plan and organize tasks
- have changes with your vision
- find it hard to speak or understand someone else



Allow enough time for your recovery. Many things will get better with time.

Try to be patient with yourself. Try not to put pressure on yourself to perform at the same level you did before your stroke.

When you are ready to think about going back to work or school, talk with your health care team.

The following team members can help you identify your strengths and skills required to resume work or school:

- **Social Worker** – can help you find community resources and supports related to finances and employment.
- **Occupational Therapist (OT)** – can help you improve your memory, planning, organizing and fine motor skills. An OT can help you figure out the kind of workplace changes that should be made to support your return.
- **Vocational Rehabilitation Therapist** – will provide training in a trade or skill to help you return to paid work.
- **Doctor** – will advise you on any precautions to take when returning to work or school.

Depending on your abilities, you may need to change the way you work or study. For example, you may need to:

- learn to do things with one hand
- do certain tasks sitting down instead of standing

Your doctor and rehabilitation team can work with you to:

- decide when you are healthy enough to go back to work or to school
- discuss with your employer or teachers a plan to gradually return to work or school

Your employer is responsible for making reasonable accommodations to enable you to return to work if you are able to do the same job. If you are unable to do the same job, your rehabilitation team can help you consider different options.



Questions about work and school

Having read the information in this section, consider the following questions.

- Is returning to work or school important to me?
- Am I able to return to work or school?
- Do I know what things might get in the way of returning to work or school (for example: problems concentrating, fatigue, mobility or communication)?
- Do I need to be assessed for my ability to return to work or school?
- Do I know who to talk to about resuming classes?
- Do I need to see a vocational rehab therapist?
- Is my workplace or school accessible?
- Have I talked with my boss about what will be expected of me if/when I return to work?
- Does my work space need to be modified so I can return to work?
- Does my job need to be modified (for example: flexible hours, work from home or different responsibilities)?
- Do I know when I can return to work or school?
- If I can't return to my current job, do I know what other options I have (for example: train for another job, return to school, or retire)?
- I would like to volunteer. Do I know who to talk to about this?

If you still have questions, review the suggested resources and use the 'Notes' section at the back of this Guide to write them down. Talk to your health care team and family doctor.



Resources about work and school

The following resources may be helpful. To connect directly with an organization, see the 'Directory' at the end of the Guide for their contact information.

March of Dimes Canada – Employment Services

- Provides job training and helps people with disabilities find employment.
- Visit www.marchofdimes.ca. Click on 'Programs and Services', then 'Employment Services'.

Southwest Ontario Stroke Network – Return to Work Toolkit

Provides you, your family and health care providers with:

- Help to get through the process of returning to work
- Visit <http://swostroke.ca/rtw-self-assessment-introduction>

Toronto Central Healthline

- Visit www.torontocentralhealthline.ca. Click on 'Stroke Resources' and 'My roles and activities'.

Your Stroke Journey: A Guide for People Living with Stroke

- Visit www.heartandstroke.ca. Click on 'Stroke', then 'Recovery and support'. Find 'Your Stroke Journey' in this section.

Finding work and job training

Bridgepoint Health – Vocational Rehabilitation

- A day treatment program that helps people to return to work.
- Visit www.bridgepointhealth.ca/en/what-we-do/Outpatient-Care.asp

Government of Canada – Disability Vocational Rehabilitation Program

- A voluntary, government funded program that helps Canada Pension Plan disability benefit recipients return to work.
- Visit www.canada.ca and search for ‘Disability Vocational Rehabilitation Program’.

Link Up Employment Services for Persons with Disabilities

- Provides employment services for persons with disabilities throughout the Greater Toronto Area and York Region.
- Visit www.linkup.ca

Financial support (see also *Finances and Money* section)

Employment Insurance (EI)

- Provides temporary financial help to unemployed Canadians who have lost their job through no fault of their own, while they look for work or upgrade their skills.
- visit www.servicecanada.gc.ca

Ministry of Community and Social Services

Ontario Disability Support Program (ODSP)

- Provides support to help people with disabilities find and keep a job, and advance their careers.
- For more information visit www.ontario.ca/socialassistance
- To find the ODSP office near you, visit www.mcsc.on.ca and search for ‘ODSP Offices’.

Ontario Works (OW)

- Provides temporary financial help to help cover the costs of basic needs and health benefits. Also helps people find, prepare for and keep a job.
- For more information visit www.ontario.ca/socialassistance
- To find the Ontario Works office near you, visit www.mcass.on.ca and search for 'OW Offices'.

