

A call to action

Stroke is one of Australia's biggest killers and the largest cause of long-term adult disability. Yet stroke can be prevented, it can be treated and it can be beaten, but only if the community know the signs and patients with stroke have access to high quality treatment fast.

In 2017, Australians experienced an estimated **56,000 new and recurrent strokes**.¹ Many of these will be experienced by people living in regional areas. Currently, there is no guarantee all patients with stroke will have access to evidence-based treatment and care we know saves lives and reduces disability. In fact, we know many will not.

The Australian Government has an opportunity to **vastly improve access** to stroke treatment and support across Australia, so more patients survive, avoid significant disability and live well after stroke.

A **concerted national approach** is needed to ensure evidenced-based stroke treatment and care is available to all Australians, including the millions living in our regional communities.

The Stroke Foundation calls on the Australian Government to commit to action that will save lives.

A pragmatic approach

The programs and initiatives for which the Stroke Foundation seeks Australian Government support address the following guiding principles that have been identified to enable the successful prevention and management of chronic conditions, and form part of the National Strategic Framework for Chronic Conditions:

✓	Equity – All Australians receive safe, high-quality healthcare irrespective of background or personal circumstance.
✓	Collaboration and partnerships – Identify linkages and act upon opportunities to cooperate.
✓	Access – High standard, appropriate support and services are available, accessible, equitable and affordable for all Australians.
✓	Evidence-based – Rigorous, relevant and current evidence informs best practice and strengthens the knowledge-base to effectively prevent and manage chronic conditions.
✓	Person-centred approaches – The health system is shaped to recognise and value the needs of individuals, their carers and their families, to provide holistic care and support.
✓	Sustainability – Strategic planning and responsible management of resources delivers long-term improved health outcomes.



At a glance

The challenge

The solution

The result



Thrombolysis (clot busting) treatment is only useful if administered in the first 4.5 hours of a stroke

Ongoing community education campaign of the signs of stroke (F.A.S.T.)

Investment = \$11.8 million over four years



Australians of all ages know the signs of stroke and to call an ambulance – reduction in death and disability

METRO 83%

REGIONAL 53%

Regional patients are 1.6 times less likely to be able to access breakthrough thrombolysis treatment

Australian Telestroke Network (ATN)



Regional hospitals get access to stroke experts 24/7 using proven cost-effective technology



1 in 3 stroke survivors is aged under 65

88% of younger stroke survivors report unmet needs Development of tailored supports for childhood and working age stroke survivors

Investment = \$1.7 million over three years



Younger stroke survivors supported to live well after stroke



Almost half of clinicians are NOT routinely using Clinical Guidelines for Stroke Management

An 'Australian First' Living Guidelines for Stroke Management pilot and clinical support program

Investment = \$4.6 million over three years



Patients receive consistent care according to evidence-based guidelines



F.A.S.T. action to reduce avoidable death and disability from stroke

The challenge: Prevent avoidable death and disability from stroke by ensuring every Australian household has someone who knows the F.A.S.T. (Face, Arms, Speech, Time) signs of stroke and to call triple zero (000) immediately.

Investment required: \$11.8 million over four years.

When someone suffers a stroke every minute counts. F.A.S.T. access to stroke treatment means a greater chance of recovery and decreased costs to our health system. When a stroke does occur the best outcomes are achieved when treatment is received quickly. Too often treatment is delayed due to a lack of community awareness about the signs of stroke.

Stroke Foundation's F.A.S.T. (Face, Arms, Speech and Time) community education campaign – including multimedia public awareness advertising and community outreach via StrokeSafe talks delivered by trained volunteers – will raise awareness of the risk factors and signs of stroke across the country.

This globally adopted message has proven results both locally and internationally with a return on marketing investment as high as 28:1. It is ready for an immediate roll out.



F.A.S.T. messages for Aboriginal and Torres Strait Islanders

Aboriginal and Torres Strait Islanders have stroke rates three times greater than other Australians. A specially developed and targeted multi-faceted approach would include:

- F.A.S.T. program specifically for Aboriginal and Torres Strait Islanders.
- Aboriginal and Torres Strait Islander Ambassadors to spread StrokeSafe messages to local communities.
- Culturally appropriate resources for use by health services.

Additional investment required: \$1,851,991 over three years.



"Without F.A.S.T. being recognised by my Mum and Dad, which most certainly saved my life, and the support from StrokeLine and Stoke Foundation, I don't think I would have made it this far."

Kelsey Gronow, stroke survivor.



Access to evidence-based stroke treatment and care for all Australians

The challenge: Utilise technology to ensure all Australians have access to evidence-based stroke treatment and care, regardless of where they live.

Investment required: Australian Telestroke Network (ATN).

National endovascular thrombectomy (clot retrieval) plan costed and developed.

Where you live should not impact your access to emergency stroke treatment and evidence-based care in a stroke unit.

Stroke is a medical emergency requiring urgent medical attention, but with the right treatment at the right time, many people are able to recover. Recent advancements in 'time is brain' therapies have saved lives and reduced disability in stroke survivors.

