

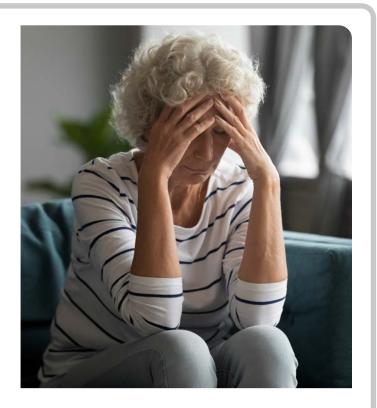


let's talk about

Post-Stroke Depression

About 30% of people who have a stroke get depressed. It can occur right away, or months or even years later. Depression, which can be a serious complication, can result from a biochemical change in the brain due to stroke or from an emotional reaction to one. If left untreated, it can affect quality of life and make post-stroke recovery difficult.

Post-stroke depression (PSD) — a feeling of hopelessness that interferes with functioning and quality of life — is largely unrecognized, underdiagnosed and under-treated.



Common symptoms include:

- · Depressed mood, called anhedonia
- Persistent sad, anxious or empty feelings
- Significant fatigue/lack of energy
- Lack of motivation
- Social withdrawal
- Problems concentrating/remembering details
- Difficulty finding enjoyment in anything
- Sleep disturbances
- Irritability
- Increase or decrease in appetite and eating patterns
- Feelings of helplessness, hopelessness and/or worthlessness
- Aches, pains and digestive problems that don't ease with treatment
- · Suicidal thoughts

Several factors can predict whether you're at risk for post-stroke depression, including:

- A history of depression
- · Physical disability
- Stroke severity
- · Cognitive impairment
- Previous stroke
- A family history of psychiatric conditions
- Being a woman
- Lack of family and social support after stroke
- Anxiety after stroke

Diagnosis

Diagnosing PSD can be challenging because stroke symptoms can mask signs of depression. Your health care professional should evaluate you for depression during a follow-up visit. Be open and honest and explain what you are experiencing. Include your caregiver or family member in these conversations, as it may be difficult for you to easily identify signs of depression.

(continued)



Post-Stroke Depression

Treatment

Because of the complexity of post-stroke depression several treatments should be tried to determine patient-specific usefulness.

- Antidepressants: These medications should be closely monitored for their effectiveness.
 Antidepressants may help survivors enjoy life again.
 Consult with a psychiatrist to find one that works for you or your loved one.
- Psychotherapies: Cognitive behavioral therapy, motivational interviewing and supportive psychosocial intervention may be helpful. In addition, patient education, counseling and social support may all be added as components of a treatment plan.
- Stroke support groups: Finding a local group can be beneficial. You can connect with other stroke survivors and share your story. You can also learn



of resources and services in your community to help make your post-stroke journey easier.

• Exercise program: If you have been cleared to exercise, a structured exercise program for at least 4 weeks complementary to other treatment might also help treat your post-stroke depression.

HOW CAN I LEARN MORE?

- 1 Call 1-888-4-STROKE (1-888-478-7653) or visit **stroke.org** to learn more about stroke or find local support groups.
- Sign up for our monthly Stroke Connection e-news for stroke survivors and caregivers at StrokeConnection.org.
- 3 Connect with others who have also had an experience with stroke by joining our Support Network at stroke.org/SupportNetwork.

Do you have questions for your doctor or nurse?

Take a few minutes to write down your questions for the next time you see your health care professional.

For example:

Will my depression ever get better?

MY QUESTIONS:

We have many other fact sheets to help you make healthier choices, manage your condition or care for a loved one. Visit stroke.org/LetsTalkAboutStroke to learn more.

Nationally sponsored by:

