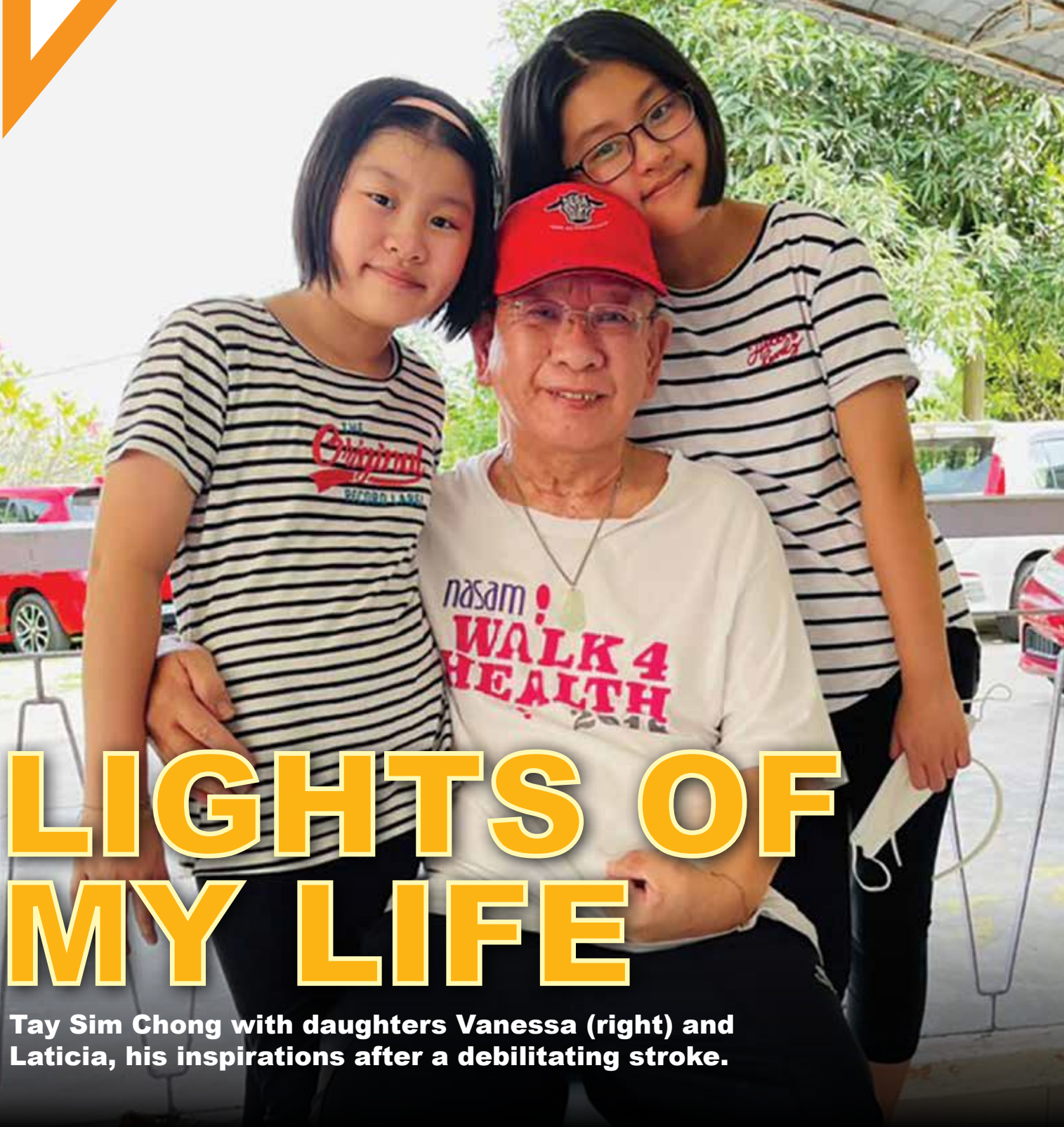


Stroke*news*

YES! THERE IS LIFE AFTER STROKE

KDN PP 10647/04/2013 (032074)

ISSUE 1 | FEBRUARY | 2022



LIGHTS OF MY LIFE

Tay Sim Chong with daughters Vanessa (right) and Laticia, his inspirations after a debilitating stroke.

Founder Chairman's Message



Janet Yeo
Founder Chairman

It is a new year and a time when many of us will be welcoming new beginnings. It is definitely a time to embrace changes. Allow yourself to go with the flow.




