

Recovering from a BRAINSTEM stroke - Jamie & Jessica Robinson

Understanding Brain Stem Stroke: Symptoms, Causes, and Treatment

Brain stem stroke is a serious medical condition that requires prompt attention and awareness. As a life-threatening event, understanding its nuances, symptoms, causes, and treatment options is crucial for both patients and caregivers. In this article, we delve into the depths of brain stem stroke, providing comprehensive insights to empower individuals with knowledge and resources.

Unraveling Brain Stem Stroke

The brain stem, situated at the base of the brain, controls vital functions like breathing, heart rate, and blood pressure. When a stroke occurs in this region, it disrupts these essential functions, leading to potentially severe consequences. Unlike other types of strokes, brain stem strokes can present unique challenges due to the intricate network of nerves and arteries in this area.

Symptoms to Watch For

Recognizing the signs of a brain stem stroke is paramount for early intervention. Symptoms may include:

- Sudden weakness or numbness on one side of the body
- Difficulty speaking or understanding speech
- Vertigo, dizziness, or loss of balance
- Impaired vision, double vision, or difficulty swallowing
- Severe headache, often described as the worst headache of one's life

Given the critical functions controlled by the brain stem, any suspicion of a stroke warrants immediate medical attention.

Causes and Risk Factors

Brain stem strokes typically result from a disruption in blood flow to the brain stem, either due to a blood clot (ischemic stroke) or a ruptured blood vessel (hemorrhagic stroke). Several risk factors contribute to the development of brain stem stroke, including:

- High blood pressure
- Diabetes
- Smoking
- Obesity
- Family history of stroke or cardiovascular disease

While some risk factors are modifiable through lifestyle changes and medical intervention, others, such as genetic predispositions, require proactive monitoring and management.

Diagnosis and Treatment

Diagnosing a brain stem stroke often involves a combination of medical history evaluation, physical examination, and imaging tests such as CT scans or MRIs. Once diagnosed, immediate treatment is crucial to minimize damage and improve outcomes. Treatment options may include:

- Clot-busting medications (thrombolytics) for ischemic strokes
- Surgical interventions to remove blood clots or repair damaged blood vessels
- Rehabilitation therapies to regain lost functions and improve quality of life

The effectiveness of treatment largely depends on the timeliness of intervention and the extent of brain stem damage.

Empowering Through Education

In the digital age, access to reliable information plays a pivotal role in healthcare decision-making. While websites like Stroke.org provide valuable resources, it's essential to supplement such knowledge with diverse perspectives and expert insights. By leveraging reputable medical sources, educational materials, and

professional networks, individuals can gain a deeper understanding of brain stem stroke and its implications.

Conclusion

Brain stem stroke is a formidable adversary, but armed with awareness, early detection, and comprehensive treatment strategies, individuals can confront this challenge with resilience and hope. By fostering a culture of education, advocacy, and support, we can collectively work towards reducing the burden of stroke-related disabilities and improving the lives of those affected by this debilitating condition.

Through continued research, innovation, and community engagement, we can pave the way for a brighter future—one where brain stem stroke is not just understood but conquered. Let us embark on this journey together, uniting our efforts to create a world where strokes are no longer a threat but a conquerable obstacle on the path to health and well-being.

Full Interview with Jamie & Jessica Robinson

Jamie and Jessica Robinson joined me to discuss their experience with a brain stem stroke from the perspective of both caregiver and patient.

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Introduction - Brain Stem Stroke

Bill Gasiamis 0:00

Hello, everybody, this is episode 301. And my guests today are Jamie Robinson and Jessica Pope Robinson. The husband and wife team have been regular listeners to the Recovery after Stroke podcast and reached out recently to join me on the show to share their respective stroke stories after Jamie experienced a brain stem stroke, at age 49.

Bill Gasiamis 0:23

Jamie and Jessica Robinson, welcome to the podcast.

Jamie Robinson 0:27

Thank you. Nice to be here.

Jessica Robinson 0:28

Thank you for having us.

The first sign of brainstem stroke

Bill Gasiamis 0:30

Lovely to meet you both I'm just trying to work out which way to go with this particular interview. But let's start with Jamie. Jamie, tell me a little bit about what happened to you.

Jamie Robinson 0:43

Well, I think it was November 5, 2022. I woke up in the middle of the night at 5 a.m. with a severe leg cramp and ended up having a stroke in the process. So she called 911. And a few months later, I woke up in the hospital.

Bill Gasiamis 1:15

Wow. Okay. So you recall having a leg cramp? Is that what woke you?

Jamie Robinson 1:20

Well, that's what she says I don't remember anything.

Bill Gasiamis 1:25

So do you know that you were having a stroke? Do you know anything?

Jamie Robinson 1:31

No, I just know that I was getting ready to get up for the morning and get ready to go to work. And then I woke up a few months later in the hospital.

Bill Gasiamis 1:43

Talk about dramatic. How was that for you? Jessica, you woke up, was he looking like he was waking up? How was he acting?

Jessica Robinson 1:54

No, it was about 20 minutes before his alarm would go off at about 5:30 in the morning. And I was dead asleep. And he screamed the weirdest scream I've ever heard he screamed cramp. But it was just he screamed it in the sight of just a horrible way.

Jessica Robinson 2:12

And I woke up and turned on the light and looked at him, and I kept yelling at him to wake up and he wasn't waking up. And he was shaking violently. And he has a kind of foam coming out of his mouth. And I called 911 as I was kind of screaming at him the whole time. And then I just kept screaming at him to wake up while we were waiting for the ambulance to get here.

Bill Gasiamis 2:42

Were you trying to get him aroused? Was it working? Was it doing anything?

Jessica Robinson 2:46

It wasn't doing anything at all.

Bill Gasiamis 2:50

How long did it take for emergency services to arrive?

Jessica Robinson 2:54

Out 10 minutes.

Bill Gasiamis 2:56

Okay. So then there's a whole bunch of time you go to emergency services arrive, and then from there, did you guys end up in hospital quickly? Is it near home? Where is that?

Jessica Robinson 3:10

Yes, the hospital is about five minutes from our house. So they were there pretty quickly. But actually, I was trying to get my keys and all that kind of stuff and let our daughter know that we were leaving. And when I got outside the ambulance had just pulled away which to me seemed odd because it seemed like it had taken a long time for them to leave. But now I know that it was because they were intubating him in the ambulance before they left.

Bill Gasiamis 3:45

Okay, so they're going through the whole process. Already his respiratory system is not working properly, things are going wrong. And you're waiting, thinking, Well, what's going on? What are they doing? Why aren't they moving?

