

Changing lifestyle after stroke- the role and perspectives of informal carers

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DIVING IN KNOWLEDGE

PURPOSE | BREATHING

Gain insight into ways in which Portuguese informal carers perceive the stroke causes and their role for prevention of stroke recurrence

WHY? | WHY BREATHING?

The risk of recurrent stroke is six times greater than risk of initial stroke. Secondary prevention can reduce the risk of recurrent stroke by 90%¹.

Secondary prevention programmes, with multiple risk factor intervention, have been demonstrated little changes on lifestyle habits². Suggestions to implement active strategies, involving patients and carers, are made³ but little is known about how carers can effectively be involved.

METHODS | HOW TO BREATHE?

Semi-structured, one-to-one interviews, were used, within an interpretative paradigm.

Participants were asked to give their perspectives about the perceived causes of stroke occurred, the life after stroke and their perceived role for changing behaviours.

Interviews were audio recording and transcribed verbatim. Analyses were conducted by thematic analyses.

PARTICIPANTS | WHO BREATHS?

6 informal carers (purposive sample): 3 female; mean age of 45 years (SD: 19.5)

Each participant was the person who spent more time with the individual after stroke, as a minimum of one day per week.

5 of them were relatives of a person who suffered a stroke; one was friend.

2 were retired; all studied at least four years.

Ethical approval was obtained. All the participants signed an informed consent.

References

- 1- Spence, J. (2010). Secondary Stroke Prevention. *Nat Rev Neurol*, 6 (9), 477-86.
- 2- Ebrahim, S. et al. (2006). Multiple risk factor interventions for primary prevention of coronary heart disease (Review). *Cochrane Database of Systematic Reviews*. Issue 4.
- 3- Smith, J. et al., (2008). Information provision for stroke patients and their caregivers (Review). *Cochrane Database of Systematic Reviews*. Issue 2.

RESULTS | DIVING

Two main themes emerged from the data.

"Stroke- why did it happen?"

Represents the meanings given to stroke causes.

Participants identified some risk factors for a stroke, but, generally, they did not establish a casual relationship between them and its relevance for the occurrence of stroke relative's.

"Reasons to change"

Participants believed that they have a crucial role in helping their relatives to adopt a healthy lifestyle and control risk factors for recurrence.

Their own behaviours influenced the behaviours changing of their relatives. However, according to participants, the major motivation has to be intrinsic. They believe that their support is mainly psychological.

CONCLUSIONS | SWIMMING

Informal carers' perceptions emphasized the importance of subjective risk perception for changing behaviours. They seem to have a relevant role on reducing risk of stroke if they improve their risk perception about stroke. Information per se seems not to be enough. Further research is important to understand the impact of different strategies on subjective risk perception.

Physiotherapists should evaluate and understand the subjective risk perception from individuals after stroke and their informal carers, involving them during all the process.



"I am absolutely amazed..." (F1, 5-8)
"There are women working with him that never drank or smoked and also had stroke" (F4, 123- 125)

"She didn't change by herself. It was imposed... doctors said what she had to do and I did it for her. she is very dependent" (F5, 144-55)

"She would like to spend all day without doing nothing. I have to persuade her to walk and make some exercise. I have to give her a stimulus" (F4, 121-124)

"He spends almost the time at home. He can eat all silly food he wants"
"It is, most of all, intrinsic. Then all the familiar frame give a support." (F3, 89-94)

"If will do it together it's better" (F6, 129)

