

STROKE OR TIA?

DO YOU KNOW THE DIFFERENCE?

JUNE 2003

Only 9 percent of Americans are able to give the definition of a transient ischemic attack, commonly referred to as TIA, or identify a symptom of TIA, according to a recent survey. TIA symptoms are the same as those for a regular stroke, but TIA symptoms resolve themselves within 24 hours. The phone survey of more than 10,000 people found that 3.2 percent had TIA symptoms but never saw a physician about them. Among those with a TIA diagnosis, 16 percent saw the doctor more than a week after the symptoms occurred.

"Many people think if symptoms go away, it's not important," said Neurologist Walter Truax, M.D., "but it's just as important to deal with the transient symptoms because the likelihood of another stroke is highest within 30 days of a TIA."

The bottom line remains. If you believe you may have had a stroke, never ignore symptoms, even if they seem to be improving.

NEUROVASCULAR UPDATE 2003

Over 100 medical professionals including physicians and nurses attended the 2003 Neurovascular Update sponsored by Culicchia Neurological Clinic and West Jefferson Hospital. Featured speakers included specialists in interventional neuroradiologists from Emory University in Atlanta.

"This year's program was a complete success providing cutting edge information for medical professionals in our community," commented neurosurgeon Frank Culicchia, M.D. "At Culicchia Neurological Clinic, our doctors are utilizing state of the art technology to treat neurological conditions such as aneurysm and stroke. It was enlightening and an honor to share our own experiences with others in the neuroscience specialties."

Making Strides in Physical Therapy for Brain Disorders

Researchers in Germany have concluded that physical therapy can change the way body parts are represented in the brain, a finding researchers hope will lead to improved therapies. In the study, musicians underwent therapy in which parts of their hands were immobilized with a splint while they exercised. The magnetic currents in the patients' brains were measured before therapy and after eight days of therapy.

Before treatment, their brains transmitted an abnormal representation of the hand. Afterwards, manual dexterity was improved and the brain representation became more like that of a normal hand.

Neurologist Walter Truax, M.D. of Culicchia Neurological Clinic said the research may cause some rethinking of how physical therapy is used to rehabilitate brain injuries. "We may have to change some of our traditional therapies which have emphasized teaching a patient to dress, walk, etc. by using only the good side, for example, dressing with one arm, to instead utilizing forced use therapies, which may improve function in the paralyzed limb. What role this forced therapy plays in the future is unknown."

NEUROLOGICAL SURGERY

Carl F. Culicchia, M.D.

NEUROSURGERY/ COMPLEX SPINE

John C. Steck, M.D.

NEURO-ONCOLOGY

Syed Nasir, M.D.

NEUROSURGERY/ NEUROVASCULAR SURGERY

Frank Culicchia, M.D.

INTERVENTIONAL NEURORADIOLOGY

Robert C. Dawson, III, M.D.

PHYSICAL MEDICINE/ PAIN MANAGEMENT

Maria Carmen

E. Espiritu, M.D., P.T.

Meda K. Colvin, M.D.

NEUROSURGERY/ GAMMA KNIFE

Robert L. Applebaum, M.D.

NEUROLOGY

Steven T. Atkins, M.D.

R. Charles Fiore Jr., M.D.

John L. Freiberg, Jr., M.D.

William A. Martin, M.D.

Michael A. Puente, M.D.

Walter D. Truax, M.D.