Bill Gasiamis 4:03

That's pretty normal. Because what you're thinking is that just the hospital is where you need to be and everything will be fine. So you guys arrived at the hospital? And then what? What happens then and how do they keep you in the loop? How are you being communicated with what happened?

Jessica Robinson 4:21

So he has been taken aback. I'm still in the waiting room for about 10 minutes. Then they come out and they get me he's in a room in the ER with probably, I don't know, probably 15 people in it. I couldn't even fit in and I sat on a chair outside the waiting room. And this lady who turned out to be the chaplain I did not know did not introduce herself as she was sitting next sent me the whole time with a box of Kleenex.

Jessica Robinson 5:03

And she kind of when they moved him to do surgery and things she sort of followed and my brain just couldn't quite grasp what was going on. And I kept thinking, Well, I don't think this is good that this woman won't leave me alone. Which was very nice. But I just kept thinking that I've been in the hospital many times, and this has never happened before.

Bill Gasiamis 5:28

We'll be back with my guest in just a minute. But first, let me tell you about my new book about stroke recovery. It's titled *The Unexpected Way That A Stroke Became The Best Thing That Happened: 10 Tools for Recovery and Personal*

Transformation. within its pages, you'll discover the journeys of 10 remarkable stroke survivors. Each story illustrates how through resilience and perseverance, they turned their stroke experience into a catalyst for profound personal growth and transformation.

Bill Gasiamis 5:58

This book delves into various aspects of recovery, including nutrition, sleep, and exercise in managing the emotional aftermath of a stroke, as well as providing invaluable tips and tools for maintaining mental well-being. To learn more visit recoveryafterstroke.com/book. And if you're eager to get a copy, simply search my name Bill Gasiamis on amazon.com. So you just think she's a weirdo, admit it. Okay, so she's the chaplain, you find out later, but she's just trying to make sure you've got somebody next to you the whole time.

Jessica Robinson 6:38

Yes, exactly. So I called one of our older kids who worked nighttime. And he got off about seven. At this point, I was about seven, and I let him know what was going on. And he came to the hospital with me. And then, at this point, they had figured out that it was a blood clot. And it was, at this point, I didn't know where it was located. But they just told me he had a stroke, and it was a blood clot.

Jessica Robinson 7:09

He had a mini-stroke in 2020. And they have put him on blood thinners. Because he was on those blood thinners. They couldn't do the drugs to break up the clot. So they had to take him up and do surgery. So we went and sat in the waiting room up there, my son and I and his girlfriend, and the doctor came in and said they were gonna go back and do surgery. And they told me that his exact words were that it was in a very bad spot in the back of his brain. And it turned out it was on his brainstem.

Bill Gasiamis 7:57

And what surgery did they do? How did they retrieve that?

Jessica Robinson 8:02

That's a great question. I'm not exactly sure. I know they just I think where they went up the leg and up there and they were not able to get all of it. But they got most of it. And then when the doctor came in the waiting room, he said that they had saved as much of his brain as they could, which I did not think was a very

good sentence.

Bill Gasiamis 8:36

Although they're trying to tell you, we've managed to save some of it. And that's a good outcome you're going that means there's probably a lot that hasn't been saved.

Jessica Robinson 8:47

Right? Yeah, exactly.

Bill Gasiamis 8:50

So all of this happened. It sounds like this is all the first 24 hours. Okay, and then he comes out of surgery and he's taken to is it the ICU. Where does he go first?

Jessica Robinson 9:04

He is in the ICU. He was in the ICU for about 25 days.

Bill Gasiamis 9:13

Okay. Now I've had the difficult task of being in the ICU with a friend of mine whose daughter had a brain hemorrhage. And it's not fun, because the condition of the person that you're seeing is not responsive. You know, there's a lot of stuff going on in there's machines everywhere. It's just an intense place, but it's a really special place as well. Because if you're going to be unwell from something like this, it's the best place to be in for your potential recovery.

Being in the ICU for 25 days after the brainstem stroke

Bill Gasiamis 9:48

And I want to go back to Jamie for a second. In the first 25 days. Do you have any more recollection whatsoever? Is there any time when you felt maybe you saw the lights, as in the lights of the room, not the other ones? Did you have any idea that you were in the hospital and something was going on?

Jamie Robinson 10:14

It was so weird because I could hear conversations that were going on around me. I could follow what was happening in people's lives. But it just kind of blended into the dream that I was having. Because for the whole time, I was in ICU. I was

unconscious as far as I know. And I was having a dream where I was living a whole nother life. And day by day I listened to the stories that other people told, listened to stories about my mom needing an internet. And it just all blended in.

Bill Gasiamis 11:01

Okay. So you had some kind of awareness of conversations happening around you people turning up and things getting done and things happening around you. Jessica, were you guys telling him the stories of what his mom needed and all that type of stuff?

Jessica Robinson 11:21

No, his mom would just be in the room telling me what was going on. Because she just moved into a house and we're just having kind of conversations. And apparently, he heard them.

Bill Gasiamis 11:33

Yeah, they didn't say anything nasty, did they?

Bill Gasiamis 11:41

Well, we know better from now on never to do that in the ICU. Okay, so it kind of blends all in. And there's no real understanding of how long you're in there of really what's going on what day it is, you just know that you're somewhere else and something is happening around you. And you're able to track it. Are you do you have any concerns? Do you feel, any feelings? Are you worried? Is there any other of that stuff going on? Or is it just not there?

Jamie Robinson 12:13

It's not there. Like I said, during the whole time that I thought I was unconscious, I was having a dream, where I was living in another reality. But she says it now and then I come to and communicate somehow. But I don't remember any of it.

Jessica Robinson 12:37

He was never unconscious after he got into the ICU, like when I got in there to visit him. He was awake, and they had told me when they came to the waiting room that the next 24 hours were key and that he hoped he wake up. And by the time I got into the ICU, he was awake, his eyes were open, and he was able to follow basic like, you know, squeeze my hand with all your toes kind of directions.

Jessica Robinson 13:15

His left side was affected. So that wasn't as good as the right side. But he was able to follow those sorts of directions. So he was never really unconscious. I mean, he was intubated. Still, he was intubated for a very long time. So, they had him on medication. So they make him comfortable.

