

Amy McClure

31 years old

Amy McClure, age thirty-one and twenty-seven weeks pregnant with twins, was away from her home in Allen, Texas. She and her husband, Jason, were traveling to Lawrence, Kansas, to visit Jason's mother for Thanksgiving. They carried her medical records with them as they were prepared for most anything.



Two days after their nine-hour car trip, Amy went for her daily two-mile walk. As always, she carried her cell phone. It was snowing.

Amy: It was cold. My cell phone was in the left pocket of my jacket. My left hand started to feel numb, and I thought it was just cold because I was not used to thirty-degree weather. I had to help my left hand get into my pocket and hold on to my cell phone. I thought that if I had a grip on my cell phone and anything happened I would be able to pull it out and call for help.

I walked a little farther, and then my left leg gave out; it was almost like it went to sleep. I could not get it to work correctly. I fell to the ground. I tried to get back up but I fell down again and scraped my face on the sidewalk. Back on the ground I tried to find my cell phone but I couldn't. I couldn't see it. I couldn't find it with my hand. I could not see off to my left side.

I was crying. That's when I saw the police drive up with an ambulance following right behind. It turned out that I had fallen across from a fire station. They did a quick assessment of my status: I had no trouble remembering my name, no trouble remembering a phone number. My speech was slurred but my mouth was full of blood from the fall. As they loaded me up on a stretcher, Jason drove up.

Jason: When I got back from my run Amy was not yet back from her walk. My mom and I heard the sirens and got worried. I jumped in the car, and as I turned the first corner I saw Amy being loaded into an ambulance. I got there just in time. She could not move her left leg or her left arm. I ran back to the car and grabbed her medical records and gave them to the police officer as they loaded her in the ambulance.

Amy and Jason understood the value of traveling with her medical records. Amy had had some dizzy spells before she became pregnant and was seen by a neurologist, who felt they might have been from her high blood pressure or possibly secondary to her migraines. So when she became pregnant, they were very alert to any medical symptoms.

Jason: Amy's obstetrician laughed at us when we asked for a copy of her medical records. But at the pregnancy class they said that if you go on a trip you should always take them with you in case something happens. We had already had one ER visit earlier in her pregnancy when she had some bleeding. So we just wanted to be prepared if anything like that happened again. We needed as much information as we could get.

After the initial assessment in front of the fire station where Amy had fallen, she was rushed to the nearest emergency

room. This was the beginning of a difficult time. They arrived at the emergency room within 20-35 minutes of Amy's fall, but then Amy's evaluation seemed to stall.

Jason: Our time in the ER consisted of a lot of waiting and frustration. They cleaned her up but obviously she had left-sided deficits. The ER doctor didn't seem real sure about what was going on. They ordered a CT scan, which was negative. I told my mom that Amy had suffered a stroke. I recognized it as a stroke because my grandmother had had a stroke, and Amy's weakness looked the same. In the ER they were saying that if it were a stroke warning, it should have resolved by now. There was a lot of debate about what should be done.

There was added confusion about what to do because of Amy's pregnancy. Amy and the twins were all at significant risk. If the stroke had been allowed to run to its completion, it might have caused total paralysis of Amy's left arm and left leg. Dealing with left-sided paralysis and newborn twins would be very difficult.

Jason: The ER doc made some phone calls. He consulted with many physicians and pharmacists to help answer the question: "What effect would this [tPA] have on the babies?" The conclusion seemed to be, "Yes, she needs tPA but we do not know what effect it might have on the babies." Saint Luke's Stroke Center was consulted and they recommended that she be transferred immediately.

As all these decisions were being made and the helicopter was on its way from Saint Luke's, Amy remembers that she was not able to help much.

Amy: At this point I didn't recognize that I had had a stroke. I was crying a lot. I was more concerned about the babies than me at that time.