Life is never always the same. Every day we should try to move on and adapt as best as we can.

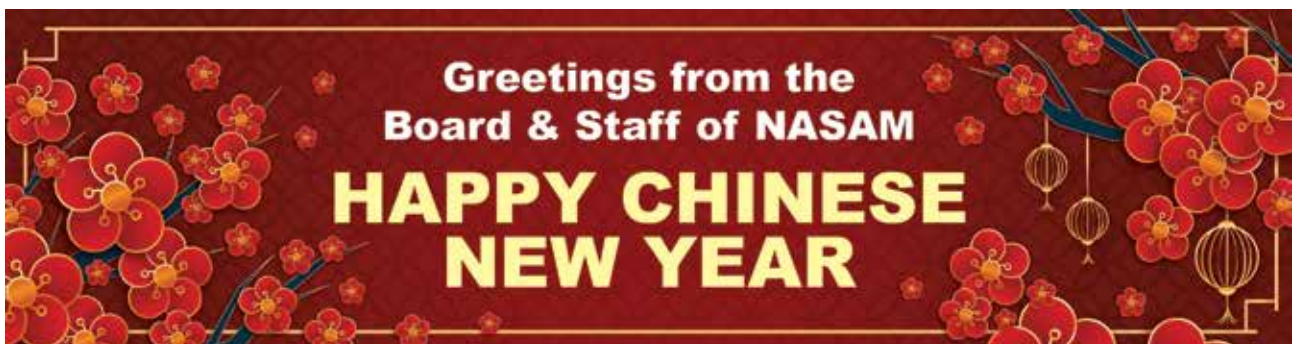
I can recall a time in 1989 when, at age 44, I had a stroke and the enormous changes and challenges that came my way. My whole world was turned upside down and my life, as I knew it then, was completely altered. I had to choose to go on and fight my stroke or wallow in self-pity.

My two young toddlers, parents and husband were my inspirations. This coupled with my strong faith in God helped me to keep going. Today, 33 years later, LIFE is good, better than my pre-stroke days.

So how about Covid 19? It is a time when each of us have faced our own trials and tribulations. Over time, we have each found our own ways of surviving. I humbly choose to believe that only God can see me through these turbulent times. I prefer to think that there is HOPE at the end of this dark chaotic tunnel.

On this positive note I would like to say HAPPY NEW YEAR to:

-  My dear, fellow Stroke Champions. Accept your stroke, move on and enjoy your new life.
-  All our donors. Thank you for your continuous support and for believing in our work.
-  Our staff, board members and volunteers. Thank you for your commitment and dedication.





Challenging A Stroke For His Daughters

Tay Sim Chong is a happy father of two girls, Vanessa (11) and Laticia (9). His daily routine is to wake up by 5am, prepare breakfast and within the hour get the girls ready for school. By 6.30am they are dropped off. By noon he usually completes household chores, and after the girls return from school, the rest of the day is spent being attentive to their various needs. By 10pm the kids are in bed and Tay has a brief “me” time.

For the past nine years this routine of dedicating his life to the needs of his precious daughters has kept Tay happy. Today, at 61, he feels he is living his second chance at life after a stroke to the fullest. Here he shares his journey with **Strokenews.**

Inspiration

A stroke at the age of 52 broke me up in many ways. Mentally the world that I was familiar with began to fall apart. I couldn't cope. Physically I was totally dependent and wheelchair bound, unable to take care of even simple, basic needs.

My stroke attack, brought on by high blood pressure, was on January 13, 2013, just after Chinese New Year celebrations. At that time, I was the branch manager of a fast-food outlet in Ayer Keroh, Malacca. Before the stroke I used to suffer from frequent headaches and dizziness. I would take some Panadols and continue working.

When I had the stroke, I was rushed to Malacca General Hospital and then transferred to Hospital Kuala Lumpur. I had a hemorrhagic stroke and was in coma for four days. After a craniotomy I was sent back to Malacca. I spent a total of seven weeks in hospital.

When I was discharged my family arranged for acupuncture and massage. There was also home physio, but after a week the therapist had to leave town.



His young daughters keep him on his toes.



Tay was crippled by a stroke at 52 when he was a manager in an F&B outlet.

My girls at that time were aged three and one. I was so lonely, disheartened and wanted to give up on life. But each time I saw my girls I was reminded of a purpose. I knew I had to be strong, fight and recover to help and be a part of their lives. They were and till today are my inspiration.