Bill Gasiamis 13:39

Okay, so it's important, of course, after the surgery to work out, that he's come good and that Jamie is there and things are working amongst other things that are not. But then at the same time to allow for the situation to continue in the process of recovery to continue to occur. He was intubated so that he didn't have to worry about doing things like breathing, etc. And then he was sedated to just keep him comfortable and keep him healing. Then when long enough time passed, he could be sort of woken back up completely.

Jessica Robinson 14:28

Right. So they had him intubated for just the first day I think and then they took the tubes out and he had about 24 hours without them he could breathe on his own but he couldn't cough. So fluid was building up and he was very, very weak and so his coughs were very, very, very weak.

Jessica Robinson 14:54

And he just couldn't keep the fluid down. So they went ahead and put the tubes back in. And then he was intubated for another, about two weeks. And then they told me that they were going to have to, they took the tubes out again and tried for another 24 hours, and he could not do it. And they told me they were going to have to put in a trach.

Bill Gasiamis 15:23

In those 25 days, what are you guys doing? Or what is your routine? Like? How are you managing your day?

Jessica Robinson 15:33

It's pretty much just at the hospital all the time, we have three teenage girls. So there was a lot of, you know, them staying at my parents or my parents staying here with them, or, his mom was in town, so she would spend the night at the hospital occasionally.

Jessica Robinson 15:53

And then if she wasn't staying the night, I would stay the night, when we got to

probably about three weeks or so after the stroke, we would go a night or two without staying the night. But not the first few weeks and they took good care of it. him it was just very hard to leave him.

Jamie Robinson 16:12

So we had really good doctors.

Jessica Robinson 16:16

And nurses, the nurses, and all the staff. Amazing. Yeah.

Bill Gasiamis 16:21

Yeah. They certainly do look like they did a good job because you guys are both here on the podcast talking about it. So let's say, Jaime, are you able to tell us anything about those first few days after the sedation is sort of starting to decrease? And then all the breathing tubes are removed? Are you able to have any memories of that?

Jamie Robinson wakes up in the hospital for the first time

Jamie Robinson 16:47

Well, when I woke up, I went and had a stroke on November 5. I woke up on December 17. And I couldn't move my left arm, I could barely move my fingers. I could barely move my left leg. And I was trying to figure out what was going on. I was just why am I in the hospital. I'm trying to figure out why is everybody here. And I wasn't scared. I was just confused.

Jamie Robinson 17:24

And then I started to get more and more information from family members. And my son was a little freaked out. He's studies up on everything. He gets introduced to something, he finds out everything he can about it. So he was very concerned. And then when I woke up, he was very relieved. So it was a challenge but not scary It was just like, what's going on? The confusion.

Bill Gasiamis 18:01

And how did the family take it Jessica when he's awake? And he started to communicate?

Jessica Robinson 18:08

Oh, it was a lot of relief. Just to know that he was still in there. And although he's still, you know, couldn't talk well, at first because of the trach and everything. Um, you know, he still had a sense of humor, he still was very similar to himself, our daughter mentioned that when she got to the hospital that first day everybody kept telling her that he was going to live.

Jessica Robinson 18:40

And she said I kept thinking, Oh, well, that's great, but I don't want to just live I want him to be my Dad, is he gonna be my dad? And so she was very relieved that she could see that. Although there have been some changes he is still himself.

The deficits after the brainstem stroke

Bill Gasiamis 18:54

Yeah, personality-wise and the way that you go about talking and thinking, etc. Okay, so what is different? We know the left sides have been impacted. To what extent is it still impacted?

Jamie Robinson 19:12

Well, I don't have full control of my left arm yet, but I do move it quite a bit. Now. I can walk by myself without a cane. But I take a cane just in case. My mental faculties are there. But now and then I have a loss for words like now and then it's just like, it's on the tip of my tongue. I just can't think of what it is. It should be something dumb like yellow.

Intro 19:49

If you've had a stroke, and you're in recovery, you'll know what a scary and confusing time it can be. You're likely to have a lot of questions going through your mind. How long will it take to recover? Will I recover? What things should I avoid? In case I make matters worse, doctors will explain things. But, if you've never had a stroke before, you probably don't know what questions to ask.

Intro 20:14

If this is you, you may be missing out on doing things that could help speed up your recovery. If you're finding yourself in that situation, stop worrying, and head to recoveryafterstroke.com, where you can download a guide that will help you it's called Seven Questions to Ask your Doctor about Your Stroke.

Intro 20:33

These seven questions are the ones Bill wished he'd asked when he was recovering from a stroke, they'll not only help you better understand your condition, they'll help you take a more active role in your recovery. Head to the website now, recoveryafterstroke.com, and download the guide. It's free.

Jamie Robinson 20:52

I seem to be a little more patient with my kids. I used to be a real hardass, I used to be a little more stubborn and demanded more respect and now it's just like they get away with everything.

Bill Gasiamis 21:17

Yeah, I wonder why I've been there. I know what that's like, it's settled to sort of take the edge off that kind of shitty part of your personality and to just settle it down a little bit. You don't know when you're doing it at the time. But it is, you know, grinds people the wrong way.

Bill Gasiamis 21:40

And it just makes things a little bit uncomfortable on that. And then you realize, okay, maybe I can just settle down and just be a little less dramatic about things. So it was about 25 days, all up in the ICU. How long were you in rehab? Did you come home quickly? Or were you in rehab for an extended amount of time?

Jamie Robinson 22:05

25 days in ICU, about a month, and immediate care. And then about a month in rehab.

Bill Gasiamis 22:17

Wow. So isn't it strange, like that day is supposed to just be a normal day? Everyone wakes up and goes to work. And then like three months later, that day still hasn't ended? It's just still, yeah, we strange thing that's just working one day you wake up, and then three months later, you're in this completely different place? How quickly did the time go by Jessica?

Jessica Robinson 22:44

Oh, gosh, um, in some ways, I think it felt like it went by fast. Because it just felt like it was just one very long day. I mean, it just woke me up. It was kind of like Groundhog Day, you just wake up and do the same things over and over again, you know, took an I took a leave from work and so it was just getting up, go to the

hospital.

Jessica Robinson 23:10

And you know, and there were quite a few times when we got thrown off like after he was in an intermediate care, I forgot the ICU, everything was going better. And then he had a pulmonary embolism. So we had to deal with that. And that was scary. And then once he got to rehab I think it went faster because you can see the the improvement every day.

Bill Gasiamis 23:42

So how did the pulmonary embolism come to be?

Jessica Robinson 23:46

So well, that they had they put him back on life and put him on blood thinners a few days after his stroke. And then, um a week or so later, they felt like something was wrong. So they did an MRI and he was bleeding where his stroke was. So they took him off the blood thinners.

