



Heart & Stroke **LIVING** with **STROKE**

Feelings after a stroke

Stroke doesn't just affect your brain and your body. It affects how you feel. And those feelings can affect everyone around you – your family, your friends, and the people who help to care for you.

In the days and weeks right after a stroke, you may feel like you are on an emotional roller coaster – angry one minute and sad the next. It's normal to feel shock right after a stroke. *How could this have happened to me? What will my life be like now? How will my family cope?*

As time goes on, you may still struggle with your feelings. You may feel frustrated and embarrassed by physical limits or mental changes, such as memory loss. The effects of the stroke will make you feel tired, and so will the extra effort it takes to do things. There could be sadness about the changes you have gone through.

All these feelings may cause you to withdraw from those around you. Try to keep reaching out. Tell your loved ones and caregivers how you feel. These are all normal feelings after a stroke, and they lessen as time goes on.

What is clinical depression?

It is normal to feel sadness and loss after a stroke, but sometimes a stroke survivor can develop a true clinical depression. Depression is a sense of hopelessness. It disrupts a person's ability to function. It is common among stroke patients.

But depression can be treated. And the faster it is treated, the better.

About one-third to one-half of stroke survivors suffer from depression during the year after a stroke. Post-stroke depression can occur right after stroke. Most often, it develops within 3 months, but it can show up much later than that.

Depression gets in the way of physical and mental recovery. It can decrease energy, so the survivor participates less in rehabilitation. It can reduce a person's ability to care for themselves. Depression in a stroke survivor can also affect the health of caregivers at home.

Is it “the blues” or clinical depression?

Only a doctor can diagnose clinical depression, but here are some guidelines for telling the difference between normal sadness after a stroke and true depression.

"The Blues"	Clinical Depression
Everybody feels sad sometimes.	10 –15% of the general population experience depression.
Definite beginning: people know when and why they felt sad.	33 – 50% of stroke survivors experience depression. Gradual beginning: people don't really know when or why it started.
Feeling sad is an emotional response to an event.	Depression is a medical illness from chemical changes in the brain.
The feeling goes away on its own.	The depression does not go away without treatment.
The mood lasts a few days or weeks.	The depression lasts months or years.

Remember: Depression can be treated. Watch for the signs.

People do not always know when they are depressed, or they may not want to admit it. Even health professionals can miss the signs of depression, mistaking them for effects of the stroke or old age. If you are caring for a stroke survivor, you have a big role to play, because you are close to them and know them best. You can spot changes in their behaviour that might be signs of depression.

Physical signs

- Trouble sleeping
- Weight loss
- Decreased energy, tiring easily

Attitudes

- Not caring about anything, loss of interest in things that were previously enjoyed
- Negativity: everything is gloomy
- Self-focus: me, myself and I
- Difficulty connecting to others

Emotions

- Feelings of hopelessness and worthlessness
- Sadness and anxiety or nervousness
- Thoughts of death and suicide

Mental function

- Difficulty concentrating, confused, feeling of living in a fog
- Problems making decisions
- Short-term memory problems

If you or someone you care for have two or more of these symptoms for more than two weeks, contact your doctor. Treatment can involve speaking to a trained mental health professional such as a social worker, taking antidepressant medications, or both.