



# MAFES Dawg Tracks

March, 2013



*Safety Tips: Heart Attack & Stroke Protection*



Coronary heart disease is the #1 killer and also the leading cause of long-term disabilities. Exposure in our working environment can bring on either of these debilitating problems. Every year about 785,000 Americans suffer a first heart attack. About 470,000 have already had one attack and probably will have another.

The safety and welfare of all of our employees is our #1 mission, as we all go about our various tasks. So we want to discuss these 2 acute problems as an endeavor to, hopefully, reduce the possibility of an occurrence to any of our employees:

**TIPS TO AID IN THE REDUCTION OF HEART ATTACK:**

- ~Maintain a Healthy Diet
- ~Program for Regular Exercise
- ~No Smoking
- ~Weight Control

These things apply to women as well, but both the AHA and the ASA also add high blood cholesterol and high blood pressure. The tips listed above will aid in the reduction of heart attacks and strokes, if practiced.

Both the Heart and Stroke Assn. lists the following warning signs that can aid in the recovery and/or safe lives:

**HEART ATTACKS:**

- Uncomfortable pressure, fullness, squeezing, or pain in the middle of the chest lasting more than a few minutes.
- Pain spreading to the neck, arm and shoulders.
- Chest discomfort, with light headedness, fainting, sweating, nausea and shortness of breath.

**STROKES:**

- Sudden weakness or numbness of the face, arm or one side of the center of the chest lasting more than a few minutes.
- Sudden dimness or loss of vision, particular in one eye.
- Loss of speech, trouble talking or difficulty understanding speech.
- Sudden severe headaches for no known cause or apparent reason.

Actually, not all of these symptoms will occur in every heart attack or stroke, but if you experience or feel either of them happening to you or a fellow employee - **Call for help immediately! Call 9-1-1 or rush the victim to the nearest hospital or health clinic.** The decision to act fast just might save your life or that of a fellow worker.

**COUGH/CPR:**

The following procedure is not endorsed by the American Heart Association; however there are documented cases where this procedure has aided in saving a life where it was used.

- ✓ During a sudden arrhythmia (abnormal heart rhythm), it may be possible for a conscious, responsive person to cough forcefully and maintain enough blood flow to the brain to remain conscious for a few seconds until the arrhythmia disappears or is treated.

- ✓ Blood flow is maintained by increased pressure in the chest that occurs during the forceful cough.
- ✓ This has been labeled as **Cough/CPR**, although it is not a form of traditional resuscitation.

The association further states that this method should not be taught in lay-rescuer classes. It only complicates the real method of CPR. In virtually all lay-rescuer courses, the finding trait that signals an emergency is unresponsiveness. This signals the rescuer to start the A-B-C's of CPR. An unresponsiveness victim won't be able to perform Cough/CPR.

This technique of coughing has been effective in hospital settings during cardiac catheterization. In those cases, the ECG is monitored in the presence of a doctor. If arrhythmia is detected, a nurse will ask the patient to cough vigorously and within the first 10-15 seconds, before the patient loses consciousness. The chance of arrhythmia leaving or the victim getting treated is much better.

**STROKES:**

The warning signs for strokes were listed earlier in this article. The method of the **Smile Test** was presented by researchers from the Univ. of North Carolina Medical School at one of 450 presentations at a conference sponsored by the AMERICAN STROKE ASSOCIATION. The material presented showed some positive results, but was a very small study.

The association has not taken a position on the topic or endorsed it. The paper was titled, "Untrained Adults Can Identify Symptoms of Stroke by Directed Use of the Cincinnati Pre-hospital stroke scale." The paper basically called for asking three questions that bystanders could ask to identify a stroke. These are:

- ✓ **S-Smile** – Ask the individual to smile
- ✓ **S-Speak** – Ask the individual to talk (Speak a simple sentence) (it is sunny today)
- ✓ **R-Raise** – Ask the individual to raise both arms.
- ✓ **S-Stick – (New)** – Ask the individual to **stick out his tongue**. If his tongue is crooked or goes to one side or the other, this is an indication of a stroke.

**The acronym to remember is: S-S-R- (Smile-Speak-Raise the arms-Stick out the tongue.**

**In the case of a suspect heart attack or a stroke, don't hesitate - Minutes are valuable!**

Get emergency help with 9-1-1 or rush the victim to the nearest hospital or health clinic (if possible, have someone call the facility ahead of their arrival to be ready for the victim.) Check the time when the symptoms were first detected, as this is good information for the EMTs or the health facility.

***IGNORING A WARNING  
CAN CAUSE MUCH MOURNING***

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**SAFETY STARTS WITH "S"  
BUT BEGINS WITH "YOU"**