Jessica Robinson 24:11

And then he developed a DVT and that ended up being a pulmonary embolism. Multiple pulmonary embolisms as they said but they were able to just dissolve on their own. So then it was very scary because they came in and said we are worried that if he put him back on the blood thinners that he will bleed we are worried that if we do not put him back on the blood thinners that he will develop clots because he's prone to clots.

Jessica Robinson 24:51

So there was I mean I had teams of doctors in the room talking to me different teams and The stroke team said we think he will be okay on the blood thinners, the hematology team so we don't want to put him back on the blood thinners. And then they said, you have to make a choice.

Jessica Robinson 25:14

And that was probably one of the scariest moments of my life trying to figure out, you know, having somebody else's life basically in your hands, not knowing if you're going to make the right choice. But the stroke doctor convinced me that he thought we try the blood thinner and check him for blood bleeding. And because at this point, it had been about a month almost exactly since his stroke.

Jessica Robinson 25:40

And he thought that he was strong enough at that point, that the bleeding would stop that the blood thinner wouldn't cause the bleeding, I should say. So. And that that did it they he went back on the blood thinners and he's been on him ever since. So there was no bleeding.

Bill Gasiamis 25:58

I love the passing of the buck routine. There are medical professionals, they've got, you know, probably 1000s of years of education and schooling and experience in that space. And they go you know what, let's just give it to somebody who doesn't know anything about strokes. Like the decision.

Bill Gasiamis 26:18

I mean come on guys, I get what they they just sort of saying like, Wait, somebody has you have to guide us, you have to probably do the what are they thinking is maybe you're going to do the what is your family members? The most likely response going to be? What would they want? And they're hoping that you guys can guide and advise.

Bill Gasiamis 26:46

That's interesting that they do that, that they make your decision, they should be able to just make the decision and then come to you with a suggestion. The most likely outcome in this scenario is the most likely outcome in that scenario. We are going to go with this. Do you agree with us?

Bill Gasiamis 27:04

Yeah, so, Jamie, what's it like when you realize you can't move your left side properly? And it's not working? And then how to your, what are your thoughts about what's next going to be necessary to get you back on your feet? Again? How are you thinking about all of those things?

Jamie Robinson 27:31

Well, the initial thought was, man, this sucks. I tried to lift my hand from the bag and put it on my leg, and then just wouldn't move. So it's just a battle of wills, almost a test. If I just give my hand to the rest of my leg, I'll be good to go. So then at that point, I started realizing it was just day by day. If I can't do it today, I'll do it tomorrow. And now a year and a half later, I've been blogging for the most part, I walk around the house with no support. And it's just taking time and

it's a struggle, but it's it is a challenge. But it's worth it.

Bill Gasiamis 28:24

What kind of work were you doing before?

Jamie Robinson 28:28

Before the stroke, I was in grocery pricing. I was a pricing manager for grocery and so I'm the one you blame for probably stopping being too expensive.

Bill Gasiamis 28:45

Okay, I know where to send the rage. Okay, so you're it's an administrative type of job sitting down at the computer, looking at spreadsheets or that type of thing. Where are you at with work? Are you in any situation where you're able to go back to work or do work like that?

Jamie Robinson 29:07

Well, I had I had just come up and come away from cancer. And so I was still on. I still had some time left for Medical Necessities for that. So whenever I had a doctor's appointment or something going on, they were charged against the FMLA time the light left. So when I had the stroke I had a good strong support team in the office with me I was worried about that. And then the stroke in the hospitalization ate up all the FMLA time and then I was terminated.

Bill Gasiamis 30:00

What is FMLA? stands for?

Jamie Robinson 30:02

Family Medical Leave Act.

Bill Gasiamis 30:06

And you had a cancer scare. So what was that all about? When did that start?

Jamie Robinson 30:14

What was it in September?

Jessica Robinson 30:16

It was in like, May of 2022.

Jamie Robinson 30:21

They found a cancerous node on my lung and then wound up doing

chemotherapy, and they cured it.

Bill Gasiamis 30:31

Okay. Were you a smoker?

Jamie Robinson 30:36

30 years.

Bill Gasiamis 30:38

Okay, so I guess you're not a smoker now?

Jamie Robinson 30:42

No.

Bill Gasiamis 30:46

I can't believe you had to point to her. She shouldn't be the one who's like smacking you on the head with a wooden spoon to make sure you stop smoking. What you're telling me is that it was one of those things that you did, which is quite enjoyable, which you liked doing. Didn't bother doing it right?

Bill Gasiamis 31:08

I know that feeling because I enjoyed smoking too when I was smoking. And of course, that one had to make me stop after the first brain hemorrhage I just stopped. But I know what you're saying. I mean, it's not that you're being forced to stop. It's that you've finally become aware of how bad it can be.

Jamie Robinson 31:30

Well, I know it's bad. I know it helped cause it.

Bill Gasiamis 31:42

So tell me about your voice. It sounds like it's a little bit labored. Is that a result of the tracks? Why does that sound like that? And is it very different from what it used to be?

Jamie Robinson 31:57

Yes, it's different, but it's not so much forced is just, that I'm getting used to it, the muscles are growing back and getting stronger. So I'm getting back in shape as far as that goes. For a while when I woke up, I couldn't speak at all, at the trachoma through sign language and communicated with writing stuff on paper. And I couldn't even drink soda. I could, I had a hard time swallowing. So if I had a

cheeseburger or something, I had a chance to choke. So all that's been gradually getting better. And now I'm having a soda. I opened Oh cans and drank away now. I graduated from speech therapy. Did all these speech practices for me, and I just kept working on it. It's my voice getting better. It's much better than it was back in the day, but it's nowhere near what it was before the stroke.

Jessica Robinson 33:20

He had he couldn't swallow for well, from ICU up until like, probably the middle of rehab. So two and a half months, he was on a feeding tube and couldn't swallow. Then they did testing and everything and they put him on by the time he left the hospital. He was on a solid food diet, a normal food diet. Yeah, normal food diet, but he had to have all of his drinks thickened. And he had to have all the strings sticking up until September 2023. And that's when he was able to start drinking normal liquids.

Bill Gasiamis 34:09

Okay, so it's been a gradual improvement, slow, but gradual, and then eventually you've achieved some decent outcomes. Do we know why the blood clots occurred? Like what is the underlying cause? Is he susceptible to them? Why is it? Do we know?