Volunteer opportunities

Charity Village

- An online community for people looking for work in the nonprofit sector. Search for jobs, learn skills and share information online.
- Visit www.charityvillage.com

Volunteer Toronto

- Connects people with volunteer opportunities in Toronto.
- Visit www.volunteertoronto.ca

Glossary of Terms

Activities of daily living (ADLs): Things we do each day, including personal care. Examples of ADLs are eating, washing and showering, grooming, walking, standing up from a chair and using the toilet.

Activity: A task or action done by a person. 'Activity limitations' refers to the difficulties that a person may have in doing certain activities.

Aneurysm: A bulging, weak area in the wall of a blood vessel (artery). The bursting of an aneurysm in a brain artery causes a hemorrhagic stroke.

Angiography or Angiogram: A test in which dye is injected into blood vessels which are then examined using X-rays. The test gives information about the condition of the blood vessels and detects if there are blood clots.

Anticoagulant: Medication used to prevent blood from clotting. These types of drugs are used to prevent ischemic stroke.

Antiplatelet agents: Medications that prevent platelets from binding together to form a blood clot. These medications are used to prevent ischemic stroke.

Aphasia: Loss of the ability to use or understand language because of an injury to the part of the brain that controls the ability to speak, understand, read and/or write.

Aspiration: When food, fluid or saliva goes into the airway leading to the lungs. This can result in an infection such as pneumonia.

Assistive technology: Technology designed to help a person to function and perform daily activities.

Atherosclerosis: Hardening or narrowing of the arteries caused by build-up of fatty deposits. This reduces blood flow through the artery and can cause a stroke.

Atrial fibrillation: Very fast, irregular pumping of the heart muscle in the upper chambers of the heart (the atria). As a result, the heart cannot pump blood around the body effectively and blood clots can form in the heart which may cause a stroke.

Cardiorespiratory fitness: A measure of how well the heart and lungs can supply oxygen to muscles during sustained activity. Good cardiorespiratory fitness means the heart can deliver oxygen to working muscles and the muscles can use the oxygen to work for long periods of time.

Carotid angioplasty or stenting: A procedure used to open narrowed carotid arteries to allow better blood flow to the brain. A small expandable tube (stent) is permanently inserted into the carotid artery to hold it open. After time, the cells in the blood vessel will grow through and around the stent to help hold it in place.

Carotid artery disease: Carotid arteries are the main blood vessels in the neck that supply blood to your brain. Carotid artery disease occurs when these arteries become narrowed or blocked. Carotid artery disease is a serious health problem because it can cause a stroke.

Carotid doppler: A non-invasive test that uses high frequency sound waves to determine the amount of blood flow through the blood vessels in the neck (carotid arteries) or the extent to which the vessels may be narrowed. It is also called a carotid ultrasound.

Carotid endarterectomy: An operation to unblock narrowed carotid arteries in your neck.

Cerebral hemisphere: One side of the brain.

Cerebral infarct: An area of damaged cells in the brain caused by a loss of blood flow to that area (an ischemic stroke).

Cognition: A word used to explain the ability to think. It includes mental activities such as remembering, paying attention, solving problems and making decisions.

Community reintegration: The ability to take part in meaningful activities of daily living, community interests and life roles after a stroke. The person with stroke, family, friends, stroke recovery associations, rehabilitation programs and the community are all important for successful community reintegration.

Comorbid condition: Other diseases or conditions a person may have in addition to the most recent health issues.

Computed Tomography (CT or CAT) scan: A test that uses X-rays to take a series of pictures of the brain or other body organs. It is one of the first tests done for someone suspected of having a stroke. A CT scan can usually identify whether a stroke was due to bleeding (hemorrhagic stroke) or a blockage (ischemic stroke).

Computed Tomography Angiogram (CTA): A test that uses X-rays to see blood flow in arteries throughout the body such as the brain, lungs, kidneys, arms and legs.

Computed Tomography Perfusion (CTP) scan: A special type of CT scan where a dye is injected into the blood vessels to show which areas of the brain are getting enough blood.

Day hospital: An outpatient setting where rehabilitation is provided by a team of health professionals.

Deep vein thrombosis: A clot that blocks the flow of blood in the deep veins of the leg, arm or abdomen.

Delirium: An abnormal mental state which can be caused by many things. Delirium may appear as confusion, fear, irritability, agitation and/or sleepiness.

Depression: Depression is a mood disorder that causes a lasting feeling of sadness and loss of interest. It's more than just feeling 'blue'. It affects how you feel, think and behave and can lead to a variety of emotional and physical problems. You may have trouble doing normal day-to-day activities, and depression may make you feel as if life isn't worth living. Depression isn't a weakness or something that you can simply 'snap out' of. It may require long-term treatment. Most people with depression feel better with medication, psychological counselling or both.