Her vague memory of the events surrounding this part of the story is a good example of why stroke victims with left-sided weakness are not able to act in their own best interest – they do not understand the problem. She understood that her twins were at risk but she could not do much more than cry. Upon her arrival at Saint Luke's Stroke Center things began to happen quickly.

Jason: The stroke neurologist on Saint Luke's Hospital's stroke team met us in the ER and went over everything. I asked, "What is the safest thing?" [They were considering using the Merci[®] Retriever and/or intra-arterial tPA.]

They explained the options in more detail. I signed the consent form and Amy went in. I waited.

After the procedure was over, they told me that the Merci[®] Retriever hadn't worked because the clot was too far back and the risk was too high if they were to go after it. They ended up injecting tPA into the clot and got most of it out.

Amy was taken to the ICU where they saw immediate improvement. She could move her left leg – she slid it up the inside of the right leg and she could extend her left leg and move her toes. They called in an obstetrician who examined the babies and told us everything was fine with them. She said they looked great, told us how much they weighed and how long they were. Amy perked up when the obstetrician pronounced the children were healthy. After Amy heard all the

details about the kids she smiled. That was the only smile we saw from her that day. It was only one side of her mouth smiling, but she was still smiling.

Amy began to improve, but it was slow going. After her stroke reversal the medical evaluation to determine the cause of her stroke ended in an unusual finding.

Jason: They determined that Amy has Sneddon's Syndrome. One in a million people have it – roughly 200 cases in the United States per year. Patients with this syndrome have what looks like a serious rash all over the body, the blood vessels in the kidneys narrow and they have high blood pressure. The patients may also have a stroke. The theory is that the blood vessels narrow because the inner lining of the blood vessels are "rough" so the blood needs to be thin and smooth so no clots are allowed to form. The basic treatment is blood thinning forever.

Amy and Jason had many questions in the aftermath of the stroke reversal therapy.

Amy: I wanted to know if things were going to get back to the way they were before I had the stroke. Was I going to be able to have the use of my arm and leg again?

At least one medical condition was resolved successfully and joyfully!

Jason: She went into labor five days before a scheduled C-section. The babies were fine. The kids were ready to leave the nursery the next day but they had to wait for their mom for two weeks.

Six months after Amy's stroke her progress was good.

Amy: I have full range of motion of my left arm. The difficulty is in the fine-motor movements with my hands. My left leg has full range of motion as does my ankle, although it is still somewhat weak. I'm walking with a four-pronged cane and I'm doing some stuff in therapy without the cane; I am working on getting to where I can walk without the cane.

They looked back on their unscheduled visit to the Stroke Center.

Jason: We've always viewed the event as the best case of a worst possible scenario. She fell in front of a firehouse. In the ER they made the call that got her to Saint Luke's Stroke Center. Things just barely worked out. The blessing of it all is that the kids are perfectly healthy.

Amy: We are very grateful for where we were at the time it happened. It's just one of those things where I got lucky to be at the right place at the right time.

We kept hearing the same thing from so many people in the hospital: "Well, we've never had a patient like you!" The OB ward did not know what to do with a lady who had had stroke reversal while she was twenty-seven weeks pregnant with twins. And in rehab they were surprised because they had never had to deal with a pregnant woman. They all kept saying: "You are the most unique patient we have ever had."

Jason and Amy are proudest of their twins.

Jason: Jack was small at birth – 4 pounds 2 ounces – but he’s catching up. He is now on the growth chart and weighs over 10 pounds. His brother is in the middle of the growth chart and catching up quickly.



COMMENTS

Jason and Amy negotiated a complicated series of obstacles. Most strokes do not occur in front of a fire station with knowledgeable first responders nearby. Their rapid and accurate assessment saved Amy. The ER physician was familiar with the problems presented and recognized that the twins made things more complicated. The helicopter transfer to Saint Luke’s Stroke Center was made quickly and in time for an attempt at stroke reversal. Finally, Jason and Amy were prepared for their emergency.