Jessica Robinson 34:31

They don't know he didn't have a, he had a spleen removed when he was like seven. And they told me in the hospital, they went back and forth for a long time trying to find a cause. They finally thought that because he had his spleen removed because his blood cells are kind of an odd shape and the spleen would eat them. Mopping it will make it enlarge.

Jessica Robinson 35:02

And they finally decided that maybe the disease he has makes them that odd shape. Might also be very rare though they don't know a lot about it, it would also possibly make them sticky and sometimes cause flooding. That coupled with the chemo, because he had just finished chemo in August. And after he finished chemo, he had so much swelling.

Jessica Robinson 35:32

He had a doctor's appointment. Gosh, like, he had a stroke on a Sunday, and he had the doctor's appointment on a Thursday for the swelling. And she had a CT

scan done. And she sent him a message on his Follow My Health that I received while he was in the hospital, on his app that the CT scan looked good. And he was okay to just continue what he was doing. And I sent her a message back and I was like, well, he had a massive stroke. And he's in the hospital ICU. So I don't know, but it didn't seem like it went that well.

Bill Gasiamis 36:21

Poor Doctor. I mean, she was beside herself thinking what? What am I? Yeah, but as far as she was concerned, everything else went to plan. Yeah.

Jessica Robinson 36:36

And at least he did have that moment where we know that there wasn't something we should have done differently. You know, like, Oh, if you're just seeing a doctor before this happened, at least we know that we did. You know, well, yeah.

Bill Gasiamis 36:54

Somebody's getting tired.

Jessica Robinson 36:57

My legs are starting to hurt a little bit.

Bill Gasiamis 37:00

So we've got everything's sort of going well, making a lot of progress. Worked out a lot of things and resolved a lot of issues. Your 49 When it happens, when was your 50th?

Jamie Robinson 37:17

I got released from the hospital. And was it February? And my birthday was in June.

Bill Gasiamis 37:25

June the what? June 19. On June the eighth. Oh. And I'll be 50 this year. Oh, how good was it to get to 50 why it was

Jamie Robinson 37:42

it was very enjoyable. I had a lot of friends over. And we had a big party. And I was stuck in a wheelchair at that time. But it was a very fun event.

Bill Gasiamis 37:57

Yeah. So what's it like now, for you, Jessica, have you been able to get back to

work is everything kind of settled down with that side of it?

Jessica Robinson 38:06

Yes, I'm back to work. He still needs 24/7. More of a supervisor than a care but 24/7 supervision because he is still stroking. He's still a choking risk. Sometimes he's still choked. So someone has to watch him when he's eating. And then he's also still a bit of a fall risk. So someone has to be 24/7. So my parents come during the workday when I'm working and stay with him.

Setting brainstem stroke recovery deadlines

Bill Gasiamis 38:44

He's high maintenance. Jamie, what's the deal? Might, how long is it going to be before? Do you feel like I know you're improving and you've hit all these milestones? How long do you feel before? And this is not a goal that you have to sit in and hit I'm just sort of seeing where you're at with it. How long do you feel before you can be fully independent and you don't need the babysitting, so to speak?

Jamie Robinson 39:11

Well, everything is going according to plan so far, but I don't know. It's just I still can't walk very well. I still have problems with my left arm. I still have stuff I'm working on. But I was told that while I was in the hospital, I was told that for every day that you're in the hospital imagine three days of recovery. So according to that, everything went fine. By about the time I had three days of recovery, for every day I was in the hospital was up. About nine months, 10 months, I was doing much better. I still think I've got probably a year to go before I can get back to work and start being, "normal" again.

Bill Gasiamis 40:31

Yeah, whatever that means. Okay, it was a trick question. I mean, I knew there wasn't going to be a solid answer. But there's a reason for that. Because there's a lot of people listening, who will have kind of deadlines set on I need to get back by this day, or this is the day or whatever. And usually what happens is recovery doesn't go like that. And it takes a bit longer. Sometimes it could take less, but it might take a bit longer than what we want it to.

Bill Gasiamis 41:00

And people get disheartened. They feel a little bit kind of, you know, like, oh, man, I'm gonna be here all the time. And you know, they might start thinking like that. You seem to be taking it all in your stride. Have you always been chill like that? It seems like you're very relaxed and chilled about it. Jessica's shaking her head, and you're nodding your head. So somewhere in between is the truth. How have you responded to adversity in the past?

Jamie Robinson 41:33

Usually, I'm like a crisis manager, I see the crisis. And I tag it head-on, whether it be strategically or forcefully, or just whatever is going to get me through it. Nowadays, like I said, it's day by day, if I can't do it today, just wait tomorrow and try again. The three days per recovery, three days recovery for every day, is more of a benchmark than anything.

Jamie Robinson 42:15

Just look at it, I want to be better by this time. And then you look at your progress up to that point. And you can push yourself to do better. And then you know where you're at, and how much gotta work to get further. Me. I know I'm not ready to be on my own. I know I need people to help me. I know I need people to watch me that's okay. , I go to the gym three times a week. I walk on the track in the gym three times a week. And when I say a walk in the gym, I'm carrying my cane not use not holding on to, to the guide rails just had their writing experiences, just the case. And I pushed myself to go for a mile. And I think it's working out well.

Bill Gasiamis 43:16

Yeah. Sorry to interrupt you.

Jamie Robinson 43:22

That's okay.

Bill Gasiamis 43:24

Yeah, you're going well. So you've just sort of focused on the improvements that are happening, rather than how much improvement you want to see by a certain day.

Jamie Robinson 43:37

Right? Am I doing better than I did yesterday? Yes. Okay. I'm on the right track.

Am I doing better than I did yesterday? No, I need to work harder. That's all about day by day. What can I do the day? How much can I push it for tomorrow? How Where do I see that little bit of improvement? And that little bit of improvement every day will add up. I started doing a row machine that uses just your arms. Started at 90 pounds. That's pretty good. I'm now up to 125. And it's every day every time I go and try it. I add five pounds. And there's too much that's okay, our with what I'm used to. And I'll just keep working it keep working. Just keep trying to do better.

Bill Gasiamis 44:40

So you're getting stronger. You're getting more resilient, you're able to get through more effort. Are you noticing fatigue, does that sit in does that cause a little bit of a backstep

Jamie Robinson 45:00

I don't see it as a challenge. That doesn't affect me as much. One thing that I've heard from a lot of people, doctors, patients, everybody is that they have a lot of pain or are very tired. I got lucky. I don't, I don't notice it. I'm not in pain. I'm not tired unless I push myself. But I'm just very lucky where I'm at right now.