I started rehab at NASAM Malacca on August 1, 2013, about seven months after my stroke. It made a big difference to me to see many people with a stroke happily continuing their daily lives. I was affected by their laughter and happiness. After a few sessions I became more confident and was driven with new hope to recover.

My daily exercises included customised one-on-one therapy and group sessions. I practiced diligently and in about three months regained minimal functional abilities, such as going to the toilet independently, dressing and eating with minimal help, while still being wheelchair bound. Six months after my stroke I could walk for a short distance with minimal assistance (using a quadripod) and with supervision from my therapists. Fear of falling made me very nervous



Coaxing Laticia during a meal.

but my therapists helped me regain confidence and to try harder. I was also able to join fellow stroke champions and their carers for chats. NASAM helped me to overcome my feeling of low self-esteem.

In 2017, four years after my stroke, my long-awaited dream of buying a car came true. With my own transport I could better manage my therapy and also take my daughters to school or for co-curricular activities. I was in seventh heaven. By now I could talk, walk confidently using a quadripod, cook simple dishes, wash and hang clothes, and drive by myself. The ability to move freely or go anywhere according to my desires is something I cannot express in words. However, about a year later things went downhill. My wife had to go to Vietnam to attend her grandmother's funeral and to visit her family. She hadn't been back to her home country for a long time.



Helping Vanessa with her school work.



An all-round parent, Tay stays super active every day.

Back in Malacca, I had to look after my kids which was very time consuming and it affected my stroke therapy. I stopped my daily group therapy but continued one-on-one at NASAM, once a week after sending my kids to school.

Today I have learned to manage my family and my needs better. I do one-on-one therapy at NASAM

Inspiration

My message to fellow stroke survivors: I had lost hope after a stroke. I came to NASAM and found what I had lost. I learned to laugh again. I enjoyed my journey of recovery because NASAM showed me that there is life after stroke. Don't give up no matter how tough your challenges. And please support NASAM.



whenever I can. I try to join all activities that NASAM organises for the stroke community. One of my most memorable outings was joining the NASAM Stroke Games in 2017 and 2019. I am looking forward to post-pandemic activities which I hope to join.

I would like to take this opportunity to express my gratitude to my family, especially my sister in Kuala Lumpur, who helped financially. Also, to my wife for looking after me during my early days after stroke and for managing our family. My grateful thanks to all my other family members and friends for their moral support.



GROUP THERAPY Is Back At NASAM Clubs



Tracy Chan
Head of Rehab, NASAM



Group sessions encourage stroke survivors to interact and enhances recovery.

As I write this (in December 2021) C19 continues to invade our lives and has brought on many changes for almost two years now. It has been a very trying and highly stressful period since we initially went into lockdown in March 2020. We had just completed the second stroke games in November 2019 and had started planning events such as inhouse training, social activities and therapy provision to take NASAM to the next level in rehabilitation and stroke support.

What has changed the most since March 2020 is therapy provision, especially rehab in groups. Group therapy is a central part of rehabilitation

at NASAM because it offers the stroke survivor more intense and frequent rehabilitation therapy to optimise recovery. It provides two hours of daily exercises to improve strength, endurance and balance.

Research shows that the biggest hurdle faced in relation to stroke rehabilitation is “down time” where the stroke survivor is basically wasting away during his/her waking hours. The findings reveal that 60% of waking time is spent doing nothing and that during this period stroke survivors are also left on their own. I for one think anyone would get depressed in such a situation.

Health

This is disturbing news because the early months of post stroke is when the best recovery/brain healing takes place. At NASAM most newcomers are offered one-on-one as well as group therapy during the early months. We encourage group therapy because it also provides social interaction and inspires the new stroke survivors to work harder on their recovery.

In addition, their family members also get a chance to leave home with them and socialise in a safe environment. This group dynamics helps both the strokees and their families realise they are not alone and raises their hopes when they see the progress that other strokees have made.

Group exercises are also great for those who have completed rehabilitation but want to continue socialising and staying active. This helps prevent deterioration, isolation and depression. The groups at NASAM, before C19, were gregarious. They enjoyed travelling and exploring new destinations and cultivating fresh hobbies. They also gathered regularly to celebrate festivals and birthdays.