Diabetes: A disease in which the body does not make insulin or use it properly. Insulin is a hormone made by the pancreas that changes sugar and starch into the energy needed for daily life.

Disability: A physical or mental condition that limits a person's ability to function. A disability may affect such things as vision, walking, learning or speaking.

Dysarthria: Inability to speak clearly due to weakness of the muscles needed to form words and sounds.

Dysphagia: Difficulty swallowing due to weakness of the muscles of the mouth or throat.

Echocardiogram (Echo, 2D Echo, or Cardiac Echo): Painless ultrasound waves are used to take a picture of the heart and the circulating blood. The ultrasound probe may be placed on the chest (Trans-Thoracic Echocardiogram or TTE) or deep in the throat (Trans-Esophageal Echocardiogram or TEE).

Electrocardiogram (ECG or EKG): A test that records the electrical activity of the heart. It is used to find abnormal heart rhythms, which can affect how well blood flows through the body. When blood does not flow well there is a greater risk of developing a blood clot that can lead to a stroke.

Electroencephalogram (EEG): A test that records the electrical activity of the brain from electrodes attached to the scalp.

Embolic stroke: A stroke caused by a blood clot that has come from somewhere else in the body (an embolus).

Embolus: A fragment of a blood clot that breaks away and gets stuck in an artery blocking blood flow.

Emergency medical services (EMS): Often called paramedics or first responders. They complete the initial assessment during medical emergencies and provide transport to hospital for persons with illnesses and injuries who require further medical attention.

Emotional lability: Bursts of extreme emotions (such as laughing or crying) that a person cannot control. There is often no real cause for the emotional response.

Enteral tube: Delivery of nutrients directly into the digestive system via a tube.

Exercise therapy: Using exercises as treatment to improve physical, cognitive and/or speech abilities.

Gait: A manner of walking, stepping or running.

Hemiparesis: Weakness on one side of the body due to a stroke. The degree of weakness can vary from mild, moderate to severe. This may also be associated with changes in feeling, numbness or tingling.

Hemiplegia: Complete loss of movement on one side of body due to a stroke. Sometimes referred to as a complete paralysis.

Hemorrhagic stroke: A stroke caused by the rupture of an artery within the brain.

- **Intracerebral hemorrhage** occurs when a diseased blood vessel within the brain bursts, allowing blood to leak inside the brain. The word ‘intracerebral’ means within the cerebrum or brain.
- **Subarachnoid hemorrhage** occurs when a blood vessel ruptures and blood fills the subarachnoid space surrounding the brain (the space between the thin tissues that surround the brain). Symptoms may include a sudden, intense headache, neck pain, and nausea or vomiting.

Holter monitor: A portable device worn around the neck and shoulders that records the electrical activity of the heart. A holter monitor is similar to an electrocardiogram but allows the information to be recorded over longer periods of time (24 to 48 hours) either in hospital or at home.

Hyperlipidemia: Also known as high cholesterol. A condition where there is high levels of lipids (or fats) in the blood. It can be due to family history and/or the types of food a person eats.

Hypertension: Also known as high blood pressure. Blood pressure is high when it is 140 / 90 or above on repeated readings. High blood pressure is the number one risk factor for stroke.

Impairment: A problem with a body structure (such as loss of a limb) or the way a body part functions (such as hemiplegia).

Infarction: Death of cells in an organ (such as the brain or heart) due to lack of blood and oxygen to the area.

International normalized ratio (INR): A blood test that measures the ability of blood to clot properly. This ratio can be used to assess both bleeding and clotting abilities. The INR is commonly used to monitor the effectiveness of anticoagulants such as warfarin.

Ischemia: Lack of adequate blood flow to part of the body (such as the brain) because of blockage or constriction of the arteries that supply it.

Lipid: Another word for “fat”.

Lobe: A main part of the brain. There are four lobes: frontal, parietal, temporal and occipital.

Long-term care home (LTC): A facility that provides ongoing nursing care to residents who need help with activities of daily living. People may live in LTC homes when it becomes difficult for them to manage in their own homes. Commonly called a nursing home.

Magnetic Resonance Angiogram (MRA): A newer imaging technique used to detect any blockage or hardening of the arteries in the neck or brain. Similar to MRI, MRA uses a strong magnetic field and radio waves to make an image of the blood vessels.

Magnetic Resonance Imaging (MRI): A test used to examine the brain and other parts of the body. MRI uses a non-harmful magnetic field and radio waves to make a three-dimensional image of a part of the body such as the brain. These images are more detailed than CT scans. Sometimes called nuclear magnetic resonance or NMR.

