

# Stroke Recovery Tips

## Why Am I Not Achieving My Rehab Goals?

When stroke patients are first asked their goals in rehab, many of them will say “walk again” or “live like I did before”. When asked to think of short term goals, it’s often hard for patients because they are focused on their end goal of full recovery. Unfortunately, as time goes by and a patient is struggling to do even basic things like brush their teeth or put on a shirt, frustration, discouragement, and depression can set in. It is important to keep focused and not give up. You may just need to adjust your thinking and focus on short term goals and small steps first.

Let’s think about it a different way. Let’s say you’re a kid, and your goal is to play college basketball. To achieve that goal, you would have to work on various short term goals like dribbling, shooting, defense basketball IQ, rebounding, jumping, quickness, etc. Even these short term goals could be broken down further such as dribbling right handed or left handed, behind the back, between the legs, figure 8’s, etc. Stroke rehab goals can be thought of in the same way. If you want to walk again, then break it down into components such as sit to stand, standing, static and dynamic balance, specific movements needed to walk, strength needed in specific muscle groups, etc. If you simply think about the long term goal and just try to get up and walk, you may not be successful because you did not work on the components needed to achieve the goal.

You probably won’t know all the different components you need to work on for some goals, and that is where communication with your therapist is important. It’s not good enough to just go to therapy. Instead you will want to set goals with your therapist and know how to achieve those goals. Don’t hesitate to ask a therapist why you’re doing a particular exercise or activity.

Another important thing is to consider what capabilities you have. If you have zero movement and total paralysis of your arm, it wouldn’t be realistic to set a short term goal for something that requires extensive finger and arm movement. If you wanted to focus on a limb with no movement, it would probably be better to select a gross motor movement that can be done more easily such as sliding an object along a table or trying to hold an object under your arm without it falling out, or trying to stabilize an object without the hand falling off.

Goals will not always be physical. Maybe a goal for a patient is to improve reading or memory. Again, one would identify a reasonable short term goal and break it down into components to make it achievable. If you work several weeks to a month and no progress appears to be occurring with the short term goals you’ve set, simply select another goal to prevent frustration from being a deterrent. You want short term goals to be challenging but achievable. If you can reset your thinking from long term to short term goals, you may find that you will start to achieve your rehab goals.

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To see past issues of Stroke Recovery Tips, visit

[http://www.stroke-rehab.com/Stroke\\_Recovery\\_Tips-backissues.html](http://www.stroke-rehab.com/Stroke_Recovery_Tips-backissues.html)

## Ideas for Specific Goals

If you are having trouble coming up with specific goals to work on, here is a list of some simple and complex goals:

Turn on a light switch

Open a drawer

Retrieve clothing from closet/drawers

Pick up a phone

Wipe off a counter

Get in/out of bed

Get in/out of a car

Open a refrigerator

Put on clothing

Stand up without assist

Turn a door knob

Pick up a cup

Brush your teeth

Put on makeup

Write, draw or paint

Improve speed of movement

Feed yourself with the weak hand

Comb your hair

Use tools (screwdriver, hammer, etc.)

Crochet, knit, or other needlework

Woodworking

Get up from the floor or down to the floor

Folding clothes/other chores

Carrying an object across the room

Typing

Work duties

Hobbies (fishing, shooting a gun, archery, playing cards, golf, etc.)

Driving

Improve memory

Improve word recall

Improve awareness of the weak side

Improve sensation

The ideas are limitless

## Sensation Problems in the Lower Extremity

Treatment techniques for decreased sensation and proprioception (awareness of movement) in the hand are often taught to patients especially since the hands are used daily to manipulate items. On the other hand, sensation issues in the lower extremity may not be addressed thoroughly. Here are a few sensory re-education ideas and activities for the lower extremity:

- 1) Writing letters in the sand with your foot
- 2) While sitting, place your affected foot on a lightweight or paper object with just enough force to touch but not smash it. Try in standing to make it harder.
- 3) Try placing the foot on a ball and roll it side to side and forward/back without the foot falling off.
- 4) Have someone place your hip, knee, ankle, and/or foot in a particular position while your eyes are closed. See if you can tell them the position of your leg. If not, look at your leg and imagine how that position feels. Close your eyes and try to recreate the movement.
- 5) Make a foot maze
- 6) Try to touch targets with your foot
- 7) Try to pick up objects with your toes
- 8) While lying on your back, place a ball between your knees. Take your knees side to side without letting the ball drop out.
- 9) Try to distinguish different textures with your foot with your eyes closed.
- 10) Use vibration or talk to your doctor/therapist about trying neuromuscular electrical stimulation

\*\* You should always check with your own therapist or MD to make sure any activities are right/safe for you.

