

STROKE ADVISORY COUNCIL MEETING MINUTES

May 22, 2025

1:00 - 2:30 pm

Members/Partners

Present: Wally Ainsworth, SAC member, NC OEMS; Maxine Arena, Constellation Quality Health; Pat Aysse, American Heart Association (AHA); Kim Baradei, Elevate Speech Services; Debbie Beecham, UNC Health Nash; Sharon Bibby, Cone Health; Annabelle Black, Novant Health (NH) Greater Charlotte; Anna Bess Brown, Executive Director, Justus-Warren Heart Disease and Stroke Prevention Task Force (JWTF); Adrienne Calhoun, JWTF member, Piedmont Triad Regional Area Agency on Aging; Kate Cardoza, UNC Health; Jennifer Carmichael, Cone Health; Evan Carroll, Yancey County EMS; Judy Clark, NH Greater Winston-Salem; Sylvia Coleman, Constellation Quality Health; Michelle Comp, Novant Thomasville Medical Center; Tom Curley, NH New Hanover Regional Medical Center (NHRMC); Carissa Dehlin, NH Matthews & Ballantyne; Karissa Del Hoyo, NH Kernersville; Tina Dotson, NH Rowan; Matt Ehrlich, Duke; Jennifer Erwin, BELIEVE Stroke Recovery Foundation (SRF); Michael Erwin, BELIEVE SRF; Melissa Freeman, Duke; Anne Geissinger, Suicide Prevention, DPH; Michelle Geroleman, WakeMed; Melanie Greenway, NH Presbyterian; Noah Gurr, Moose Pharmacy; Pamela Hung, BELIEVE SRF; Eseosa Ighodaro, Atrium Health Wake Forest Baptist (AH WFB); Justin Jarrell, Surry County EMS; Robin Jones, SAC member; Jennie Lacy, Durham DBT; Erin Lewis, UNC Rex; Kim McDonald, Chronic Disease and Injury Prevention Section, DPH; Grayson Moore, ECU Health; Terri Moore, Coverdell Stroke Program, DPH; Sharon Nelson, CDI DPH; Gaurang Palikh, JWTF member; Catawba Valley Medical Center Neurology; Diane Perkins, Atrium Health; Jamee Potter, Carolina East Health; Jamie Stephens, Cone Health Coverdell Program; Chuck Tegeler, Vice Chair, Stroke Advisory Council; AH WFB; Danna Thompson, American Lung Association; Leilani Tolentino, AH Cabarrus; Julie Webb, Duke Regional; Erika Yourkiewicz, NH NHRMC.

Welcome and Introductions

Chuck Tegeler, SAC Vice Chair

Stroke Advisory Council vice chair Chuck Tegeler welcomed everyone joining the virtual meeting and explained that chair Peg O'Connell was away at a family graduation. He offered a special welcome to those attending their first Stroke Advisory Council meeting, explained that our meetings are open, and welcomed folks to get involved with our stroke work.

Approval of Minutes

Dr. Tegeler reminded members that minutes from the March 4, 2025 meeting were posted on the website [start with your heart.com](https://startwithyourheart.com) and sent to members via email. He asked for corrections and additions. The minutes were approved by acclamation.

Legislative Update

Dr. Tegeler shared that bill filing deadlines have passed, and the cross-over deadline was May 8th. He explained that partners continue working on the bill to raise the age to buy tobacco products from 18 to 21 and to implement a retailer licensing program.

Dr. Tegeler shared that Dr. Ruth Phillips with Cone Health was in a car accident and will not be with us today to present on Cone Health's Coverdell Stroke Program. Ruth, who is also a Justus-Warren Heart Disease and Stroke Prevention Task Force member, reported that she is OK but is taking pain medication. He wished her a speedy recovery and said that we will have the Cone Health Coverdell

Stroke Program back at a future meeting.

Constellation Quality Health Regional Collaborative

Dr. Tegeler welcomed Maxine Arena, Program Manager, and Sylvia Coleman, strategy consultant, from Constellation Health who presented on their Regional Collaborative. They explained that Novant Health New Hanover Regional Medical Center is actively participating, and they invited others to join their initiatives. Get more information and join by emailing regionalcollab@constellationqh.org (see slides).

Q: Dr. Eseosa Ighodaro said that Atrium Wake Forest Baptist is working on integrating community health workers and patient advocates as part of their Coverdell Program and asked how stroke teams can access the Vega bi-directional referral platform.

A: Maxine responded that she would be happy to connect folks to Katie, the product manager for Vega.

