
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE RESOLUTION

No. 340 Session of
2015

INTRODUCED BY FABRIZIO, YOUNGBLOOD, DAVIS, HENNESSEY, DONATUCCI,
COHEN, THOMAS, MURT, KIM, BOBACK, SCHLOSSBERG, DUSH, SONNEY,
DIGIROLAMO, CUTLER, READSHAW, KINSEY, MILLARD, RAPP, BAKER,
KILLION, McNEILL, BROWNLEE, FARINA, CALTAGIRONE, MARSICO,
SCHLEGEL CULVER, O'NEILL, LONGIETTI, MAHONEY, MILNE, ROSS,
GOODMAN, D. COSTA, O'BRIEN, DeLUCA, PICKETT, WATSON, PAYNE,
MATZIE AND GINGRICH, MAY 13, 2015

INTRODUCED AS NONCONTROVERSIAL RESOLUTION UNDER RULE 35,
MAY 13, 2015

A RESOLUTION

1 Recognizing the month of May 2015 as "Pediatric Stroke Awareness
2 Month" in Pennsylvania.

3 WHEREAS, Stroke, also known as cerebrovascular disease,
4 happens when blood flow to the brain stops, resulting in tissue
5 injury and loss of brain function; and

6 WHEREAS, A stroke is a medical emergency that can cause
7 permanent neurologic damage, or even death, if not promptly
8 diagnosed and treated; and

9 WHEREAS, Stroke is not restricted to adults; and

10 WHEREAS, Stroke is an important cause of neurologic morbidity
11 in childhood; and

12 WHEREAS, Stroke can occur in children of any age; and

13 WHEREAS, According to the American Stroke Association, stroke
14 occurs in approximately one out of every 3,500 live births and
15 has an overall annual incidence of 4.6 per 100,000 children 19

1 years of age and younger; and

2 WHEREAS, Many children with stroke syndromes are misdiagnosed
3 with more common conditions that mimic stroke, such as
4 migraines, epilepsy or viral illnesses; and

5 WHEREAS, Pediatric stroke risk factors include arteriopathy
6 and vascular malformations, congenital heart disease, sickle
7 cell disease and hematologic abnormalities, among others; and

8 WHEREAS, Approximately 60% of infants and children who have a
9 pediatric stroke will have serious, permanent neurological
10 disabilities, including paralysis, seizures, speech and vision
11 problems and attention, learning and behavioral difficulties;
12 and

13 WHEREAS, Those disabilities may require ongoing physical
14 therapy and surgeries; and

15 WHEREAS, Stroke recurs within five years in 10% of children
16 who have had an ischemic or hemorrhagic stroke; and

17 WHEREAS, According to the National Center of Health
18 Statistics, stroke in children is at least as frequent as brain
19 tumors and is among the top 10 causes of death in children
20 between the ages of 1 and 14 in the United States; and

21 WHEREAS, The death rate for children who experience a stroke
22 before the age of one is the highest out of all child age
23 groups; and

24 WHEREAS, The permanent health concerns and treatments
25 resulting from strokes that occur during childhood and young
26 adulthood have a considerable impact on children, families and
27 society; and

28 WHEREAS, There are no approved therapies for the treatment of
29 acute stroke in infants and children; and

30 WHEREAS, Many of the procedures increasingly used in children

1 with cerebrovascular disease have been adapted from studies in
2 adults; and

3 WHEREAS, Accumulating experience with antithrombotic and
4 anticoagulant treatment in children suggests that these agents
5 can be safely used in children, though their efficacy and proper
6 dose still need to be established by controlled trials; and

7 WHEREAS, Thrombolytic agents should be as effective in
8 children as in adults, but safety data is inadequate for
9 children, and the timing and dosage need to be determined for
10 children and adolescents; and

11 WHEREAS, Not enough is known about the cause, treatment and
12 prevention of pediatric stroke; and

13 WHEREAS, Medical research is the only means by which people
14 can identify and develop effective treatment and prevention
15 strategies for pediatric stroke; and

16 WHEREAS, Early diagnosis and treatment of pediatric stroke
17 greatly improves the chances that the affected child will
18 recover and not experience a recurrence; and

19 WHEREAS, Continued coordination and cooperation among
20 researchers, families and the public is needed to improve
21 treatments and prognoses for children who suffer strokes;
22 therefore be it

23 RESOLVED, That the House of Representatives recognize the
24 month of May 2015 as "Pediatric Stroke Awareness Month" and urge
25 residents of this Commonwealth to support the efforts, programs,
26 services and organizations that work to enhance public awareness
27 of pediatric stroke.