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Name – Sabiha Ahmed

Student Number – 2438382

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Lecturer's Name – Emmanuel Asante

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Introduction

Stroke Definition – “Strokes happen when a blood clot or broken vessel prevents blood from getting to your brain” (Cleveland Clinic 2025). The Signs of a stroke are sudden numbness or weakness in the face, arm, legs especially on one side of the body, sudden confusion, trouble speaking, or difficulty understanding speech, sudden trouble seeing in one or both eyes, sudden trouble walking, dizziness, loss of balance or lack of coordination, Sudden severe headache with no known cause.

Symptoms

Stroke symptoms come on suddenly and require immediate emergency medical attention. The FAST acronym helps to recognise the symptoms which are Face drooping, Arm weakness, Speech difficulties and time to call emergency services.

Levels of the incidence that demonstrates the severity of the health issue both worldwide and UK statistics

With approximately 11.9 million incident causes and 93.8 million prevalent cases in 2021. "Stroke mortality declined by 2.60 % overall, with a rise in male mortality and decrease in female mortality" [Elsevier Inc 2025]. Stroke is a major cause of death and disability worldwide so one in four people will have a stroke at some point in their lives with over 60% of those being affected being under 70. Every five minutes 100,000 strokes happen in the UK.

What are the different approaches used to measure and monitor these diseases?

The different approaches used to measure and monitor a stroke is by doing a clinical assessment this is to assess severity and symptoms. Another approach is by imaging this can be CT scans which identify bleeding or early changes an MRI detects brain tissue damage and blood flow. A few other approaches used are tracking blood pressure, heart rate, oxygen levels and temperature. "These tests can show what type of stroke you've had" (NHS 2019).

Explain how this disease is controlled

A stroke is controlled to reduce **Mortality** rates that are associated with this disease these measures include primary prevention this is reducing risk factors such as hypertension, high cholesterol, smoking and diabetes through lifestyle modifications and medications. "Stroke remains a leading cause of mortality and long-term disability worldwide, necessitating prompt and effective management strategies to optimize patient outcomes" (Madu, C.S and Ajibade, VM 2025). Another way is to improve access to timely and effective treatments such as thrombolysis which is a clot busting drug and mechanical thrombectomy to minimize brain damage and improve survival. Preventing recurrent strokes through medication like antiplatelet agents, anticoagulants and lifestyle changes are ways a stroke is controlled. A stroke is focused on controlling burden of disability and **Morbidity** that are associated with this disease these measures include an early diagnosis and treatment this is recognizing the stroke symptoms quickly and then getting urgent and fast access to medical care to minimize brain damage and improve functional outcomes. Another measure used to control a stroke is providing rehabilitation programs so that motor skills can improve such as speech, cognitive function and activities that encourage day to day tasks therefore reducing long term disability. Managing complications allows pneumonia, urinary tract infections, pressure ulcers and depression to be avoided and it reduces the quality of life. Support

services are also available for people who have survived a stroke and it ensures that the families are given support to cope with the physical, emotional and social challenges of a stroke. To measure the **surveillance** of a stroke it involves systematic collecting, analysis and interpretation of data on stroke incidence, prevalence, risk factors, treatment patterns and the outcomes. The purpose of stroke surveillance is to monitor trends this is tracking changes in stroke rates and outcomes over time to assess the effectiveness of prevention and treatment efforts. Another purpose of stroke surveillance is to identify who the high risk groups are this can be identified where populations or communities with higher stroke rates or that have poorer outcomes to target interventions and resources.

What are the consequences of this illness on people in the community?

The consequences of a stroke on people in the community are that hospitals and clinics are going to be facing increased pressure due to the high incidence of strokes which can therefore lead to longer waiting times for treatment and shortages of specialized medical staff such as neurologists and rehabilitation therapists. **"On the other hand, lifestyle factors such as smoking, diet, and exercise significantly contribute to the excess risk of stroke in patients with low SES" (British Journal of General Practice 2026).** Another consequence is there will be gaps in rehabilitation service gaps which means limited availability of rehabilitation centres and therapists can result in delays accessing crucial post stroke care and hindering recovery and it also increases the risk of long term disability. There also can be social services demands such as home healthcare, transporting assistance, support groups and that can place a strain on community resources and might require increased funding.

What health and social care support services are required to meet the needs of individuals affected by this condition within the community?

The health and social care support services needed to meet the needs of individuals affected by a stroke within the community are rehabilitation services these are physical therapy, occupational therapy, and speech therapy to help regain lost functions and improve mobility, coordination and communication skills. **"Social care services, such as residential care homes and day care centres, offer accommodation and activities for those needing assistance, promoting social interaction and wellbeing" {Care Learning 2026}.** Another is home healthcare services these are nursing care, personal care assistance, medication management provided in the individual's home to support independence and recovery. Mental Health Services are another support service they help provide counselling, therapy,

and support groups to address emotional and psychological challenges such as depression, anxiety and post traumatic stress disorder. Support groups provide peer support groups for people who have survived a stroke and their caregivers to share experiences, exchange information and provide emotional support.

Conclusion – 150 words

Overall I think a stroke is manageable with the right lifestyle and there are lots of support services available for people who have survived a stroke. The main symptoms to help recognise a stroke is FAST which spells Face Drooping, Arm Weakness, Speech difficulties and time to call emergency services.

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