Mobility: The ability to move. This can refer to walking, standing up, or transferring from one surface to another.

Naso-gastric tube (NG tube): A tube that is passed through the nose down the throat into the stomach to allow for feeding when a person has swallowing problems.

Neglect: Failure to attend to or respond to one side of the body or environment due to stroke.

Non-invasive test: A test that does not involve tools that break the skin or enter the body.

Obstructive sleep apnea: A problem with breathing that includes heavy snoring and interrupted breathing during sleep. It is a risk factor for stroke.

Paralysis: Loss of movement in a part of the body.

Perception: The way the brain interprets what one sees.

Percutaneous endoscopic gastrostomy (PEG): A form of feeding in which nutrition is delivered through a tube that is surgically inserted into the stomach or intestine through the skin. Also known as a gastric tube.

Plaque: A fatty buildup of cholesterol and calcium inside an artery.

Power of Attorney (POA): A legal agreement to appoint another person to make financial, property and health decisions if someone is not able to make his or her own decisions. The appointed person is called a Substitute Decision Maker (SDM) and makes decisions about personal matters in the best interests of that person.

Pulmonary embolism: A serious medical condition caused by a blockage of the pulmonary artery (which carries blood from the heart to the lungs), usually by a blood clot or fat.

Recovery: The process a person experiences to restore health, wellness and function after illness.

Rehabilitation: The process of restoring health, wellness, function and independence after illness through therapy provided by a team of health professionals.

- **Inpatient rehabilitation:** Therapy offered in a hospital setting.
- **Outpatient rehabilitation:** Therapy offered in a community setting such as a day hospital, rehabilitation centre or clinic.

Respite care/services: Short term and temporary care for persons with stroke to allow caregivers time away from their caregiving responsibilities.

Spasticity: Increase in muscle tone when muscles are constantly tight or stiff. This can lead to pain, loss of range of motion and difficulty with function.

Statins: Group of medications used to lower cholesterol.

Stenosis: Narrowing of an artery due to build-up of plaque on the inside wall of an artery.

Stroke prevention clinic: An outpatient clinic that provides stroke prevention services, including early assessment, risk factor management, education and follow up to help prevent another stroke or TIA.

Stroke unit: A specialized hospital unit with designated beds for stroke care. A stroke unit has a team of health professionals with expertise in stroke care and processes in place to enable better outcomes for persons with stroke.

Task-specific training: Exercises that involve repeating a task or part of the task to improve one's skill level.

Thrombolytic: A medication that dissolves or splits up a blood clot.

Tissue Plasminogen Activator (tPA): A clot-busting drug used to treat heart attack and ischemic stroke. It is most effective if given soon after the symptoms of a stroke begin.

Tone: Healthy muscles are never fully relaxed. They have some level of tension or resistance to movement that is called muscle tone. Too little muscle tone describes muscles that are floppy. Too much muscle tone describes muscles that are tight and have spasms (spasticity).

Transient Ischemic attack (TIA): A temporary interruption of blood supply to the brain. Often called a “mini-stroke”. Symptoms may last from a few minutes to up to 24 hours and leave no permanent deficit. It is still important to get immediate medical help if you have a TIA.

Videofluoroscopic swallow study: A test done by a speech-language pathologist for a person who has trouble swallowing. An X-ray is taken of the person as they swallow food and drink with different textures. This test helps determine if the person can safely eat and drink.

Glossary adapted from Lindsay MP, Gubitz G, Bayley M, Hill MD, Davies-Schinkel C, Singh S, and Phillips S. Canadian Best Practice Recommendations for Stroke Care (Update 2010). On behalf of the Canadian Stroke Strategy Best Practice and Standards Writing Group. 2010; Ottawa, Ontario Canada: Canadian Stroke Network. Appendix 5. For a more comprehensive list of stroke related terms, please click on: www.strokebestpractices.ca

Directory

211 Toronto Community Connection

Find Help Information Services
1 St Clair Avenue West, Suite 1000
Toronto, Ontario M4V 1K6
Tel: 2-1-1
www.211toronto.ca

Abilities Canada

255 Duncan Mill Road, Suite 803
Toronto, Ontario M3B 3H9
Tel: (416) 421-7944
www.abilities.ca

Active Living Alliance for Canadian with a Disability

c/o Canadian Paralympic Committee
85 Plymouth Street, Suite 100
Ottawa, Ontario K1S 3E2
www.ala.ca

