

hh

*by* Hh Hh

---

**Submission date:** 26-May-2021 07:01AM (UTC-0700)

**Submission ID:** 1594592108

**File name:** path\_discussion.edited.docx (24.09K)

**Word count:** 726

**Character count:** 3901

**Path Discussion**

Name

Institution

Course

Instructor

Date

### Prompt 1

Body cells play a critical role in the body of a human being. Therefore, they always require a continuous supply of oxygen and nutrients. Nevertheless, when the cells in the brain tissue do not get enough oxygen, they start to die hence causing a stroke. Ojaghihaghghi et al. (2017) emphasized as stroke a health emergency requiring critical treatment because when detected, early therapeutic procedures can start, reducing the chances of permanent damage. There are two main types of strokes the Ischemic and Hemorrhagic stroke. Ischemic stroke is also called cerebral ischemia and is instigated by the obstruction in an artery that provides blood to the brain (Randolph, 2016). The obstruction decreases the blood and oxygen supply to the brain resulting in harm or death of brain cells. Therefore, this condition will require special and rapid attention to avoid causing permanent harm to the brain. Also, Randolph (2016) claimed that nearly 87 percent of all stroke illnesses are ischemic hence more prevalent. The symptoms of ischemic stroke vary depending on the area of the brain that is pretentious. Nonetheless, some symptoms are usual, including dizziness, vision challenges and paralysis in the limbs.

Hemorrhagic stroke is also referred to as anticerebral hemorrhage (ICH). Ojaghihaghghi et al. (2017) stated that this type of stroke happens when a blood vessel is disrupted and blood accrues in the tissue where the breakage occurs. Therefore, this will result to pressure on the brain and leading to a loss of blood to the close parts. Also, Ojaghihaghghi et al. (2017) added that instant therapeutic action is essential for the recovery process. However, prevention is vital. The symptoms of a hemorrhagic stroke also have differences in the symptoms from one individual to another. However, they usually occur instantly after the disease. Some of the symptoms comprise nausea, unexpected and spartan headache and total or partial loss of awareness. Similarly, ICH has two causes, including aneurysm and arteriovenous malformation.

## References

Ojaghihaghghi, S., Vahdati, S. S., Mikaeilpour, A., & Ramouz, A. (2017). Comparison of neurological clinical manifestation in patients with hemorrhagic and ischemic stroke. *World journal of emergency medicine*, 8(1), 34.

Randolph, S. A. (2016). Ischemic stroke. *Workplace health & safety*, 64(9), 444-444.

## Prompt 2

Tissue Plasminogen Activator (tPA) is an available protein created on endothelial cells which line blood vessels. Therefore, tPA stimulates the change of plasminogen to plasmin, an enzyme accountable for the cessation of clots, hence assisting in reinstating blood flow to the brain (Kim, 2019). Furthermore, tPA is an influential and essential medicine to be directed by a professional physician or doctor.

Moreover, Dewar & Shamy (2020) claimed that tPA is the only stroke drug accepted by the American FDA. Therefore, the drug is specifically used for the treatment of ischemic stroke. Nevertheless, the drug needs to be directed as early as possible before the brain cells deteriorate, hence distressing the roles of the brain. Also, Dewar & Shamy (2020) emphasized that tPA can reestablish the flow of blood to the brain in a small amount of time to some stroke patients. Besides, many healthcare organizations use tPA to halt the blood clot that instigates the ischemic stroke if an individual is suitable and is within the 3-hours gap after the symptoms had started showing.

tPA can be directed intravenously or straight to the impasse region of the brain by inserting the catheter through the groin. Kim (2019) claimed that the intra-arterial method is particularly valuable for individuals who have presently had surgery and did not manage the 3-

hours gap when the symptoms emerged and are on blood thinners. Also, individuals with tPA in a local healthcare facility can be relocated to a higher-level specialized hospital for more action and therapy. Before one can get treatment using tPA, they need to have a computerized tomography scan. The scan is essential in ensuring one does not get treatment with tPA while having other conditions that can result in immense dangers and risks to other conditions such as pregnancy, blood clotting disorders and head injuries that may affect their health.

#### References

- Dewar, B., & Shamy, M. (2020). tPA for acute ischemic stroke and its controversies: a review. *The Neurohospitalist, 10*(1), 5-10.
- Kim, J. S. (2019). tPA helpers in the treatment of acute ischemic stroke: are they ready for clinical use?. *Journal of Stroke, 21*(2), 160.

hh

---

ORIGINALITY REPORT

---

0%

SIMILARITY INDEX

0%

INTERNET SOURCES

0%

PUBLICATIONS

0%

STUDENT PAPERS

---

PRIMARY SOURCES

---

Exclude quotes Off

Exclude matches Off

Exclude bibliography On