Unfortunately, the pandemic changed the way groups operated at NASAM. Early in 2020, we began to run our rehab sessions via the Zoom platform. This was not easily accepted by our



Carers accompanying their loved ones have a chance to socialise.

community. They did not want to join due to hardware and internet issues. Many still preferred the old face-to-face groups. Those with visual and perceptual issues had problems adjusting to the screen. Caregivers also felt deprived of the much looked forward to interaction.

Groups via Zoom, however, still provide the same intensity and duration and it wasn't long before stroke survivors began to realise they could still easily chat and socialise via Zoom. So, in time, our online group sessions began to fill up. The good news is that assessments of their function, generally showed the same trends as when they participated on-site at our clubs.



Group exercises are held daily from Monday to Friday.



Physiotherapists monitor the group sessions and guide strokees.

Face-to-face groups, on-site, have restarted at NASAM clubs. The groups, however, are much smaller now as we need to follow the new SOPs set by the Ministry of Health (MOH). Strokees now are also required to bring some of their own personal items, such as towel, stepper and exercise bands. There is no sharing of food or drinks at the clubs anymore and so they have to bring their own.

Many of our old members who have enjoyed the online sessions continue on Zoom.

Sadly, new strokees and their families seem to find it difficult in these trying times to dedicate the time and resources for group work. This also means that the new strokees are lacking the support and therapeutic intensity that is required for optimal recovery.

We hope that over time, and with further easing of SOPs, our groups will grow in safe numbers and our group therapy will have the same impact it used to have before the pandemic.



Group sessions are conducted safely and meet all MOH requirements.



Before the pandemic group exercises were highly popular and attributed to motivating strokees to work harder.

The Loss Of Communication After A Stroke



Cecilia Santiago
*Specialist Speech-
Language Therapist*

Being unable to communicate, especially speak, after a stroke is devastating to both the person and his or her loved ones. With the loss of communication one's emotional state is eroded, thus affecting self-confidence and, in some cases, the interest to engage and participate in basic daily activities.

Communication impairment affects one third of stroke survivors. This loss can affect one's spontaneous ability to produce speech, the understanding of what is spoken or written, the ability to read aloud and repeat what is said and also one's writing.

Our brain is most diverse. Different parts of the brain are responsible for different jobs. Likewise, different types of communication loss can occur after stroke depending on which parts of the brain have been damaged. Not all communication impairment is the same and do not always cause loss of intelligence or the ability to think.

Typically, the following are types of communication impairment after stroke:

- Aphasia or sometimes called Dysphasia affects your ability to speak and understand what others say. It can also affect your ability to read and write. It occurs across all languages one is proficient in, often in varying severity.
- Dysarthria is the inability to control the muscles in your face, mouth and throat, which affects clarity of speech. This can result in slurred or slow speech or a quiet or breathy voice.
- Apraxia of Speech is difficulty in moving the muscles in your face, mouth or throat in the sequence or order you need for speech. Speech can sound garbled, riddled with speech sound errors or completely unutterable.

You Are Not Alone

It is crucial to remember that although stroke affects each person in a different way, you are not alone in experiencing its shattering effects. There is help out there, which should be explored as soon as a stroke happens. The following suggestions are strongly advised:

1. Immediate medical intervention is vital in preventing the progression and onset of further strokes, regardless of how 'minor' the stroke appears. Do pay particular attention to transient ischemic attacks (TIAs). TIAs are described as "mini strokes", where the symptoms of the stroke wear off within 24 hours and sometimes within minutes. TIAs are a warning sign for future strokes and therefore need to be addressed.



After a stroke, survivors have to work hard when attempting to communicate.

2. Seek the help of a Speech-Language Therapist (SLT) as soon as possible. The SLT is responsible for determining the nature and type of the communication disability. A thorough assessment and evaluation of one's strength and difficulties are conducted using a variety of tools. The SLT will also offer advice on techniques and strategies that will aid communication. Therapy entails regular exercises that help improve communication skills and safe swallowing. It is best for techniques and strategies taught during therapy to be practised at home on a daily basis.

3. Strong family support is essential. Family members are important during rehabilitation to encourage motivation and hope. Communication is a two-way process. Both the stroke survivor and family members need to develop communication skills that are functional and that are useful and reliable in day-to-day conversations. A person with a

communication disability has to work hard when attempting to communicate. Therefore, if a family member is impatient or continuously corrects the stroke survivor's mistakes, it can sap confidence and reduce motivation.