Advocacy Center for the Elderly

2 Carlton Street, Suite 701
Toronto, Ontario M5B 1J3
Tel: (416) 598-2656
www.advocacycentreelderly.org

Alcoholics Anonymous (Greater Toronto Area)

234 Eglinton Avenue East, Suite 202
Toronto, Ontario M4P 1K5
Tel: (416) 487-5591
www.aatoronto.org

Aphasia Institute

73 Scarsdale Road
North York, Ontario M3B 2R2
Tel: (416) 226-3636
www.aphasia.ca

Baycrest Center

Brain Health Center
3560 Bathurst Street
Toronto, Ontario M6H 2V3
Tel: (416) 784-3600
www.assistivetechologyclinic.ca

Bellwoods Centres for Community Living

300 Shaw Street
Toronto, Ontario M6J 2X2
Tel: (416) 530-1448
www.bellwoodscentres.org

Bridgepoint Active Healthcare

1 Bridgepoint Drive
Toronto, Ontario M4M 2B5
Tel: (416) 461-8252
www.bridgepointhealth.ca

Canada Mortgage and Housing Corporation

Contact your local CMHC office.
Tel: (800) 668-2642.
www.cmhc-schl.gc.ca

Canada Revenue Agency

1 Front Street West
Toronto, Ontario M5J 2X6
Tel: (800) 959-8281
www.canada.ca

Canadian Cancer Society

Smokers' Helpline
Tel: (877) 513-5333
www.smokershelpline.ca

Canadian Centre on Substance Use and Addiction

75 Albert Street, Suite 500
Ottawa, Ontario K1P 5E7
Tel: (613) 235-4048
www.ccdus.ca

Canadian Caregiver Coalition

110 Argyle Avenue
Ottawa, Ontario K2P 1B4
Tel: (888) 866-2273
www.ccc-ccan.ca

Diabetes Canada

522 University Avenue, Suite 1400
Toronto, Ontario M5G 2R5
Tel: (416) 363-3373
www.diabetes.ca

Canadian Hearing Society

271 Spadina Road
Toronto, Ontario M5R 2V3
Tel: (416) 928-2535
www.chs.ca
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Canadian Partnership for Stroke Recovery

600 Peter Morand Crescent, Suite 206
Ottawa, Ontario K1G 5Z3
Tel: (613) 852-2303
www.canadianstroke.ca

Canadian Red Cross

21 Randolph Avenue
Toronto, Ontario M6P 3X5
Tel: (416) 480-2500
www.redcross.ca

Canadian Sleep Society

Center for Sleep and Human Performance
Faculty of Medicine, University of Calgary
2500 University Drive NW
Calgary, Alberta T2N 1N4
Tel: (403) 220-5110
www.css-scs.ca

Canadian Stroke Network

Getting on With the Rest of Your Life After Stroke
222 Queen Street, Suite 1402
Ottawa, Ontario K1P 5V9
Tel: (613) 691-4030
www.canadianstrokenetwork.ca

Caregiver Action Network

1150 Connecticut Avenue NW, Suite 501
Washington, DC 20036-3904 USA
Tel: (202) 454-3970
www.caregiveraction.org

Centre for Addiction and Mental Health

175 College Street
Toronto, Ontario M5T 1P7
Tel: (416) 535-8501
www.camh.ca

Centre for Independent Living In Toronto Inc

365 Bloor Street E, Suite 902
Toronto, Ontario M4W 3L4
Tel: (416) 599-2458
www.cilt.ca

Charity Village

8170 Lawson Road
Milton, Ontario L9T 5C4
Tel: (800) 610-8134
www.charityvillage.com

City of Toronto

Metro Hall
214 Wellington Street West
Toronto, Ontario M5V 0L9
Tel: (416) 338-8888
www.toronto.ca

City of Toronto Revenue Services

5100 Yonge Street
Toronto, Ontario M2N 5V7
Tel: (416) 392-CITY (2489) or 311
www.toronto.ca

Community Health Centres

Association of Ontario Health Centres
970 Lawrence Avenue W, Suite 500
Toronto, Ontario M6A 3B6
Tel: (416) 236-2539
www.aohc.org

Community Navigation and Access Program

WoodGreen Community Services
815 Danforth Avenue, Suite 100
Toronto, Ontario M4J 1L2
Tel: (416) 217-2077
www.4seniors.org

Dietitians of Canada

480 University Avenue, Suite 604
Toronto, Ontario M5G 1V2
Tel: (416) 596-0857
www.dietitians.ca

Disability Vocational Rehabilitation Program

Canada Pension Plan (CPP)
Go to the Service Canada Centre location closest to your home.
Tel: (800) 277-9914
www.canada.ca

