

Recovering from Stroke: One Woman's Courageous Story to Regain Quality of Life

In June 2009, Carol Henderson, a 68-year-old Ottawa resident, was visiting her daughter in New York City. What was planned to be a busy week of theatre, restaurant and museum visits turned drastically wrong when Carol suddenly collapsed from a near-catastrophic stroke. Fortunately, the stroke occurred at her daughter's home and her husband, a physician, was able to take quick action and call for paramedics to take her to a specialized stroke unit. According to Carol, that rapid response, and the prompt and skilful management by the medical team in Manhattan, saved her life.

Initially paralyzed, Carol gradually improved. However, her left arm and hand were locked in paralysis, a condition otherwise known as spasticity. Spasticity is a neurological condition characterized by an abnormal increase, or hyperactivity, in muscle tone. The condition causes affected muscles to continuously contract for long periods of time. They remain stiff and tight, and resist the normal stretching.

After a week in the stroke unit at St. Luke's-Roosevelt Medical Center, Carol was flown back to Ottawa by air ambulance. "I always wanted to be in a private jet," she says, "but that was the most worrisome flight of my life. I didn't know what type of life I was returning to." Carol spent the next two and a half months undergoing rigorous physical rehabilitation. While her symptoms improved, she was still experiencing persistent spasticity in her left arm and hand, which were seriously painful, as well as immobile.

In September, her physiotherapist suggested that BOTOX[®] injections be considered for her left arm. "I felt Carol would benefit from a treatment that had the potential to increase her range of motion and, ultimately, aid in her physiotherapy," says Jolanta Pietrusiewicz, physiotherapist.

BOTOX[®] (botulinum toxin type A) was approved by Health Canada for the treatment of focal spasticity, including the treatment of upper limb spasticity associated with stroke in adults in 2001.¹ It can help reduce stiffness, muscle spasms and other symptoms that reduce disability and promote increased functioning.²

Carol underwent a series of treatments. In the period that followed, the pain and spasticity were reduced, her mobility increased, and most importantly, her recovery was facilitated by making physiotherapy more effective.

Carol eventually returned home in October with a wheelchair, but her use of this was minimal and with great determination, she was able to resume walking and to go up and down stairs. This past February, Carol had a second round of BOTOX[®] injections. These again increased her range of motion and reduced the pain associated with her spasticity. Previously an avid cook, gardener and tennis player, Carol has found her activities much curtailed, but she believes there are positives to her experience, most notably the unstinting kindness and support of family and friends.

Currently she is able to do a little gardening and cooking. Motor and sensory function in her left arm and hand remains much impaired, but her doctor is hopeful that some regain of function will be achieved by continued physiotherapy.

“Botox has certainly helped me, and I would certainly recommend it to others in my situation,” says Carol.

Patients should speak to a physician to fully understand their treatment options and to discuss the safety and risk-benefit profile for each. Patients should also keep in mind that individual treatment results may vary.

¹ BOTOX[®] Canadian Product Monograph. Allergan Canada. 2008.

² Esquenazi A. Botulinum neurotoxins in the management of spasticity. Neurotoxin Institute. Available at <http://www.neurotoxininstitute.com>. Accessed on January 2010.