If you would like to read about other stroke patients' experiences and recovery for motivation or information, please visit:

<http://www.stroke-rehab.com/stroke-survivor-experiences.html>



### Stroke Rehab Exercises

There are many websites that demonstrate exercises for stroke.

Here are a few of those websites:

[GRASP](#)

[HOPE: A Stroke Recovery Guide](#)

[Stroke-rehab.com](#)

[Saebo.com](#)

[Strokewise.info](#)

[Livewellagewell.info](#) (not specifically for stroke but demonstrates some good exercises)

## Personality Changes After Stroke

Having a stroke can affect one's emotions and cause changes to personality. Some changes may include laughing or crying for no reason, not wanting to do anything, being irritable or quick to anger, loss of inhibition resulting in inappropriate behavior, being impulsive or unsafe just to name a few. The stroke patient may not even be aware of the personality changes, however, caregivers often are able to identify these changes. Sometimes personality changes are only directed at those closest to the stroke victim. This is not uncommon as most people tend to show their worst side to immediate family such as spouses and children.

Sometimes loved ones are afraid to approach the stroke patient regarding their changed personality, but it is best to be honest so appropriate care can be received. Neuropsychologists can help work with emotional issues of those who have suffered neurological injury such as stroke.

Some suggestions that may be made to help with altered personality are cognitive therapy, behavioral management training, medications, support groups, and exercise. Cognitive therapy may help you change your thought patterns and come up with a more positive problem-solving approach. Behavioral management offers strategies to help control behavior such as anger management. Medicines may help if you are having anxiety or depression. Ask your physician if medicines would be appropriate for your case. Support groups can provide an outlet to express your feelings and hear from others with similar conditions. Exercise can help you recover and feel better physically which in turn can improve mood.

If you have had a stroke and notice that your emotions are getting the best of you or loved ones have mentioned you are acting differently, it may be time to consult with a neuro-psychologist.

## Caregivers Corner: Tips for Dealing with Your Loved One's Apathy

Apathy is a condition that is not uncommon after stroke. Apathy is characterized by indifference, lack of emotion, loss of interest in activities, lack of initiation, loss of motivation, and decreased participation in social activity. Some tips to help the stroke survivor with apathy include:

- 1) Help your loved one initiate a task but don't do the task for them (for example hand your loved one a brush and have them brush their hair instead of you doing it.)
- 2) Encourage your loved one to do what they can.
- 3) Break large tasks down into smaller tasks (for example have your loved one read a paragraph rather than trying to read a page or entire book in one sitting)
- 4) Involve your loved one in social activities that you know they enjoy (maybe visiting with friends/family, looking at old photos, playing with children, church, getting their hair done, listening to music, fishing or other hobbies)
- 5) Keep activities short in duration
- 6) Follow a schedule - i.e. bath days are Monday, Wednesday, Friday
- 7) Make sure caregivers and other family members are on the same page and using the same strategies as well

## Making Sure Visual Impairment is Addressed in Stroke Patients

Approximately 60% of stroke patients have some type of visual impairment according to a literature review in [Ophthalmology Research](#). Unfortunately, visual impairments are not always addressed, and stroke patients may not even be aware that they are having visual difficulties. Vision difficulties that may occur include central or peripheral (side) vision impairment, eye movement or tracking problems, blurred vision, loss of visual field, sensitivity to light, glare, dry eye, double vision and other visual perceptual deficits (e.g. depth perception, figure ground, etc.)

The attention of medical staff, patients, and caregivers is often directed to other disabilities such as mobility, speech and swallowing disorders when a stroke first occurs, but visual issues need to be addressed as well. The impact of visual deficits can be substantial including increased falls/running into objects, impaired driving or inability to drive, difficulty reading, decreased confidence, fear of falling, headaches, inability to return to work, inability to do hobbies as before, and increased burden of care to caregivers. Since it is not always evident to the stroke patient or caregiver, it is imperative to get proper vision screening after stroke. The general optometrist might not always catch visual deficits in the stroke population, so it is important to let your optometrist know about the stroke and to check especially for peripheral visual deficits. If you suspect that you have visual deficits, it may be more beneficial to visit a neuro-optometrist who specializes in eye disorders due to neurological injury such as stroke. Many neuro-optometrist offices also offer vision therapy services as well.

