

THE STROKE-PARADOX

-patients decision-making processes to seek emergency care for stroke symptoms

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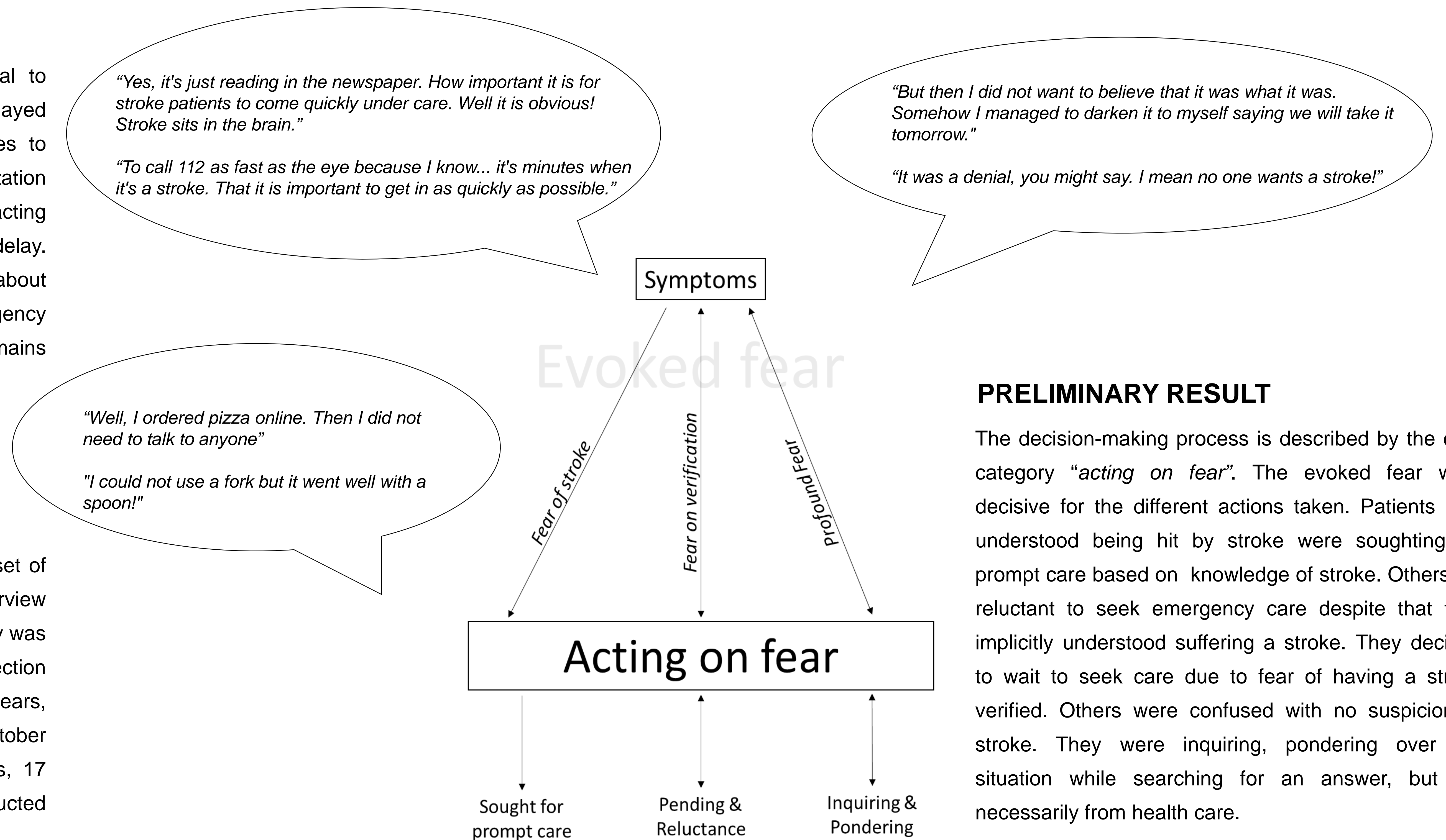
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BACKGROUND

In stroke, focus has been on time from arrival to hospital to treatment but the main reason for delayed treatment is due to prehospital delay. Difficulties to interpret the symptoms as signs of a stroke, hesitation to contact medical care or to not contacting emergency care are associated with longer delay. Despite increased knowledge among the public about the importance of immediately contacting emergency care upon stroke symptoms, prehospital delay remains a major problem.

DESIGN & DATA COLLECTION

To explore the decision-making process from onset of stroke symptoms to emergency care, an interview study using classic Grounded Theory methodology was conducted, where data analysis and data collection take place in parallel. We included patients ≥ 18 years, hospitalized with a first-time stroke during October 2018 to April 2020. We interviewed 36 patients, 17 women and 19 men. All interviews were conducted within four weeks and before hospital discharge.



PRELIMINARY RESULT

The decision-making process is described by the core category “acting on fear”. The evoked fear were decisive for the different actions taken. Patients who understood being hit by stroke were sought for prompt care based on knowledge of stroke. Others felt reluctant to seek emergency care despite that they implicitly understood suffering a stroke. They decided to wait to seek care due to fear of having a stroke verified. Others were confused with no suspicion of stroke. They were inquiring, pondering over the situation while searching for an answer, but not necessarily from health care.

Figure: The decisions-making process