It is important to try to maintain communication in as 'normal' a way as possible, as opposed to trying to get the stroke survivor to say



Therapy includes exercises that will help to improve communication and swallowing.

‘the correct version’ even if the message has already been conveyed. Have a laugh! Have fun when communicating. Acknowledge every effort taken by the stroke survivor to communicate.

4. Do not isolate yourself from society. Following a traumatic experience like a stroke, it is natural for the stroke survivor to grieve for the loss of his/her skills and abilities. Depression can easily set in and this requires close monitoring. An option is to attend support groups like those held at the National Stroke Association of Malaysia (NASAM) that take a holistic approach to improving the quality of life after stroke. Group therapy, whether held in person or online, is used to allow stroke survivors gain confidence from seeing others go through rehabilitation. Feedback from stroke survivors indicate that the support and encouragement from another stroke survivor often outweighs that from someone who has not experienced a stroke.

Rebuilding a social life is important to re-establish your role in society, therefore re-connecting with friends is recommended. Help your friends understand your communication difficulties and encourage them to use communication strategies that have been identified as effective. Ensure you are enabling many opportunities to practise communication.



A support group at NASAM initiated by stroke survivors.



Group therapy helps stroke survivors gain confidence.

5. Foster independent communication skills as much as possible. When loss of ability occurs and self-confidence has been eroded, the stroke survivor is inclined to depend heavily on carers (maid, family member or friend) to meet his/her needs. In turn, the carer is also inclined to speak on behalf of the stroke survivor to avoid embarrassment and in an attempt to help the stroke survivor. However, this can lead to over-dependence and further loss of ability.

Over time ‘non-functional’ communication behaviour can set in. This is where the stroke survivor may avoid communication altogether or uses over-generalised gestures that are not easily understood. Habits like these hinder communication and need to be prevented early on in rehabilitation. It is the role of the SLT to highlight to the stroke survivor and caregivers the specific techniques that can facilitate and stimulate communication without taking away the stroke survivor’s role in a conversation.

Helping Communication

Communication impairment that occurs after a stroke is overwhelming and requires time to manage. How we speak is one of the many characteristics that form our identity as an individual. As communication is a two-way process, both participating individuals in a conversation have their equal share in ensuring that a conversation is coherent. The following strategies act as a guideline for the caregiver when facilitating communication:

Basic Strategies When Speaking With A Stroke Survivor

- Keep the conversation environment free of distractions.
- Gain the stroke survivor's attention when about to speak to him/her by calling his/her name or touching his or her arm.
- Ensure the stroke survivor is wearing his/her hearing aids, dentures and/or glasses (if required).
- Be completely attentive to what the stroke survivor is trying to say. Watch his/her facial expressions to determine if he/she has understood you .
- Speak normally but slightly slower and clearer than usual. Avoid talking to the stroke survivor as if he/she is a child .
- Use short and clear sentences and stress on the key words with varying intonations e.g. "I saw Mrs. Ng at the market."
- Allow time before changing the topic of conversation.
- Give only one piece of information at a time and allow the stroke survivor plenty of time to absorb what you have said e.g. "I saw Mrs. Ng... (pause and check for understanding before continuing) she asked about you."
- If you do not understand what the stroke survivor is saying, be honest and do not pretend. Make it clear that you are re-starting the topic and ask the stroke survivor questions that require a 'Yes' or 'No' answer to work through what he/she is trying to say e.g. "Is it about your hospital visit?"
- Use gestures (for example a simple gesture of sleeping while asking "Do you want to sleep?") and facial expressions to help get your message across.
- Write down key words in the message for example 'hospital' and 'Monday' if the message was 'Your hospital appointment is on Monday.'
- Encourage the stroke survivor to point to word choices or pictures or photos to establish the topic of conversation.
- Encourage the stroke survivor to point to an alphabet board, write key words or draw.
- Allow the stroke survivor time to convey his/her message.

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Footnote: Cecilia Santiago is a Specialist Speech-Language Therapist who specialises in working with adults with speech, language, communication and swallowing disorders.

STROKE

– Recovery and Rehabilitation

Recovery from stroke is a lifelong process. For many, recovery begins with formal rehabilitation. This often starts in a hospital where you have been admitted after a stroke.

Recovery depends on many factors including the severity of your stroke, how quick you accept it, your will to recover and the support received, especially from loved ones.

As a stroke survivor it is best that you learn as much as you can about stroke and get help to plan your recovery. No matter where you are in your stroke recovery journey – remember, there is always HOPE.

