

Changes in thinking, behaviour and mood after a stroke

A stroke can change the way a person thinks, behaves and feels (mood). You may not notice these changes as much as physical changes after a stroke, but they can affect how well your loved one is able to manage.

Changes in the way a person thinks, behaves and feels (mood) will depend on:

- which area of their brain has been injured
- the type and severity of the stroke
- how recently the stroke occurred

Some survivors have no change in the way they think, behave or feel (mood), while others have a significant change in one or more areas. Each survivor is unique.

Below are common changes you may see and how you can help:

Changes in thinking	What you may see	How you can help
Attention problems, difficulty concentrating and speed of processing requests	<ul style="list-style-type: none"> • Short attention span. • Limited ability to focus on tasks at hand. • Easily distracted. • Needs more time to think during conversation and may take more time to respond. • Needs more time to read and follow TV shows. 	<ul style="list-style-type: none"> • Get rid of distractions (such as turning off the TV or radio). • Speak slowly and give short, simple instructions. • Make direct eye contact – it helps the person follow your instructions. • Give the person time to think and respond. • Repeat what you have said and/or ask the person to repeat it to ensure that they have heard you.
Confusion or impaired memory	<ul style="list-style-type: none"> • Forgetfulness or not able to recall information. • Decreased ability to carry over new learning to the next day or into day-to-day tasks. • Asks questions over and over again. • Confusing details (such as mixing up where the information came from and who said what). 	<ul style="list-style-type: none"> • Encourage the person to use memory aids such as a calendar to record appointments. • Maintain a consistent routine. • Store items in the same place. • Provide short and simple instructions. • Present new information one step at a time. Allow the person time to think about the information and respond before presenting new information. • Use signs or pictures, or other familiar items to assist the person to locate their room. • Repeat answers patiently.

Changes in thinking	What you may see	How you can help
<p>Lack of insight, poor judgment or impulsivity</p>	<ul style="list-style-type: none"> • Acts or responds quickly verbally without thinking. • Poor judge of abilities (such as overestimates abilities or is unable to identify any changes in functioning despite observations that there are changes). • Makes poor decisions and may do unsafe activities. • Lack of awareness of the consequences of decisions or actions on own safety or that of others. • Responds inappropriately in social situations. • Responses may not match the question or situation. • Acts without inhibition such as talking a lot more than before or saying things that are unlike him or her. 	<ul style="list-style-type: none"> • Encourage the person to slow down. • Encourage the person to think about the task and break it down into small steps. • Provide clear and specific directions. • Supervise tasks as needed to make the person safe (such as cooking, transferring from bed to chair). • Give gentle feedback in the moment when he or she is having difficulties. For example: <ul style="list-style-type: none"> ○ let the person know when a comment is inappropriate or suggestive ○ remind the person to use their walker or cane when his or her walking becomes unsteady This will help to raise their awareness of their difficulties. • Remove car keys, unplug dangerous appliances or put away tools if person is at risk.

Changes in behaviour	What you may see	How you can help
Not able to control emotions	<ul style="list-style-type: none"> • Excessive crying or laughing. • Person's feelings and outward show of emotions don't always match. • Emotions are not appropriate to the situation such as laughing during a sad event. 	<ul style="list-style-type: none"> • Explain that it is common to lose control of emotions after a stroke. • Double check with the person to find out whether he/she is indeed feeling the emotion being expressed, or whether it is unrelated to how he or she feels. • Redirect or distract the person if incidents of loss of control are embarrassing to the person or are interfering with an activity (such as call the person's name, ask an unrelated question or ask the person to take some deep breaths).

Changes in behaviour	What you may see	How you can help
<p>Lack of motivation or interest (apathy)</p>	<ul style="list-style-type: none"> • Is unable to plan activities. • Gives up easily. • Resists encouragement to try or try again. • Seems indifferent toward loved ones and/or to activities previously enjoyed. 	<ul style="list-style-type: none"> • Give the person a choice between two activities. • Break down an activity into smaller steps. • Find activities the person might enjoy. • Avoid becoming angry with the person. Understand the lack of interest or motivation may be due to the brain injury/stroke. • Learn what interests the person. Wherever possible, adapt the activities as needed to encourage interest and participation. • Support any involvement in activities, even simple attendance at an event. Try not to get frustrated if the person chooses to leave early. • Encourage the person to try a task again if the first attempt was unsuccessful.

Changes in mood	What you may see	How you can help
Anger, frustration and irritability	<ul style="list-style-type: none"> • Verbal or physical outbursts. • Yelling. • Cursing. • Pacing or restlessness. 	<ul style="list-style-type: none"> • Acknowledge that certain activities can be/are frustrating. • Identify triggers (such as tasks the person is unable to do, pain, frustration with communication difficulties) and attempt to resolve them. • Learn the person's preferences for routine and for completion of tasks. • Alternate easy and more difficult tasks to give the person an opportunity for success and a sense of accomplishment. • Approach the person from his or her unaffected side to reduce the risk of alarm or surprise. • Explain what you are planning to do so he or she is prepared and aware of what is happening. • Offer support or assistance as needed during activities that cause frustration. • Give the person space when they are angry, frustrated or agitated. Trying to reason with the person in the moment may not be helpful. Instead, listen quietly and try to give them time alone if this is what is needed.

Changes in mood	What you may see	How you can help
Anxiety	<ul style="list-style-type: none"> • Constant and overwhelming worry or fear (such as asking “what if...” questions or repeating certain concerns over and over). • Difficulty relaxing, feeling restless or on edge. • Irritability. • Low energy/fatigue. • Difficulty concentrating. • Physical symptoms, such as shortness of breath, heart palpitations, muscle tension, headaches, upset stomach, or sweating. • Problems sleeping (such as trouble falling asleep at night or waking up in the middle of the night). 	<ul style="list-style-type: none"> • Encourage the person to learn more about stroke and to ask the health care team any questions. • Encourage deep breathing exercises and relaxation techniques. • Try to help maintain a normal routine. Adding structure to the person’s day and pleasant activities can also help with anxiety. • Encourage the person to seek peer support (such as a stroke survivors group) or counselling.

Changes in mood	What you may see	How you can help
<p>Depression Occurs in some degree in up to 50% of people after a stroke.</p> <p>Sometimes depression can be mistaken or present as poor memory/ forgetfulness.</p>	<p>Thoughts of suicide or trying to harm self.</p> <p>Any of these signs that are present for more than 2 weeks:</p> <ul style="list-style-type: none"> • Feeling sad, blue, empty or down in the dumps, anxious, nervous. • Crying more than usual. • Feeling hopeless, pessimistic. • Irritability. • Feeling guilty, worthless, helpless. • Loss of interest and pleasure in activities that were once enjoyed, including sex. • Decreased energy, fatigue. • Feeling anxious or worried. • Changes in appetite or weight loss/gain. • Change in sleep patterns – being unable to sleep or sleeping too much. • Problems concentrating, thinking, remembering or making decisions. • Withdrawing from people/events normally or previously enjoyed. • Decreased interest in sex. • Feeling restless and unable to sit still. 	<ul style="list-style-type: none"> • Tell a health care professional right away if the person has thoughts of suicide or trying to harm self. • Encourage the person to talk about feelings with a trusted individual such as family, friends, or a member of the health care team (nurse, doctor or social worker). • Encourage the person to do as much as possible for him or herself. • Offer positive feedback to the person about progress made. • Try to engage the person in activities he or she can tolerate or enjoy.