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fact sheet: women and stroke survey

About the Survey

The Women and Stroke Survey was fielded between March 16 – April 3, 2010 by Harris Interactive on behalf of HealthyWomen and in partnership with the American College of Emergency Physicians, and National Stroke Association. Conducted online among 2,000 U.S. women between the ages of 25 and 75, the survey was designed to gauge their opinions and knowledge regarding stroke risks, symptoms and prevalence.

The survey was funded by Genentech, a wholly-owned member of the Roche Group. For additional findings from the survey, visit http://www.healthywomen.org.

Did You Know?

General Results¹

- > In the survey, only **27** percent of women could name more than two of the six primary stroke symptoms. Multiple studies have shown that women take significantly longer to get to the hospital than men after the first sign of stroke^{2,3}, and not knowing the symptoms may cause an even greater delay.*
- Women are **twice as likely** to die from stroke as breast cancer ^{4,5}, however women in the survey believed \triangleright breast cancer is *five times* more prevalent than stroke and 40 percent of women said they were only somewhat or not at all concerned about experiencing a stroke in their life
- > Despite the fact that every year more women suffer strokes than men⁴, 68 percent in the survey said they are not aware of this
- One in four women surveyed did not believe stroke can happen at any age
- > Despite the growing prevalence of stroke in women, 71 percent of those surveyed said they are only somewhat or not at all knowledgeable about the risk factors for stroke
- In the survey only *eight percent* of women have brought up a conversation about stroke with their physician, \geq and only **11 percent** said their physician initiated a conversation about stroke with them

Demographic Results¹

- > African-American women suffer a significantly higher number of strokes than Caucasian women⁴, yet in the survey. African American women were less likely to correctly identify what causes a stroke compared to Caucasian women
- > Stroke is *a leading cause of death for Hispanic women*⁴ but Hispanic women surveyed were significantly *less aware* of stroke symptoms than Caucasian women
- In key areas responses varied by age: \geq
 - Women under 50 were significantly less confident about their level of knowledge of stroke than those 0 above 50
 - Younger women between the ages of 25 29 were significantly less likely to correctly identify risk 0 factors of stroke
 - Women 50 and older typically turn to their family physician for healthcare information, while those 0 under 50 are more likely to ask their friends and family

* For the purposes of this survey, the six primary symptoms of stroke were considered to be: Difficulty speaking or confusion, Body symptoms (e.g., numbness, weakness of one side or arm/leg), Facial symptoms (e.g., numbness, weakness, drooping of face), Trouble keeping balance or dizziness and Severe headache.

Methodology

In order to be included in the study, women had to be residents of the United States who had not suffered a stroke. Data were weighted to be representative of the entire U.S. population of women 25-75 on the basis of age, education, race/ethnicity, region, and income. Propensity score weighting was also used to adjust for respondents' propensity to be online. Significance testing among age, race, and region was conducted at the 95 percent confidence interval (p<0.05). No estimates of theoretical sampling error can be calculated; a full methodology is available.

⁵ Jemal, Ahmedin, Siegel, Rebecca, Ward, Elizabeth, Hao, Yongping, Xu, Jiaquan, Thun, Michael J. (2009). Cancer Statistics, 2009. CA Cancer J Clin 2009 59: 225-249.

¹ Data on file.

² Mandelzweig, L., Goldbourt, U., Boyko, V., & Tanne, D. (2006). Perceptual, social and behavioral factors associated with delays in seeking medical care in patients with symptoms of acute stroke. Stroke, 37, 1248Y1253.

³ Barr, J., McKinley, S., O'Brien, E., & Herkes, G. (2006). Patient recognition of and response to symptoms of TIA or stroke. Neuroepidemiology, 26, 168Y175.

⁴ American Heart Association. *Heart Disease and Stroke Statistics* — 2010 Update. Dallas, Tex.: American Heart Association; 2009.