

LETTER TO THE EDITOR

LACK OF EMPHASIS ON PSYCHOLOGICAL REHABILITATION FOR STROKE PATIENTS

To the Editor,

It has been observed that most of the patients are not aware of the dilapidating affects of post stroke depression on their recovery, survival and a return to normal activities of life. The lack of emphasis on psychological rehabilitation for stroke patients is a source of concern for me and I would like to bring to your attention about the facts regarding the implications of proper psychological rehabilitation is not undertaken.

Stroke survivors report a range of emotional difficulties, most common being fear, anxiety, frustration, anger, sadness and a sense of grief for their physical and mental losses.

Usually these feelings may fade over time however, some patients may struggle with adjusting to the many changes following stroke. When this happens these feelings can develop into depression. It is estimated that approximately one-third of stroke¹ survivors develop post-stroke depression (PSD).

A Stroke Association survey of 2700 stroke survivors and cares has highlighted that many patients feel their emotional and psychological needs² go unrecognized and unmet. Many said they felt "abandoned" after leaving the hospital.

Compared to stroke survivors without depression, those with post-stroke depression (PSD) tends to have a poorer response to physical recovery and rehabilitation³, reduced social functioning, and greater use of health care services. Studies also suggest a strong association between PSD and a higher risk for subsequent strokes and cardiac events.

There are various treatments and self help techniques for patients identified with post- stroke depression (PSD) as follows:

1. Anti depressant medications⁴: these medications have shown varying degrees of short-term efficacy for PSD patients.
2. Psychological intervention⁵: A new study involving patients with mild to moderate communication problems suggests that stroke patients who meet with therapists within just a few weeks of their stroke for motivational talk-based therapy may be less prone to depression and death than patients who receive standard care.

During sessions therapists asked the patients their thoughts about the future, what obstacles they expected to face in recovery and how confident they were about approaching these obstacles. They encouraged patients to identify their own solutions to problems they anticipated to face during recovery.

According to researchers motivational techniques may give patients more hope. Combination of talk therapy with antidepressant medications. The most effective treatment is psychological intervention or talk therapy, combined if appropriate, with anti-depressant medication. Acknowledging what has happened, and accepting how life has changed is an important step in the recovery process.

Treating depression not only improves the survivor's mood, it improves their physical recovery and their cognitive or intellectual recovery as well. Without treatment, researchers have found that post-stroke depression can go on for up to three years after the stroke.

It is important to screen patients for depression following a stroke. Treatment and support can help ease the pain and help the survivor make gains in recovery.

I would urge the readers of this letter to encourage patients who have gone through a stroke to undertake psychological therapy immediately to prevent the onset of post- stroke depression.

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