Say Suicide: Stroke and Mental Health

Dr. Tegeler announced that May is Mental Health Awareness Month, and May is also Stroke Awareness Month. He said that the next session will focus on the particular mental health needs of stroke survivors. He introduced Michael Erwin, founder of BELIEVE Stroke Recovery Foundation, and board members and friends of BELIEVE: Pamela Hung, Kimberly Baradei, and Jennie Lacy. He also welcomed Julie Webb, Neurosciences Program Manager at Duke Regional.

Michael, stroke survivor and founder of BELIEVE Stroke Recovery Foundation, introduced the subject and the panel (see slides). He added that, "Of the 30,000 people in NC who have strokes each year, few get rehab."

Pamela Hung shared the story of her husband Miguel had two strokes and suffered severe depression which ended in suicide.

Julie Webb described the state of mental health services for stroke survivors. She noted that the data is variable, that 11-41% of stroke survivors experience depression, that 35-36% have a diagnosis depression, and that there is an increased likelihood of depression in survivors with aphasia.

She described the importance of consistency in screening for depression as depression peaks from six months to two years post stroke. There are various tools for screening for depression, mood, and anxiety. PHQ is widely used. She noted that research shows the Hamilton depression scale is one that could be used. She posed questions to consider:

Q: When is the right time to screen?

A: Probably not in the inpatient setting

Q: Where is the best place to screen?

A: At the primary care visit or in Neurology appointment or perhaps both.

Q: What is the proper way to follow up after screening? Where do they go from here so as not to get lost in the system?

Kim Baradei, speech therapist, noted that AHA estimates that 75% of survivors have some level of permanent impairment following stroke and that 30% have impairments that are severe. She described the physical and chemical in the brain caused by stroke.

Communication deficits make it difficult for stroke survivors to participate in talk therapy to help them get better. She noted the differences in left and right brain stroke communication deficits and

encouraged screening those who have left brain strokes and those who have right brain strokes. Depression carries stigma in our society. It's important to say the word. 75% of stroke survivors are more likely to commit suicide than the average person. Kim also noted that 40-75% survivors are more likely to avoid social situations (self-isolate) following stroke. She shared multiple resources for finding mental health support, support groups, alternative therapies, etc. (see slides).

Jennie Lacy, clinical psychologist, shared the story of her complex stroke in 2021. She worked hard in rehab to learn to walk and talk and care for herself. She said that often patients do not understand that they can advocate for themselves. She accrued serious debt paying for rehab out of pocket. After the acute phase of her recovery, support from family and friends dwindled. She leaned in to acceptance and focused on the things she could do. She realized suicide was not an option and began trauma therapy.

Assessing, understanding, and intervening at every session can make a difference. Jennie noted that stroke survivors are constantly asked about falls and physical safety and suggested we ask often about their psychological safety.

Stroke survivors constantly face invalidation.

It takes a lot to sit in the darkness with someone who is depressed or suicidal because we're afraid they'll get worse.

Talk about depression and suicide in a matter-of-fact, natural way-to normalize it.

Questions and Answers

Q: Chuck Tegeler said that was the most powerful series of presentations on this topic he's ever heard. Stroke is a trauma. He asked if anyone is using autonomic nervous system function as a marker for stroke depression. There are interventions that improve autonomic nervous system function. Is anyone using it for stroke?

A: Jennie Lacy responded that, though she doesn't have an empirically supported answer, in her experience, her eyes stopped working together after her stroke. Her autonomic nervous system was caught in fight or flight. She is now doing vision therapy and has added acoustic therapies. She added that we need more research on the autonomic system for healing from stroke.

Q: Kate Cardoza, clinical social worker, thanked everyone for sharing their stories and echoed how important validation is and how important it is to normalize depression. I say to patients, "This sounds like it has been so hard," and often they say no one has ever said that to them before. Being present with people is powerful.

Q: Eseosa, a stroke attending, thanked everyone for their presentations and said her eyes are open to the importance of stroke providers conducting depression screening.

Q: Terri Moore asked if the percentage of survivors with depression is low due to not seeing qualified therapists to get an "official" diagnosis.

A: Julie noted that there are many factors, and one problem may be the actual diagnosis code for post-stroke depression; individuals may not feel comfortable disclosing their depression symptoms. She added that there's more to screening than two questions on a PQ-2. Families and friends also have the responsibility to recognize depression and say, "Something's not right."

Kim added that depression is not a sign of weakness and that there are physical things happening in the brain that cause depression as well.

Robin Jones posted that she met Jacob Dowdell, the author of Big Jake's Stroke of Genius, a book about his four strokes and post-stroke depression. The book is available on Amazon.

Dr. Tegeler thanked the panelists and thanked all participants for attending.

The next SAC meeting be in person (and hybrid) on September 5 at UNC's facility in Morrisville. Please mark your calendars and plan to join us.

2025 Stroke Advisory Council Meeting

September 5- in person in Morrisville hosted by UNC Health
November 12- virtual 1-2:30