Currently, only a limited number of Australians have access to time-critical treatments and it is costing lives and devastating families. Only 13 percent of eligible stroke patients receive time-critical clot-busting treatments which reduce disability. Endovascular thrombectomy, an intervention to remove large blood clots in the brain, is now available at 21 sites, but not all patients have clear pathways to access this game-changing innovation in stroke treatment.

The current divide between the haves and have nots in metropolitan and regional areas is extremely concerning, particularly when we know regional Australians are 19 percent more likely to suffer a stroke than their city counterparts.

There is a solution:

Australian Telestroke Network (ATN) – telemedicine enables fast assessment of suspected stroke patients in regional areas by metropolitan-based stroke specialists. Regionally-based clinicians are supported 24/7 to administer thrombolysis (clot busting) treatment and/or arrange a transfer to a comprehensive stroke centre for endovascular thrombectomy (clot removal).

Comprehensive national endovascular thrombectomy plan – endovascular thrombectomy is challenging and should only be performed by highly trained stroke specialists. Currently, this treatment is available at select locations, most of them metropolitan. Clear clinical pathways and protocols are needed to ensure all Australian patients with stroke have access to this breakthrough treatment when they need it.

"We need to make it better for regional and rural people because we deserve the same treatment as those in the city."

Tracey Ward, wife and carer to stroke survivor Stephen.





A fair go for young stroke survivors

The challenge: Ensure young Australians are supported to live well after stroke.

Investment required: \$1,683,443 over three years.

Stroke affects all ages – attacking the brains of babies, children, parents and grandparents. All Australians need and deserve the opportunity to live their best life possible after stroke.

Part A: Childhood stroke (under 15 years of age) Investment required: \$639,315 over two years

For a childhood stroke survivor and their loved ones, the impact of stroke can last a lifetime. Stroke can leave its mark on every element of family life, and families live with the fear of a future stroke.

Stroke is a major cause of disability and death across the globe. In Australia, it is estimated up to 390 strokes are experienced by children a year – up to 122 strokes in newborns and infants.² Of those children who experience stroke, around 10 percent will die as a result, more than half will have some form of long-term or life-long impairment, and up to 20 percent will suffer recurrent strokes.

Currently, Australian families are largely left to face this challenge alone. This project will engage parents and health professionals to produce a suite of specialised products and services to address the unique needs of children who have suffered a stroke including:

- A resource delivered in the first few days following a stroke, providing information on stroke treatment, care, services and supports.
- Information to support family, friends, and school communities.
- Improved capacity of Stroke Foundation StrokeLine health professionals to provide free support to parents.
- Learning resources for childhood stroke health professionals.

Part B: Working age stroke Investment required: \$1,044,128 over three years

Young stroke survivors have unique needs and require tailored supports to optimise their physical, psychological and social skills. Investment in a multifaceted strategy, including an action plan, is needed to address the unmet needs of young stroke survivors in Australia.

After a stroke, younger survivors (under the age of 65) face significant life challenges, with a long recovery ahead and without adequate information or support.

Around one in three young stroke survivors are left with moderate to severe disability.

This project will engage younger people and health professionals to produce a suite of tailored products, including:

- Promotion of the signs of stroke to younger people, improving their chance of receiving time-critical treatment.
- Podcasts, videos and guides on common issues post stroke including relationships, driving, work, finances and health and wellbeing.
- Resources for health professionals to help them to improve services.

95%

of young stroke survivors report having ongoing needs after their stroke.

1 in 3 stroke survivors is aged



under 65

88%

of young stroke
survivors report unmet
needs across health,
everyday living and
leisure activities,
employment and
finance – a higher
proportion than older
stroke survivors.



"While her recovery has been difficult at times, Sophie wants to help other child stroke survivors by letting them know the journey takes time and patience, but you can also make it fun."

Amanda Clayton, mum of childhood stroke survivor Sophie.

Sophie's story

In August 2010, Sophie Clayton was having a play date with her cousin when she walked out of the playroom holding her leg. Sophie collapsed and her mum rushed to her aid immediately, recognising the F.A.S.T. signs of stroke. It was touch and go for Sophie initially, however with treatment and a fire-cracker spirit Sophie walked – or ran – out of hospital 10 days later chasing a balloon and her little brother Elliot. Sophie hasn't slowed down since.

The stroke left Sophie with weakness on her right side, and some speech and learning difficulties. Life has changed greatly for the family since Sophie's stroke.

After stroke, survivors need to retrain their brains and effectively form new pathways. The only way to do this is by repetition and more repetition.

This is difficult for adults, but for kids it is almost impossible. Sophie and her family are taking this challenge head on and have developed their own, creative approach to recovery.

This year Sophie took on the 1000 steps to climb the Sydney Harbour Bridge.

"Sophie is constantly setting herself goals and achieving them, and climbing the Sydney Harbour Bridge was another demonstration of what is possible," Sophie's mum Amanda said.

"While her recovery has been difficult at times, Sophie wants to help other child stroke survivors by letting them know the journey takes time and patience, but you can also make it fun."