After a stroke, getting back on your feet is likely to be one of your top concerns. You may want to, without assistance, do basic things such as:

- Bathe
- Go to the toilet
- Dress or feed yourself
- Tie your shoelaces
- Talk and communicate

You may even want to return to work or learn to drive again. All these are goals of stroke rehab, which is a key part of your post-stroke care plan.

While each person's ability to recover lost skills varies widely, stroke rehabilitation can usually help you achieve the best long-term results.

What is stroke rehabilitation?

The goal is to restore as much independence as possible by improving physical, mental and emotional functions. This must be done in a way that preserves one's dignity and motivates the re-learning of skills.

Normally, rehab starts in the hospital, as soon as you are medically stable. It may begin within one day after your stroke and should be continued after release from the hospital. For some, rehab can take place weeks, months or years later as their condition improves.

Options depend on several factors including:

- ability to tolerate intensity of rehabilitation
- degree of disability
- available funding
- support and other issues, such as insurance coverage, your location and how accessible you are to rehab centres.

It takes time to relearn skills. The most important key to success is well-focused, repetitive practice.

Rehab includes some or all of the following:

- Physiotherapy to facilitate recovery of motor function to help you to regain use of your weak limbs. These may include exercises to:
 - i. Improve control, strengthen and stretch your muscles
 - ii. Increase endurance
 - iii. Enhance balance and coordination



After a stroke most survivors seek to regain lost skills.



Stroke rehab includes Occupational Therapy to help improve memory and other issues.

- Mobility training – More than half of stroke survivors have difficulty walking. Therapy options include the use of walking aids such as braces, walkers or canes to support part of your body’s weight while you relearn how to walk.
- Speech therapy for communication disorders – After a stroke, you may have Aphasia which


means having problems speaking, listening, writing or comprehending speech or other forms of communications. It affects about 40 percent of stroke survivors.

Speech therapy can help you regain some or most of your lost ability. Therapy also helps with swallowing issues. The process can be slow and is often frustrating, but with practise you are likely to improve.

- Counselling – After stroke, you may feel depressed and have difficulty managing your emotions. Anti-depressant medications, counselling by a health professional and participation in support groups may help.
- Training – by an occupational therapist includes rehab to improve memory, insight, reasoning and perception.


To know more about when to begin rehab and the options visit [nasam.org/helpfulguidance/](https://www.nasam.org/helpfulguidance/)

Remembering Stroke **F.A.S.T.**




Facial Drooping

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




Arm Weakness

Ask the person to raise both arms.
Is one arm weak and drifting downwards?



Speech Difficulty

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



Time To Call

If you observe any of these signs,
call 999 immediately!

IF YOU HAVE RISK FACTORS SUCH AS:

- High BP • Diabetes • High Cholesterol • Irregular Heartbeat (or Atrial Fibrillation) • Smoking • Excessive Alcohol • Physical Inactivity • Obesity • Stress • Family History of Stroke

GET MEDICAL HELP!

For a stroke ready hospital near you visit:

<https://mystrokehospital.my/>

How To Reduce Risk Of Another Heart Attack

According to the American Heart Association, about one in five people who've had a heart attack will be re-admitted to a hospital for a second attack within five years. There's plenty you can do to lower the risk of another attack. Also make sure to consult a qualified health practitioner, especially when it comes to taking supplements and herbs.

Mediterranean Diet

Rich in fruits, vegetables, fish, nuts and olive oil, a Mediterranean diet has been consistently linked to better heart health. In one study of heart attack survivors, eating a Mediterranean diet dramatically reduced the risk of suffering another heart attack, as well as other cardiovascular issues or death.

Enjoy Chocolate

If you've had a heart attack, there's no need to give up chocolate, it seems. A little bit of chocolate every week could actually cut your risk of dying from heart disease. According to a review of 14 studies, 100g per week is the sweet



spot for cardioprotective effects. In this case dark chocolate is better than milk or white because it is the richest in heart-healthy flavonols.

Don't Worry, Be Happy

Worrying has been linked to heart disease and could more than double your risk of a heart attack. Feelings of anger and hostility may also promote heart attacks.

Find ways to help deal with negative emotions and boost mental wellbeing. Try therapies such as meditation, yoga and Qigong.



Get Connected

Social isolation and loneliness have been linked to heart disease, heart attacks and death. Get together with friends and family when you can or join a local community group to keep connected with others.



