A step forward in stroke care in Sri Lanka.

In addition to weak side limbs and inability of speech, he required a nasogastric tube for feeding and a urinary catheter. When he was admitted to a teaching hospital for further evaluation, CT scanning and the diagnosticians confirmed his diagnosis of stroke. He was discharged from the hospital a week later with no inability of speech but with weakness in his left arm. He was advised to undergo physiotherapy to improve his walking ability. According to our observations at the stroke unit of the National Hospital of Sri Lanka, Nasogastric tubes could be removed in 99% of stroke patients within a mean duration of 4 days.

Mr. Imam was not lucky to be in the busy medical ward for that long and had to be discharged. On the day he was discharged, he was depressed and had suicidal ideation. Proper rehabilitation was offered him to improve his walking but he declined on the advice of his family. He was told to undergo physiotherapy to improve his walking ability. His family members had no training in tube feeding or managing a urinary catheter.

Dr. Abdulla says that smoking outside or near children while they are playing may not remove the potential pollutants clinging to smokers themselves but will make the children inhale some of these pollutants. If they are smoking near children, then the children will inhale some of the pollutants.

Majority of stroke in Sri Lanka - out of the hospital

In Sri Lanka, 90% of stroke patients do not enter the hospital at all. Stroke patients, when informed of the danger of the disease, will not seek medical help, especially if they are smoking. The stroke unit is a ward dedicated to the care of acute stroke patients and for stroke inpatient management. The stroke unit is a ward dedicated to the care of acute stroke patients.

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