A piece of health advice for faster brainstem stroke recovery

Bill Gasiamis 45:37

You're looking for ways to improve all the time and you're making big progress and you're overcoming things. In our conversation, I noticed something that you're doing that's interfering with your recovery you want to know?

Jamie Robinson 45:59

Please share.

Bill Gasiamis 46:01

Drinking sodas.

Jamie Robinson 46:03

Okay. In my defense, it's sugar-free.

Bill Gasiamis 46:10

Even then.

Jamie Robinson 46:16

I started when I was young drinking Mallow Yellow, I then moved on to Mountain Dew, Mountain Dew has like 75 grams of sugar with, whatever. And it was ridiculous. I changed from that to Pepsi. As that cut down quite a bit more since I've been able to drink soda again, I dropped down to zero sugar and started to lose weight, but it's not helping a whole lot because it tastes good.

Bill Gasiamis 46:55

Yeah. I know it's always about the taste. That's the only thing that I could say to you, you know, that Sunday, that's not going to cost you extra, it's going to make a massive difference to your blood. Instead of drinking a soda if you drink water, or bubbly water, like mineral water or soda water, you know, the flavors are different squeeze some lemon in there, squeeze some orange in there, anything just to get you that feeling that sensation of you're doing something similar that that will help.

Bill Gasiamis 47:29

It's just there are too many chemicals in those diet ones, and they don't have a positive impact. They may have a negative impact, but they certainly don't have a positive impact. Drinking water is going to have a positive impact and help thin your blood naturally. And just take out some extra stuff that your blood doesn't need to have. So anyway, that's my 10 cents worth that's your nutritional advice for the day.

Jamie Robinson 47:56

That's quite alright, Jess has been trying to get me to drink more water for years.

Bill Gasiamis 48:05

Yeah, well, we, you know, if it helps, you know, what you do, is you get a water filter, you filter out all the stuff that you don't like in the flavor of water from the tap. And then you just add, like I said, a little bit of lemon or orange or lime or anything in there just to help you make a tasteless water, boring, I don't know, whatever it is, it's the most important thing.

Bill Gasiamis 48:31

Because you can extract you know, with blood cells that are differently shaped they need water, they need to be hydrated in different ways. You know, they don't

need to be hydrated by beer or sodas or anything like that. They need they need water especially since you know you're still not active, very active, and that you need to help your blood circulate as much as possible so that you don't develop DVTs or any of that stuff from sitting down.

Bill Gasiamis 49:14

Because I know that there's a risk of sitting down a little bit too much, especially then when we've been unwell after a stroke, you know, so just consider it and maybe you know, cut down from whatever you're drinking now to half of that and then see if you can make your water tastes a little better and then go from there. And you've also been through cancer.

Bill Gasiamis 49:37

You know, you want to give your body the best opportunity to repair itself and heal itself. And Jessica he's very high maintenance, like we said, but he also needs a lot of attention by the sound of it. He's doing all this getting attention. Oh my God. Is there any opportunity for anyone else in that house to get a little bit of life? How have the girls been I hate teenagers can be completely annoying at the teenage stage.

Bill Gasiamis 50:13

I had teenagers when I was unwell. And they were just painted as they were meant to be. And it didn't make it easier. But I was also able to just chill out and say, look, they're just being normal, and they won't understand and I shouldn't expect them to understand. But I used to get a little bit upset when they were a bit too loud.

The benefits of having a supportive family during a difficult time

Bill Gasiamis 50:35

And I had to tell them multiple times, or when they wouldn't help out around the house, and I needed help because my wife went back to work. So if they were around and causing a mess, or creating you know, a nightmare in the kitchen, you know, I needed them to be on top of sorting out their stuff. And Sometimes they wouldn't how the girls respond during this time.

Jessica Robinson 51:00

They've responded pretty well, I'm there's that there's, you know, messes and, and things like that. But for the most part, they've been very helpful.

Jamie Robinson 51:13

They have I've got two 15-year-old twins, who are very helpful. They still complain when we ask them to do something. But they get it done, they're trying to be as helpful as possible for me. And my 18-year-old daughter is still living home washers in high school. And she's studying EMT right now. And she's wanting to be a physical therapist. So she's gotten a lot out of this negative experience.

Jessica Robinson 51:55

Yes.

Bill Gasiamis 51:56

Did she want to be a physical therapist beforehand? Or did it sort of start to give her some idea of what a good career might look like?

Jessica Robinson 52:08

No, she, I don't think she had any idea. I mean, she was kind of considering the medical field of some sort. But I don't think she had any idea about therapy really, at all. Until she saw firsthand. I mean, he had, gosh, like five months in home therapy when he got home. And when he got home, he was in a wheelchair and could only transfer with the sitting board. And we had all those therapists and all the time, and she got to see all that firsthand. And I think that made a huge, huge difference.

Bill Gasiamis 52:43

Your life is on hold, Jessica. How's that been? Now? Is it Have you been able to sort of transition back to a routine? Do you feel comfortable? Being? Not around as much? What's that, like, on your mindset?

Jessica Robinson 52:59

That's a good question. Ah, yeah, I think getting, you know, back to work normally, and all that was, is helpful. And we've been able to get on a fairly good routine. I mean, it helps that nal personality is easygoing, and things like that. And we don't have you know, a lot of issues. I know, sometimes that stroke, kids have a rough part of the brain. And sometimes people get kind of short-tempered and things and that that didn't happen. So yeah, I think we've gotten back to a

pretty normal routine.

Bill Gasiamis 53:43

Yeah. And what does that look like for you to work in the morning? How does that go?

Jessica Robinson 53:48

I go to work at nine. My parents used to get here about four 845 in the morning, I only work a block and a half away. So I go to work. And then I come home for lunch at noon, and I have an hour's lunch, and then I go back to work and I come home at 4. Yeah, it's perfect.

Bill Gasiamis 54:12

And do Mum and Dad live close by?

Jessica Robinson 54:15

They live about half an hour away. Okay.

Bill Gasiamis 54:19

And are they retired?

Jessica Robinson 54:21

They are.

Bill Gasiamis 54:23

How good are the inlaws? You probably never expected them to come and be your babysitter.

Jamie Robinson 54:32

They're very good. They're very attentive, they take care of me, they get me to the gym, and they take care of me when I can't take care of myself. When I got home. I was in cognitive and had other problems and they were there still to help me get dressed, help me change clothes, just everything they've been very good people.