Exercise

Moderate exercise is known to help prevent and treat heart disease, and it appears to be safe and beneficial even after a heart attack. Just make sure to consult a healthcare professional (who



can ideally devise a personalised exercise plan for you) before embarking on an exercise regime.

Sense of Purpose

People with a strong sense of purpose in life have a significantly reduced risk of death from all causes and of cardiovascular events such as heart attack, research suggests. If you feel your life lacks a sense of meaning and direction, take some time to work out your passions and what drives you. Try volunteering or getting a pet to help bring a sense of purpose to your life.

For more info visit www.heart.org





WE ARE HERE FOR YOU –

THE NATIONAL STROKE ASSOCIATION OF MALAYSIA (NASAM)

We give HOPE and a Second Chance at LIFE!

For the past 25 years we have been serving the community with affordable, stroke specific rehab and continue to do so, despite the financial challenges we are facing due to the pandemic. We firmly believe that early rehabilitation is critical to preventing long-term disability.

Our Services For Stroke Recovery

ONSITE

Physiotherapy

Groups (Fun exercise sessions. Include aerobics, strength and balance training, Qigong)
One-on-One (Customised for the individual's needs)

Occupational Therapy

Groups and One-on-One (Improve performance of daily tasks such as eating, bathing and dressing safely)

(Above services are only for those fully vaccinated.)

TELEREHAB – VIA ZOOM

Physiotherapy

Groups (Include aerobics, strength and balance training, Qigong)
One-on-One (Customised for the individual's needs)

Speech Therapy

Groups and One-on-One (helps with swallowing issues and re-learning communication skills)

Occupational Therapy

One-on-One (Improve performance of daily tasks such as eating, bathing and dressing safely)

To help stroke survivors accept and deal with emotional and behavioural issues there's counselling. This is also available to caregivers who have trouble coping or adapting. (Available onsite and online.)

At NASAM we look beyond a weak arm or leg; we empower stroke survivors emotionally and physically, enabling them to return to the community with new found self-esteem and confidence.

CALL OUR HELPLINE: 018-2221878

I was at the prime of my life, everything was great until a stroke turned my world upside down. But because you donated and kept NASAM going over the years, I was able to get my much needed daily rehab and progressed with recovery.

Partner NASAM – GIVE STROKEES A SECOND CHANCE

We are a non-profit organisation that depends solely on public's goodwill and generosity to give HOPE and EMPOWER stroke survivors.

You Can Help By Donating – One-Off or Monthly Contributions.

Please indicate if you require tax exempt receipt. Yes No

Provide full details below as required by LHDN.

DONATION FORM (Complete in capital letters)

Feb 2022

Name: _____ I.C. / Passport No: _____

Company: _____ Company Reg No: _____

Address: _____

City: _____ State: _____ Postcode: _____

HP: _____ Office: _____ Home: _____ Email: _____

ONLINE DONATIONS

- Donate via **Maybank 5122-3152-0534**. Email bank-in slip: nasamdonations@gmail.com
- Donate via website: <https://www.nasam.org/donation/>
- Please provide your name as per your My Kad so that tax exempt receipts can be issued.

Our Clubs

NASAM Petaling Jaya

Since August 1996

No. 12
Jalan Bukit Menteri Selatan (7/2)
46050 Petaling Jaya
Selangor Darul Ehsan
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Tel : +603 7956 4840
Email: nasampj@nasam.org

NASAM Penang

Since June 1997

No. 6, Lorong Midlands
10250 Pulau Pinang
Malaysia
Tel : +604 229 8050
Email: nasampenang@nasam.org

NASAM Sabah

Since November 2001

Kompleks Badan-Badan Sukarela
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Since March 2003

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NASAM Malacca

Since July 2003

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NASAM Perak

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NASAM is a member of the
World Stroke Organisation
(WSO).

1 in 4 of us will have a stroke.

**DON'T BE
THE ONE**

Today stroke is the leading cause of disability worldwide and the second leading cause of death.

In Malaysia, more than 50,000 people are affected by a stroke every year. About 40% are below the age of 60. Stroke is the third leading cause of death.

Stroke is preventable. Some of the common risk factors are: High BP, diabetes, high cholesterol, irregular heartbeats (or Atrial Fibrillation), smoking, excessive alcohol, physical inactivity, obesity, stress and family history of stroke. Know your risk factor, seek medical help and manage your lifestyle better.

Go for a medical check now!