

Emotional and personality changes after stroke

What you need to know

- › Having a stroke can affect your emotions and personality.
- › You may laugh or cry for no reason.
- › These changes can be hard to adjust to, especially for those closest to you.
- › Emotional and personality changes can get better with time.
- › There are treatment options available.

Emotions and personality after stroke

Changes in your emotions and to your personality are common after stroke. It's very normal to experience strong emotions after stroke, however these emotional reactions usually get better with time. Longer-term emotional and personality changes can be very challenging.

We generally value keeping ourselves and our emotions in check. Emotional and personality changes can also be difficult for the people around us, and can cause problems in social situations.

Emotional lability

Emotional lability is common after stroke. This is when emotional responses don't seem to make much sense or are out of

proportion. You may cry or laugh uncontrollably. Your emotional responses may appear out of character or be out of context. This is also known as the pseudobulbar effect.

Strategies you can use

Be aware of the things that trigger your emotions. These triggers will be different for everyone, but they can include fatigue, stress, anxiety and noisy, overcrowded environments. Being around emotional people or events and being put under pressure can also trigger emotions.

One approach is to just ignore the emotional response and continue with the conversation or task. This lets other people know they should ignore it too. Alternatively, you might choose to deal with it in an upfront way. Tell people about your stroke and about what works best for you. You can for example say, "just ignore it and hopefully it will stop."

You can also take a break to help regain control of your emotions. Take a short walk or do something different. Try relaxation and breathing exercises. A psychologist can help with cognitive and behavioural strategies.

If things are really bothering you, you may want to consider making some changes to your routine. One-to-one, brief and pleasant activities in a quiet environment can be better than trying to constantly deal with stressful situations or environments.

Depression and anxiety

Depression and anxiety are common at any stage after a stroke and they can be treated. If depression or anxiety may be an issue for you, speak to your doctor.

Personality changes

After a stroke, existing personality traits can become exaggerated. Alternatively, people can behave in ways that are out of character for them. Personality changes after a stroke can include:

- › Not feeling like doing anything.
- › Being irritable or aggressive.
- › Being disinhibited – saying or doing things that seem inappropriate to others.
- › Being impulsive – acting without thinking, and doing things that are not safe or are not appropriate.

Sometimes changes in behaviour are aimed only at the people closest to the stroke survivor. This is quite normal. Most of us only show the more difficult parts of ourselves to the people we are closest to because we know they will probably forgive us. However, if the behaviour is extreme it can isolate us from the people around us. Sometimes, stroke survivors do not realise that their behaviour or personality is different. This can make it difficult to address these changes.

Treatment and recovery

After a stroke, it can feel like you are no longer the same person you were before. Stroke survivors, partners and family members can all feel grief about this. Everybody needs to find



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their own way of coping with these changes, and this will take time.

Just like in life, personality after stroke will continue to change over time. Immediate changes in personality are not always permanent and there are things that can help.

Cognitive behavioural therapy. Helps you identify and change unhelpful thought patterns, creating a more positive and problem-solving approach.

Behavioural management training. This includes anger management.

Medication. Anti-depressants may be helpful if depression or anxiety is a problem. It may also be helpful to ask your doctor to review the medicine you are taking.

Carer and family support. Carers can receive support, including modifications to your home if needed to help ensure that everyone is safe. It can help to talk to a trusted family member or friend about your feelings. Respite care can help you to take a break.

More help

StrokeLine's health professionals provide information, advice, support and referral. StrokeLine's practical and confidential advice will help you manage your health better and live well.

Call 1800 STROKE (1800 787 653).

Email strokeline@strokefoundation.org.au

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To find a psychologist:
Australian Psychology Society
Call 1800 333 497
psychology.org.au

Synapse has helpful resources on brain injury, personality and behaviour
synapse.org.au

beyondblue provides information and support about depression and anxiety.
Call 1300 22 4636
beyondblue.org.au