Empowering clinicians to drive better treatment and care

The challenge: Ensure our health system remains dynamic and adapts quickly to the best local and international innovations in stroke treatment and care.

Investment required: \$4.6 million over three years.

Part A: Create the world's first 'living' stroke guidelines

Investment required: \$1.5 million over three years

All Australians deserve world class healthcare. Evidence-based clinical practice guidelines are key to establishing effective, high quality, consistent and safe healthcare practices and policies. However, clinical practice guidelines can quickly be superseded or become obsolete, and the inability of guidelines to keep up-to-date with the latest research erodes clinician uptake, and hampers knowledge translation and quality improvement efforts to the detriment of patients.

There is an opportunity for the Australian Government to capitalise on its investment in the recent update of stroke clinical guidelines, and lead the way internationally, by partnering with Cochrane Australia and the Stroke Foundation – two of Australia's leading organisations in the field of evidence synthesis and guideline development – to develop an innovative 'living' guideline model for the Clinical Guidelines for Stroke Management.

The Australian Government's investment in a three-year, \$1.5 million pilot of 'living' or 'continuously updated' stroke guidelines will revolutionise the translation of research into clinical practice, and accelerate world class treatment and care for Australians with stroke. This proof of concept pilot will then be applied to many other clinical guidelines to ensure that Australia continues to lead the world in research translation in the public health system.

Part B: Embed guidelines into hospital practice through the use of an innovative clinical support program

Investment required: \$3.1 million over three years

Despite significant advancements in the treatment of acute stroke, and the best efforts of health professionals and hospitals, many people are missing out on evidence-based care. This gap between the stroke care recommended in Australian guidelines and what actually happens in our healthcare systems is increasing costs and putting a greater burden of death and disability associated with stroke on the community.

Through hospital engagement to help stroke clinicians translate the latest innovations into actual patient care, this project will:

- Deliver hospital visits, localised data, resources and ongoing one-to-one support to equip stroke clinicians to identify quality priorities and develop improvement plans.
- Use a 'train the trainer' approach to engage local stroke clinician champions to support ongoing engagement beyond the life of the project.
- Create opportunities for stroke survivors to tell their stories to engage stroke clinicians in improving stroke treatment and care.

"I am very pleased to have the Stroke Foundation's *Clinical Guidelines* to provide guidance and recommendations around the assessment and management of mood in stroke patients."

Peta McLean, health professional at Maryborough Rehabilitation Unit.

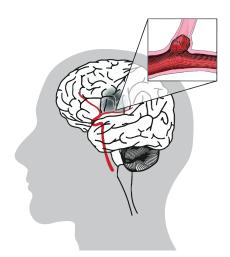


Background

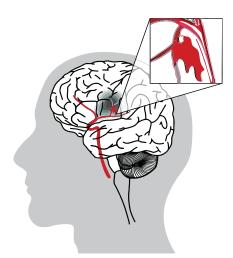
What is a stroke?

Stroke attacks the brain – our most vital organ. A stroke occurs when blood supply to the brain is cut off because of a clot blocking an artery (ischaemic stroke) or due to a burst artery (intracerebral or haemorrhagic stroke). When blood supply to the brain is blocked brain cells begin to die at a rate of 1.9 million each minute.³

Every stroke is different depending on where in the brain it strikes and how severe it is. What is common is the devastation it can cause to the survivor, their carer and family. Stroke remains the leading cause of acquired disability for Australian adults.⁴



Clot (ischaemic stroke)



Bleed (haemorrhagic stroke)

Five stroke facts

- > Stroke kills more women than breast cancer and more men than prostate cancer.
- One in six people will have a stroke in their lifetime.
- > In 2017 an estimated 56,000 strokes will occur one every nine minutes.
- > One-third of stroke survivors are of working age.
- > Sixty-five percent of those living with stroke also suffer a disability that impedes their ability to carry out daily living activities unassisted.

About the Stroke Foundation

The Stroke Foundation is a national charity that partners with the community to prevent, treat and beat stroke. We stand alongside stroke survivors and their families, healthcare professionals and researchers. We build community awareness and foster new thinking. We support survivors on their journey to live the best possible life after stroke.

Stroke in Australia

2050: 1 million stroke survivors

growing to 132,500 new strokes each year

+56,000 new strokes each year

2017: stroke survivors = 475,000



How to get more involved

- **6** Give time become a volunteer.
- Raise funds donate or hold a fundraising event.
- Speak up join our advocacy team.
- **Y** Leave a lasting legacy include a gift in your Will.
- **Check your numbers** check your health regularly.
- **Stay informed** keep up-to-date and share our message.

Contact us

- **2** 1300 194 196
- strokefoundation.org.au
- **☆** /strokefoundation
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References

- ¹ Deloitte Access Economics. (2017). Stroke in Australia No postcode untouched.
- ² Australian Childhood Stroke Advisory Committee. Guideline for the diagnosis and acute management of childhood stroke 2017.
- ³ Saver JL. (2006). Time is brain quantified. Stroke; 37(1): 263-6.
- ⁴ Deloitte Access Economics. (2013). The economic impact of stroke in Australia.