Bill Gasiamis 55:08

That's one son-in-law who can't say negative or bad words about your inlaws you are not allowed my friend, you cannot say anything. It's so good that you guys have that ability to have your family close by and being surrounded by them was one of the benefits. That's what we had. My brother lives 10 minutes, in one direction my parents live 10 minutes in the other direction.

Bill Gasiamis 55:38

My sisters-in-law, everyone's kind of within 10 minutes of each other. So every time we needed something all we had to do was reach out or people would die all the time and help out. And it's just such a benefit. Every once in a while you hear people and you know, being nearly 50 people asked me like, Where else have you lived and I'm like, I haven't lived anywhere else.

Bill Gasiamis 56:04

I moved three kilometers away from my original home to my current home. I've done it my whole time. And the same with my family, no one's moved anywhere. Everyone sort of stayed nearby to where they grew up. And their families. And it's just been a bit of it's been a blessing because we don't have those villages anymore. I barely know my neighbors I've been I've been here for 20 years, they switch in and out.

Bill Gasiamis 56:32

So you don't often get to meet everybody and create a relationship with them. So even though I could be I do feel like I could go to a neighbor and say, Hey, can you help out with something for a minute, I know that I would probably get that help. But I didn't need to because everyone else was around me. And then a lot of stroke survivors don't have that benefit.

Bill Gasiamis 56:53

But it says something about, you know, finding a place and putting your roots down and then just sort of staying there. I think getting to know the community in my local cafe, for example, when I go there, I know everybody, and they know me. And they would even be the type of people who would help. I remember during lockdown in Melbourne, Australia, we had the worst lockdown in the world.

Bill Gasiamis 57:15

During COVID, we weren't allowed to leave the house if we thought that we had a cold, the COVID or whatever. And, to do the right thing and make sure that they were able to keep their Cafe open and keep it running. Keep serving the community. If we thought we had COVID, all we had to do was send them an SMS and say Hey, can you bring us four coffees, some croissants, etcetera.

Bill Gasiamis 57:43

And that would walk the 700 meters down the road and bring it to us. So you

know, there are a few people like that. But with our family, we were able to rely on, we're able to rely on them for everything. And I got driven around and I got all those favors done. And it's just it takes one of those layers of the difficulty of strike like it sort of just takes it away. Gets rid of it. Were you both insured? Did you guys have health insurance at the time when you went through the cancer and the stroke?

Jamie Robinson 58:26

Yeah, I had insurance through my work. And it was a really good insurance. So they covered the cancer very well. But when I when I had a stroke, they wind up coming in very handy. And we're thankful very much we had it. And we got.

Jessica Robinson 58:54

We had a critical care, policy so that helped out a lot where he had a critical care policy on his insurance.

Bill Gasiamis 59:02

I hear a lot about insurance where it's supplied through the employer. And often when people become made unemployed, their insurance lapses. Is it too expensive to buy insurance? Just on your own and have your insurance policy? Do people do that?

Jamie Robinson 59:26

Yeah, you can. You can even find a cheap and expensive policy that's just saying 10 bucks a month. But the ones offered through work. You don't have to shop around and it's taken out of your paycheck so it's easier.

Jessica Robinson 59:46

And a lot of the cheaper policies aren't going to cover that you're gonna if you have an if you have an emergency like this, you're going to be in trouble because they're not going to cover it very well. Um, now when he Even his employment was terminated. Then we had to do what's called Cobra. So you have your insurance, but it's, um, you have to pay, you're paying it yourself.

Jessica Robinson 1:00:16

So you're paying your employer's part of it as well. And it's extremely expensive. But we did keep that for about six months, even though it was about \$1,000 a month. But we kept that for about six months because it was its pay it pretty much covered everything.

Jessica Robinson 1:00:37

And he, we were would have been able to get onto a state insurance policy, which is what we ended up doing. But the state wouldn't have covered the home health care that he had. So we kept it until he went to outpatient therapy, and then we were able to switch to that and not have to pay anything.

Bill Gasiamis 1:00:59

Do those work policies cover the family as well for other medical conditions? Or is it just a person who is employed?

Jessica Robinson 1:01:08

In our case, you can get it so that they cover the whole family. In our case, we did not do that we had a a different policy through the government, for the family, because it would have cost quite a bit more. So, his policy by himself was just 200 hours a month while he was employed there. So

Bill Gasiamis 1:01:32

okay. So you had the benefit of coming out of the hospital and not a massive bill that some of the American Stroke Survivors talk about that ridiculous they do to people after they're unwell and not able to work and go home with a six. It's ridiculous. So what's it like now, being able to I imagine, Jamie's still not receiving any income, it's been a bit of a juggle is it changed the way that you guys have to go about living your life, expenses, everything's going up, how's that?

Jessica Robinson 1:02:16

He's on disability now. So he does get some income through that, but it is quite a bit less than what he got when he was working. So yes, we have had to, like, cut down on some expenses and just change the way we spend.

Bill Gasiamis 1:02:38

Yeah, we were the same. I mean, my wife was working three times a week when I wasn't able to work. And I haven't been able to work properly for 10 years. Because of all of the stuff that I had to go through, and then to get back to work, and then COVID, lockdowns, and all that type of thing. So it's a massive adjustment.

Bill Gasiamis 1:03:00

We're not going without anything, but still being super cautious of over-

committing to something that we don't 100% need or you know, we can do without it's interesting stroke takes a lot of time for things to settle down, and get into return. And then for some people that return often then doesn't involve doesn't involve employment.

What's next for Jessica & Jamie Robinson

Bill Gasiamis 1:03:29

So it's a very different experience to what we used to previously. So what's next for you guys? where to from here? Jamie, what are you thinking? I know you gave yourself about a year or so. But what else is on your mind? What else would you like to accomplish and achieve?

Jamie Robinson 1:03:54

Physically as far as physical therapy, I had certain goals that I was trying to meet. And I want a meeting. One of my goals was to climb stairs by going into a friend's basement. And I made that goal possible. And I've been able to do it. So because of that. I go and hang out with a friend every week.

Jamie Robinson 1:04:23

So my son comes over picks me up, and they will draw to a friend's house just hanging out for a couple hours. And that is it's feeling like I'm getting back to normal. As far as about a year from now. I'm dying to get back to work. I just want to get out of the house away from Netflix. Just do something. I want to go back to stockings back to a mind-numbing and no-thinking job. So that's what I want to do.

Bill Gasiamis 1:05:00

That's a good one. For about three years I went back to a mind-numbing, no-thinking job as well. Everyone had it all sorted for me to do this. Once you've done that, let me know. And do this. Oh, man, that was so good for a little while. Until then eventually, I realized I had recovered enough. And I was beyond that because then it was mind-numbing was annoying to me.

