STROKE





A stroke occurs when blood flow to the brain is blocked or there is sudden

bleeding in the brain. The type of stroke that occurs when blood flow to the brain is blocked is called an ischemic stroke. This is the most common type of stroke, with over 90% of strokes that occur being ischemic stroke. The other 10% of strokes involve internal bleeding and are called hemorrhagic stroke. Strokes are incredibly serious and can cause lasting brain damage, long-term disability or death.

KEY TAKEAWAYS



800,000 people in the US suffer a stroke each year.



Average per patient **per year cost** is \$59,900.



Non-medical switching is a challenge for stroke patients prescribed medications like anticoagulants.

SYMPTOMS INCLUDE:

- Sudden confusion, trouble speaking
- Sudden numbness or weakness, especially on one side of the body
- Sudden severe headache
- · Sudden trouble seeing
- Sudden difficulty walking or loss of balance

RISK FACTORS FOR A STROKE INCLUDE:

- High blood pressure
- Obesity
- · Physical inactivity
- Poor diet
- Smoking

POPULATION STATISTICS

Almost 800,000 people in the US suffer a stroke each year and stroke is the fifth leading cause of death. Today, millions of Americans live with disability from strokes despite that stroke are largely preventable. It is found that over 90% of strokes may have been preventable through earlier screening, treatment and lifestyle changes.

DEMOGRAPHIC STATISTICS

Race and ethnicity are factors in stroke prevalence.

- Stroke occurs more in Black, American Indian and Hispanic Americans.
- Men are more likely to have a stroke than women at younger ages.
- Because women live longer than men, their overall likelihood of a stroke is higher than men's.
- Due to high blood pressure during pregnancy and immediately postpartum, women at this time are at a higher risk of stroke.

FINANCIAL BURDEN

Strokes present a major financial strain on the healthcare system and patient as an individual. In the US, the average per patient per year cost is \$59,900. This amounts to over \$100 billion expenditures per year.

ACCESS ISSUES

Stroke care is multidimensional and complex, meaning that barriers to access are as well. Stroke intervention starts with education about what the signs of stroke are, like the FAST campaign (face drooping, arm weakness, speech difficulty, time to call 911). When someone is having a stroke, getting them emergency care as fast as possible is imperative. Those who live in more secluded, rural areas face more challenges accessing emergency services. Mobile stroke units have helped to improve timely access to emergency services, but this issue still exists.

Additionally, non-medical switching, or the switching of a patient's medication for non-medical reasons, has posed a challenge to patients with A-fib prescribed medications like anticoagulants. In 2022, a large pharmacy dropped coverage of a widely-prescribed anticoagulant, leaving patients to accept replacement medications or seek other therapeutic options. This issue is ongoing, and potential consequences include a limitation in patient and provider medication choice, negative impacts on historically disadvantaged patients, and delays or interruptions in treatment.