Drive Again

1355 Artisans Court
 Burlington, Ontario L7L 5Y2
 Tel: (416) 640-0292 or (888) 640-0292
www.driveagain.ca

Driver Rehab Therapist

Tel: (416) 807-7155
www.driverrehabtherapy.com

Eatracker.ca

480 University Avenue, Suite 604
 Toronto, Ontario M5G 1V2
www.eatracker.ca

Employment Insurance Benefits

Go to the Service Canada Centre
 location closest to your home.
www.canada.ca

**Employment and Social
 Development Canada**

Opportunities Fund for Persons
 with Disabilities
 Go to the Service Canada Centre
 location closest to your home.
www.canada.ca

Family Service Toronto

128 Sterling Road, Suite 202
 Toronto, Ontario M6P 0A1
 Tel: (416) 595-9230
www.familyservicetoronto.org

**General Motors Canada Mobility
 Program**

Tel: (800) GM-DRIVE - (800) 463-7483
www.programs.gm.ca

Government of Canada

Canada Old Age Security Pension (OAS)
 Canada Pension Plan (CPP)
 Go to the Service Canada Centre
 location closest to your home.
www.canada.ca

Government of Ontario

A Guide to Advance Care Planning
www.ontario.ca/page/seniors-plan-for-the-future

Government of Ontario

Ontario Drug Benefit Program (ODB)
www.ontario.ca

Halton Aphasia Centre

1405 North Service Rd E
 Oakville, Ontario L6H 1A7
 Tel: (905) 875-8474
www.h-pcap.com

Health Canada

Address Locator 0900C2
 Ottawa, Ontario K1A 0K9
 Tel: (613) 957-2991 or Toll free:
 (866) 225-0709
www.canada.ca

Health Canada

Quite4Life Tobacco Control Program
Postal Locator: 0301A
Ottawa, Ontario K1A 0K9
Tel: (416) 954-9825 or (866) 318-1116
www.canada.ca

Heart and Stroke Foundation

110-1525 Carling Ave
Ottawa, Ontario K1Z 8R9
Tel: (888) 473-4636
www.heartandstroke.ca

Home and Community Care

Tel: 310- 2222 (no area code is needed)
Locate your local office at:
www.healthcareathome.ca

Housing Connections

176 Elm Street
Toronto, Ontario M5T 3M4
Tel: (416) 397-7400
www.housingconnections.ca

Hypertension Canada

3780 14th Avenue, Suite 211
Markham, Ontario L3R 9Y5
Tel: (905) 943-9400
www.hypertension.ca

International Society for Augmentative and Alternative Communication

312 Dolomite Drive
North York, Ontario M3J 2X4
Tel: (905) 850-6848
www.isaac-online.org

Intimate Rider

16801 Industrial Circle
Prior Lake, MN 55372
Tel: (952) 873-6136
www.intimaterider.com

Link Up Employment Services for Persons with Disabilities

3100 Steeles Avenue West, Suite 104
Vaughan, Ontario L4K 3R1
Tel: (416) 413-4922
www.linkup.ca

March of Dimes Canada

Stroke Recovery Canada
10 Overlea Boulevard
Toronto, Ontario M4H 1A4
Tel: (416) 425-3463
www.marchofdimes.ca

March of Dimes Canada

Assistive Devices Program (ADP)
291 King Street, 3rd Floor
London, Ontario N6B 1R8
Tel: (519) 642-3700 or (866) 765-7237
www.marchofdimes.ca

March of Dimes Canada

Home & Vehicle Modification Program
 291 King Street, 3rd Floor
 London, Ontario N6B 1R8
 Tel: (877) 369-4867
www.marchofdimes.ca

March of Dimes Canada

Aphasia and Communication
 Disabilities Program
 13311 Yonge Street, Suite 202
 Richmond Hill, Ontario L4E 3L6
 Tel: (905) 773-7758 Ext 6216 or
 (800) 567-0315
www.marchofdimes.ca

March of Dimes Canada and Ingle International

TravelAbility Travel Insurance
 460 Richmond Street West, Suite 200
 Toronto, Ontario M5V 1Y1
 Tel: (416) 642-8254 or (866) 598-3888
www.inglegroups.com/mod

MedicAlert Foundation Canada

895 Don Mills Road, Suite 600
 North York, Ontario M3C 1W3
 Tel: (800) 668-1507
www.medicalert.ca

Ministry of Health and Long-Term Care

www.health.gov.on.ca

Ministry of Children, Community and Social Services

Contact your local Service Ontario
 Centre
www.mcscs.gov.on.ca

Ministry of Health and Long-Term Care

ConnexOntario
 685 Richmond Street, Suite 200
 London, Ontario N6A 5M1
 Tel: (866) 531-2600
www.connexontario.ca

