African-American Men and Stroke



African-American men are at greater risk of having a stroke than any other group of men in the United States. Compared to white men, they are twice as likely to have a stroke, have strokes at younger ages, die from stroke, or have stroke-related disability that affects their daily activities.

These facts sound alarming, but there is some good news: Up to 80% of strokes can be prevented. This means it is important to know your risk of having a stroke and taking action to reduce that risk.

What Is a Stroke?

A stroke, sometimes called a brain attack, occurs when blood flow to an area of the brain is cut off. When brain cells are starved of oxygen, they die. Stroke is a medical emergency. It's important to get treatment as soon as possible. A delay in treatment increases the risk of permanent brain damage or death.

Why are African-American Men at Higher Risk?

- Two out of five African-American men have high blood pressure—a main risk factor for stroke. High blood pressure often starts at a younger age and is more severe in African-American men than in white men. African-American men with high blood pressure are also less likely to have it under control.
- People with **diabetes** are at higher risk of stroke. One out of seven African-American men has been diagnosed with diabetes; and many more have the disease but do not know it.
- **Sickle cell anemia** is the most common genetic disorder in African Americans and can lead to a stroke. Strokes can occur when sickle-shaped cells block blood vessels to the brain.
- **Smoking** doubles your risk of stroke. About one out of five African-American men smokes cigarettes.
- Being overweight or obese increases your risk of stroke. Seventy percent of African-American men are overweight.
- **Eating too much salt**, or sodium, can raise your blood pressure, putting you at higher risk of stroke. Researchers think there may be a gene that makes African Americans more sensitive to the effects of salt, which in turn increases the risk of developing high blood pressure. African Americans should limit their sodium intake to 1,500 milligrams per day.

If Stroke Happens, Act F.A.S.T.

Strokes come on suddenly and should be treated as medical emergencies. If you think you or someone else may be having a stroke, act F.A.S.T.:



F—Face:

Ask the person to smile. Does one side of the face droop?



A—Arms:

Ask the person to raise both arms. Does one arm drift downward?



S—Speech:

Ask the person to repeat a simple phrase. Is the speech slurred or strange?



T—Time:

If you see any of these signs, call 9-1-1 right away.

Calling an ambulance is critical because emergency medical technicians, or EMTs, can take you to a hospital that can treat stroke patients, and in some cases they can begin life-saving treatment on the way to the emergency room. Some treatments for stroke work only if given within the first 3 hours after symptoms start.





Take Steps to Prevent Stroke— You Have the Power

Almost half of African Americans have a risk factor that can lead to a stroke. Most strokes can be prevented by keeping medical conditions under control and making lifestyle changes. A good place to start is to know your **ABCS of heart health**:

- Aspirin: Aspirin may help reduce your risk for stroke. But do not take aspirin if you think you're having a stroke. It can make some types of stroke worse. Before taking aspirin, talk with your doctor about whether aspirin is right for you.
- Blood Pressure: Control your blood pressure.
- Cholesterol: Manage your cholesterol.
- Smoking: Quit smoking or don't start.

Make lifestyle changes:

- Eat healthy and stay active. Choose healthy foods most of the time, including foods with less salt, or sodium, to lower your blood pressure, and get regular exercise. Being overweight or obese raises your risk for stroke.
- Talk to your doctor about your chances of having a stroke, including your age and whether anyone in your family has had a stroke.
- Get other health conditions under control, such as diabetes or heart disease.

What Is CDC Doing About Stroke?

CDC and its partners are leading national initiatives and programs to reduce the death and disability caused by stroke and to help African-American men live longer, healthier lives.

- CDC's <u>Division for Heart Disease and Stroke</u>
 <u>Prevention</u> (DHDSP) provides resources to all 50 states to address heart disease and stroke.
 DHDSP and its partners work together to support efforts that reduce differences in health due to a person's ethnicity, income, or where they live.
- The <u>Paul Coverdell National Acute Stroke</u>
 <u>Program</u> funds states to measure, track, and improve the quality of care for all stroke patients.
 The program works to reduce death and disabilities from stroke.
- The Million Hearts® initiative, which is co-led by CDC and the Centers for Medicare & Medicaid Services, aims to prevent 1 million heart attacks and strokes by 2017. In 2015, Million Hearts® launched Healthy is Strong, a campaign that focused on African-American men in the Southeast, which has the highest death rates from stroke. The campaign provided educational resources and encouraged men to go to the doctor.