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One-Fifth of Hospitals Give Bad Emergency Advice on Stroke

Too often, personnel do not tell callers to phone 911, study finds

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THURSDAY, July 5 (HealthDay News) -- Americans who think they're having a stroke face better than a one-in-five chance of getting the wrong -- and potentially fatal -- advice when they call local hospital personnel, a new study shows.

Although experts say the best thing to do when suspected stroke symptoms appear is to immediately call emergency 911, in 22 percent of cases, hospital personnel who answered the phone advised that patients call their family doctor.

"That might seem reasonable, but it often delays proper care," said lead researcher Dr. Brett Jarrell, an emergency department staff physician at the Cabell Huntington Hospital in Huntington, W.Va. "Sometimes they can't get through to the doctor, or there can be other delays," he noted.

An interlocking set of problems delay that emergency treatment too often, he said. Not only do many hospital workers not know what to do when a stroke might be occurring, but many Americans still don't recognize key symptoms that signal a stroke, Jarrell said.

The American Heart Association and other medical organizations have been successful in educating the public about the heart attack symptoms -- and what should be done about them -- Jarrell said. However, "That hasn't been attained yet with stroke," he said. "In fact, if you ask people about the symptoms of a stroke, they often give the symptoms of a heart attack -- pain in the chest and so on."

The symptoms of a stroke can include: sudden weakness of the face, arm or leg, especially on one side of the body; sudden confusion or trouble speaking or understanding; sudden trouble seeing; dizziness or loss of balance; or a sudden severe headache with no known cause.

Jarrell said he set up his study because "I work in a tertiary care center, and we inevitably get stroke patients transferred to us 12 to 15 hours *after* the initial emergency-room admission. I tried to find out why."

To do so, his team phoned 46 hospitals that offer neurology training to physicians, placing calls to either the hospital's main numbers or their help lines. They didn't pretend to be patients but instead outlined a scenario in which a 65-year-old man was experiencing weakness in the left arm and leg and having trouble speaking -- classic symptoms of stroke.

The hospital personnel who answered the phones were asked to choose one of four responses: wait for the symptoms to resolve, call a primary care doctor, drive to a local urgent care center, or call 911.

Reporting in the August issue of *Stroke*, Jarrell's team found that 78 percent of personnel picked the correct answer: Call 911. But that still left 22 percent of callers with the wrong advice -- namely, to call their primary care physician.

Nearly one in four operators also failed to correctly name one symptom of stroke, the researchers found.

There was a time when immediate response to stroke symptoms was not as urgent, because there was little that could be done, Jarrell said, but recent advances have changed all that. "Now, we have some possibilities with acute therapy, such as mechanical techniques, to remove blood clots," he said.

What the study shows is "a lack of understanding in the community about stroke and the treatment of stroke," Jarrell said. "The answer is much better community education."

Another expert agreed that better awareness of stroke symptoms, and the need for speedy care, is essential.

People need to be more aware of the early symptoms of stroke, because medical advances have made it possible to limit brain damage if quick action is taken, said Dr. Lee Schwamm, director of the acute stroke service at Massachusetts General Hospital, in Boston, and a spokesman for the American Heart Association.

"Until recently, we didn't really have hospitals ready to receive stroke patients," Schwamm said. "Now we have the 'stroke center' designation, which means we are really in the position to create the kind of targeted campaign that was done for heart attacks."

There are two messages in the new study, Schwamm said.

"The first is that if you or someone you see is having a stroke, call 911, and say, 'I think I'm having a stroke,'" he said. "The second is to find out [beforehand], by calling hospitals in your area, if a hospital has an acute stroke team, if it is equipped to care for a stroke. The education message needs to go to everyone involved."

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