Ministry of Health and Long-Term Care

Ontario Public Drug Programs
 Contact your local Service Ontario
 Centre
www.health.gov.on.ca

Ministry of Health and Long-Term Care

Trillium Drug Program
 PO Box 337, Station D
 Etobicoke, Ontario M9A 4X3
 Tel: 416-642-3038 or 1-800-575-5386
www.health.gov.on.ca

**Ministry of the Attorney General
Victim Support Line**

700 Bay Street, 3rd Floor
Toronto, Ontario M5G 1Z6
Tel: (416) 314-2447 or (888) 579-2888
www.attorneygeneral.jus.gov.on.ca

**Ministry of the Attorney General
Office of the Public Guardian and
Trustee**

595 Bay Street, Suite 800
Toronto, Ontario M5G 2M6
Tel: (416) 314-2692
www.attorneygeneral.jus.gov.on.ca

Ministry of Transportation

77 Wellesley Street W, Box 589
Toronto, Ontario M7A 1N3
Tel: (416) 235-1773 or (800) 268-1481
www.mto.gov.on.ca

Mount Sinai Hospital

Wasser Pain Management Centre
600 University Avenue
Toronto, Ontario M5G 1X5
Tel: (416) 586-4800
www.mountsinai.on.ca

**National Institutes of Health
Dietary Approaches to Stop
Hypertension**

National Heart, Lung, and Blood Institute
31 Center Drive, Building 31
Bethesda, MD 20892 USA
www.dashdiet.org

National Stroke Association

9707 East Easter Lane, Suite B
Centennial, CO 80112 USA
Tel: (800) 787-6537
www.stroke.org

Ontario Association of Food Banks

555 Richmond Street West, Suite 501
Toronto, Ontario M5V 3B1
Tel: (416) 656-4100
www.oafb.ca

**Ontario Association of Social
Workers**

410 Jarvis Street
Toronto, Ontario M4Y 2G6
Tel: (416) 923-4360
www.oasw.org

**Ontario Association of Speech-
Language Pathologists &
Audiologists**

410 Jarvis Street
Toronto, Ontario M4Y 2G6
Tel: (416) 920-3676 or (800) 718-6752
www.osla.on.ca

Ontario Brain Injury Association

3550 Schmon Parkway, 2nd Floor
Thorold, Ontario L2V 4Y6
Tel: (905) 641-8877 or (800) 263-5404
www.obia.ca

Ontario Community Support Association

970 Lawrence Ave W #104
North York, ON M6A 3B6
Tel: (416) 256-3010
www.ocsa.on.ca

Ontario Healthcare Connect

Tel: (800) 445-1822
www.ontario.ca/healthcareconnect

Ontario Retirement Communities Association

2401 Bristol Circle, Suite 202
Oakville, Ontario L6H 5S9
Tel: (905) 403-0500 or (888) 263-5556
www.orcaretirement.com

Ontario Sleep Clinics

790 Bay Street, Suite 800
Toronto, Ontario M5G 1N8
Tel: (416) 837-8181 or (647) 479-2156
www.sleepontario.com

PACE Independent Living

970 Lawrence Avenue West, Suite 210
Toronto, Ontario M6A 3B6
Tel: (416) 789-7806
www.pace-il.ca

Rothbart Centre for Pain Care

4646 Dufferin St
North York, Ontario M3H 5S4
Tel: (416) 512-6407

Saint Elizabeth Health Care

90 Allstate Parkway, Suite 300
Markham, Ontario L3R 6H3
Tel: (905) 940-9655
www.saintelizabeth.com

Saint Elizabeth Health Care

Driver Assessment and Training
100 Tempo Avenue, Suite 330
North York, Ontario M2H 2N8
Tel: (416) 398-1035
www.saintelizabeth.com

Savaria Vehicle Group

2 Walker Drive
Brampton, Ontario L6T 5E1
Tel: (905) 799-5544
www.wheelchairvans.ca

Shoppers Home Health Care

243 Consumers Road
Toronto, Ontario M2J 4W8
www.shoppershomehealthcare.ca

Speak Up

Annex D, Saint Vincent Hospital
60 Cambridge St, Annex D
Ottawa, ON, K1E 7A5
www.advancecareplanning.ca

Southwestern Ontario Stroke Network

London Health Sciences Centre
University Hospital – Room ALL 139 F
339 Windermere Road
London, Ontario N6A 5A5
Tel: (519) 685-8500
www.swostroke.ca