Bill Gasiamis 1:05:24

And I was complaining because it was mind-numbing, oh, this is boring. But it took about three years to get there. And having somewhere to go and interacting with people was good, especially regularly in the office, that type of thing. That

was good. What about you, Jessica?

Jessica Robinson 1:05:50

To see him keep getting better, I think I'd like to see him be able to drive at some point. I don't know if that's in the cards, but it'd be something that I think would just be important for him. But, I mean, to be honest, I never imagined we would be here. It was too hard for me to see beyond where we were at the time to see that this was possible. So I'm just ecstatic about where we're at.

The three questions

Bill Gasiamis 1:06:26

Normally, I don't ask caregivers, because they're very rarely on my podcast, I don't ask them this question. But I'm gonna ask you both the same question, see if you can give me your version of the answer. So, Jessica, what's the hardest thing about stroke for you as a caregiver?

Jessica Robinson 1:06:43

I think the hardest thing for so long was that I felt alone. Just he was he wasn't the same, he wasn't able to, you know, make decisions. I'm we were always a team, and we always made all of our decisions together. And having to make all the decisions without him being able, to help was very difficult. That has gotten a lot better. And you know, still not, you know, 100%. But it's, it's a lot. It's a lot closer to what it was.

Bill Gasiamis 1:07:29

Jamie, what's the hardest thing about the stroke?

Jamie Robinson 1:07:33

Well, I think it's the fact that everything changes. One minute, I'm perfectly fine. And everything's going good. I'm walking like normal talking like normal, playing video games. And then the next day, I can't do any of it. So it's just that gradual getting back to how it was before the stroke. That's the hardest. Just have to deal with the "disability" that I have. I'm not disabled, but I can't move my arm, I can't move my leg, I think right. Just getting back to how I was, it sucks.

Bill Gasiamis 1:08:29

Jessica, what is something that you've learned too, because of this stroke journey?

Jessica Robinson 1:08:41

I think one of the things that I learned is gentleness. I mean, I'd like to think that I've always been a very kind person, but I haven't always been the most gentle person. And I think that's really what I've learned the most is how important it is and how not important some of the things that I used to think were important were.

Bill Gasiamis 1:09:10

Old habits die faster, don't they? I mean, I had all of those awarenesses about stuff and it's like, Alright, you're being ridiculous. Again, you're complaining about something you should be complaining about. You find yourself there, you're human, right?

Bill Gasiamis 1:09:28

And you're still a married couple and you still have the same dramas and even though you promise I swear once everything gets back to normal we'll never argue. You always go back there sometimes, but it's alright. I've learned that you can go there and then just become aware of it quickly and then go okay, out of there. Get out of there. What about you, Jamie, what's something that you've learned because of the stroke?

Jamie Robinson 1:09:56

Probably taking it day by day Instead of planning for the future, just get through the day you're in, whatever challenges come up, take them on one day at a time, whenever you can do plan the next step, just one step at a time. And don't be a pessimist just keep going. I can't do it right now. That's okay. Maybe tomorrow I can, and then just keep going. Just keep working harder. So day by day.

Bill Gasiamis 1:10:43

Jessica, what's something that you would like to tell perhaps another caregiver who might be listening to this, like a little bit of wisdom or some advice or something that might help them in their journey, especially if they're just starting theirs?

Jessica Robinson 1:11:02

Ask for help. You feel like you're going to be a burden on somebody, but people do want to help. They just don't know what to do. So if you know, dinner will help just ask someone to bring you dinner. If you can think about food, then that's

something you know, just ask for what you need. Because people want to give it to you. They just don't know what to do. So they just sometimes don't do anything.

Bill Gasiamis 1:11:34

I think that's great advice. And it's not doing anything that looks like they're being not nice, or they're being insensitive. But it's not there, since they don't know how to do it. And then I suppose the only other piece of advice I could offer with regards to asking for help, and specifically dinner, is, to make sure you ask somebody for dinner who can cook properly.

Bill Gasiamis 1:12:01

Be a bit picky with who you're gonna ask for dinner. What about you, Jamie, what do you want to tell other stroke survivors who have maybe just got out of the hospital got home, and, you know, sort of getting used to things the way that they now are, instead of the way that they were what's a little bit of advice?

Jamie Robinson 1:12:24

Probably the same thing, ask for help. You just got out of the hospital, you had a life-changing event, you cannot do what you used to do. And that's okay. You're going to need help walking, you're going to need help getting up, you're gonna need help reaching for this.

Jamie Robinson 1:12:47

Day by day, it'll get easier, day by day, you'll get better. But right now, you need help. That's what Jess is, therefore, she's here to help. So your wife, your husband, your caregiver, whoever it is, tell them what you need. Be honest with them. Don't rely on yourself as much. You're not going to be able to do it yet. And it's always a yet you won't be able to take care of yourself, but not right now. Ask for help.

Bill Gasiamis 1:13:29

It sounds like you've written part of the first chapter of my book because that whole attitude of I can't do this yet is in my book exactly what you said. And adding that word into a sentence makes a massive difference. So what it does is tell the brain that I'm not doing it now, but I might be able to do it in the future. And that kind of takes some of the anxiety and the stress off of the fact that you've lost that function for now.

Bill Gasiamis 1:13:59

So that's really good advice. Hey, guys, I appreciate you reaching out and asking to be on the show. Thank you so much for doing that. It's lovely to meet you. I appreciate you sharing your combined journey because stroke's never alone. Stroke survivors never do it on their own. There are always other people around who are also going through their stroke journey with their loved ones. And I wish you well. And I hope that in 12 months, there's been improvement again.

Jamie Robinson 1:14:32

Yeah, thank you we appreciate you Bill, and your show.

Jessica Robinson 1:14:35

Thank you.

Bill Gasiamis 1:14:37

Well, thanks for being here with us and joining us in today's episode. I do hope that you got a few gems from the conversation. If you're interested in learning more about stroke recovery, make sure to check out my book available at recoveryafterstroke.com/book for additional insights into our guest's stories and access to resources, like their social media links and interview transcripts visit recoveryafterstroke.com/episodes.

Bill Gasiamis 1:15:02

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Bill Gasiamis 1:15:26

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Intro 1:15:54

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Intro 1:16:11

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Intro 1:16:33

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Intro 1:16:48

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Intro 1:17:02

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Intro 1:17:18

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