After stroke, adaptations may need to be made to address visual deficits or vision therapy may be needed. Some adaptations that are used include new eyeglass prescriptions, eyewear with prisms to compensate for visual field loss, use of magnifying glasses, using increased lighting for reading, ordering large print books or using large print on screens, using a reading guide/ruler, compensating with head turn for peripheral vision deficit, narrow columns for reading, eye patching, and placing things toward the stroke patient's "good side" to make items visible to the patient.

If you or a loved one have had a stroke, make sure you are tested for visual impairments. It is imperative to be tested prior to returning to work or driving. To find a neuro-optometrist in your area, you can visit <https://nora.memberclicks.net/find-a-provider/> or to find out more about vision deficits caused by stroke, visit <https://noravisionrehab.com/>.

## Free Aphasia and Speech Therapy Resources

If you or your loved one suffers from aphasia (loss of ability to understand or express speech) but has been discharged from speech therapy services, you can still find some free helpful resources online. Here are a list of free tools to help with aphasia (some go straight to free resources and others will involve a little bit of searching around on the site to find what you need):

Workbook for Aphasia at [http://csuspeechandhearingclinic.weebly.com/uploads/2/3/4/0/23404518/exit\\_project\\_workbook\\_complete\\_draft\\_2.pdf](http://csuspeechandhearingclinic.weebly.com/uploads/2/3/4/0/23404518/exit_project_workbook_complete_draft_2.pdf)

Free Speech Therapy Tasks Online:  
<http://www.aphasiatherapyonline.com/>

Lingraphica Small Talk App—cell phone app for aphasia exercises and communication (visit app store on your phone)

Clinical Trials for Aphasia (latest research trials open for participation) - [https://clinicaltrials.gov/ct2/results?term=aphasia&spons=NIDCD&Search=Apply&recrs=a&age\\_v=&gndr=&type=&rslt=](https://clinicaltrials.gov/ct2/results?term=aphasia&spons=NIDCD&Search=Apply&recrs=a&age_v=&gndr=&type=&rslt=)

A website that gives you access to videos of everyday interactions where you can practice your half of the conversation at a restaurant, bank, or job interview, etc.  
<http://www.scenarioaid.com/>

An English picture dictionary: <https://www.dicts.info/picture-dictionary.php?language=english>

Video Dictionary: <http://www.vidtionary.com/>

Free speech therapy materials:  
<https://www.speechandlanguagekids.com/11-free-speech-therapy-materials/>

<https://www.speakingofspeech.com/materials-exchange.html>

<http://www.andnextcomesl.com/2015/04/30-free-personal-questions-prompts.html>

<https://freelanguagestuff.com/>

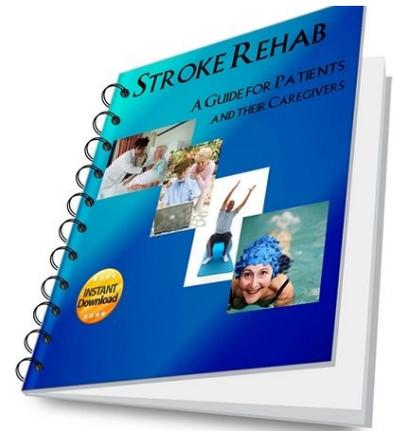
[https://www.speech-language-therapy.com/index.php?option=com\\_content&view=article&id=46:speech&catid=9:resources&Itemid=117](https://www.speech-language-therapy.com/index.php?option=com_content&view=article&id=46:speech&catid=9:resources&Itemid=117)

<http://www.mnsu.edu/comdis/kuster2/spttherapy.html>

<https://www.icommunicatetherapy.com/speech-language-therapy-resources/>

[http://web.archive.org/web/20081120205651/http://www.aphasiatoolbox.com/samples/sample\\_material.pdf](http://web.archive.org/web/20081120205651/http://www.aphasiatoolbox.com/samples/sample_material.pdf)

Written Communication Chart: <https://www.icommunicatetherapy.com/wp-content/uploads/2014/11/Written-Communication-chart-1.pdf>



### Stroke Rehab e-book: A Guide for Patients and their Caregivers

*Exercise photos included*

Visit  
<http://www.stroke-rehab.com/stroke-rehab-ebook.html>