Stroke Association (UK)

240 City Road
London EC1V 2PR
Tel: 020 7566 0300
www.stroke.org.uk

Stroke Foundation of New Zealand

P O Box 12482
95-99 Molesworth Street
Wellington, New Zealand
Tel: 0800 STROKE (0800 78 76 53)
www.stroke.org.nz

Stroke Network

PO Box 492
Abingdon, MD 21009 USA
www.strokenetwork.org

Guide for Stroke Recovery

Toronto Stroke Networks
www.strokerecovery.guide

Stroke Survivors Tattler

www.stroke-survivors.blogspot.ca

St. Michael's Hospital

Outpatient Voice & Swallowing Clinic
30 Bond Street
8th Floor Cardinal Carter, Room 8-167
Toronto, Ontario M5B 1W8
Tel: (416) 864-6060 x5282
www.stmichaelshospital.com

Sunnybrook Health Sciences Centre

2075 Bayview Ave
Toronto, Ontario M4N 3M5
Tel: (416) 480-6100
www.sunnybrook.ca

Toronto Rehabilitation

550 University Avenue
Toronto, Ontario M5G 2A2
Tel: (416) 597-3422
www.uhn.ca

The Scarborough Hospital Regional Crisis Programs

3030 Birchmount Road
Scarborough, Ontario M1W 3W3
Tel: (416) 495-2891
www.tsh.to

Toronto Western Hospital Swallowing Clinic

399 Bathurst Street
East Wing - 4th Floor
Toronto, Ontario M5T 2S8
Tel: (416) 603-5997
www.uhn.ca

Taking Charge of Your Stroke Recovery – Canadian Stroke Best Practices

Patient and Family Tools
Tel: (888) 473-4636
www.strokebestpractices.ca

The Care Guide Source for Seniors

9 Cedarview Drive
Toronto, Ontario M1C 2K5
Tel: (416) 287-2273
www.thecareguide.com

The Family Caregiver

www.thefamilycaregiver.com

The Sleep Management Group

www.sleepmanagement.ca

Tobias House Attendant Care

695 Coxwell Avenue, Suite 611
Toronto, Ontario M4C 5R6
Tel: (416) 690-3185
www.tobiashouse.ca

Together in Movement and Exercise

Find your nearest community centre at:
[www.uhn.ca/TorontoRehab/
PatientsFamilies/Clinics_Tests/TIME/
Documents/TR_PF_CC_TIME_Listings.pdf](http://www.uhn.ca/TorontoRehab/PatientsFamilies/Clinics_Tests/TIME/Documents/TR_PF_CC_TIME_Listings.pdf)

Toronto Academic Pain Medicine Institute

76 Grenville Street
Toronto, Ontario M5S 1B2
Tel: (416) 323-6269
www.tapmipain.ca

Toronto Ride

140 Merton Street
Second Floor
Toronto, Ontario M4S 1A1
Tel: (416) 481-5250
www.torontoride.ca

Toronto Rehab – Bickle Centre Augmentative and Alternative Communication Clinic

130 Dunn Ave
Toronto, Ontario M6K 2R8
Tel: (416) 597-3422
www.uhn.ca

Toronto Sleep Institute

586 Eglinton Avenue East, Suite 507
Toronto, Ontario M4P 1P2
Tel: (416) 488-6980
www.medsleep.com

Toronto Transit Commission

Wheel-Trans (TTC)

1900 Yonge Street
Toronto, Ontario M4S 1Z2
Tel: Customer Service (416) 393-4111;
Reservations (416) 393-4222
www.ttc.ca/WheelTrans

Universal Motion

WoodGreen Community Services
120 St Regis Crescent South
North York, Ontario M3J 1Y8
Tel: (416) 398-4255 or (877) 899-0699
www.universalmotion.com

Unlock Food

480 University Avenue, Suite 604
Toronto, Ontario M5G 1V2
Tel: (877) 510-5102
www.unlockfood.ca

Veterans Affairs Canada

PO Box 6000
Matane, Quebec G4W 0E4
Tel: (866) 522-2122
www.veterans.gc.ca

Victorian Order of Nurses (VON)

2315 St. Laurent Boulevard, Suite 100
Ottawa, Ontario K1G 4J8
Tel: (613) 233-5694
www.von.ca

Volunteer Toronto

344 Bloor St West, Suite 404
Toronto, Ontario M5S 3A7
Tel: (416) 961-6888
www.volunteertoronto.ca

West Park Healthcare Centre

82 Buttonwood Avenue
Toronto, Ontario M6M 2J5
Tel: (416) 243-3600
www.westpark.org

