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## **Stroke rate 25-per-cent higher for Metis than for other Manitobans, study shows**

*OTTAWA, Oct. 4, 2011* – The stroke rate among Manitoba Metis is nearly 25-per-cent higher than for other Manitobans, according to a study by the University of Manitoba and the Manitoba Metis Federation (MMF) presented today at the Canadian Stroke Congress.

The higher stroke rate is driven by a 53-per-cent higher smoking rate, 34-per-cent higher rate of diabetes, and 13-per-cent higher rate of high blood pressure among Metis aged 40 years and older, compared to all other Manitobans. High blood pressure, smoking and diabetes are leading risk factors for stroke.

“Being historically of both First Nation and European ancestries, but not really identifying as either one, Metis are a very unique people, but little research has been done on this population,” says Dr. Judith Bartlett of the University of Manitoba and the MMF. “It’s really difficult for a health system to put in place Metis-specific programs if they don’t understand what that means. Our job through this study is to link the health authorities with the Metis to bridge that knowledge gap.”

The study linked the MMF membership list and several Canadian Community Health Survey cycles with Manitoba Health’s hospital records throughout the province to create the Metis Population Data-Base, a one-of-a-kind registry of the 73,000 Metis in the province.

“Despite universal health care, it is clear that stroke and related conditions are even more significant issues for Manitoba Metis than for all other residents in the province,” the study says.

What are called “knowledge networks” of Metis and provincial Regional Health Authority (RHA) staff have now been established in each of the Manitoba Metis Federation’s seven regions to look at the information from the study and interpret it within a local context, says Julianne Sanguins, PhD, of the Faculty of Medicine at the University of Manitoba and the MMF.

During the first few meetings of these knowledge networks, Metis Regions learned about available resources and the health-care providers discovered the strength of the Metis presence in their community, Dr. Sanguins says.

The ultimate purpose of these networks is to raise awareness about existing health services and then to make any necessary changes to the programs in each of the MMF/RHA regions to better meet the cultural needs of the Metis citizens.

“It is important to learn more about the unique health challenges of Canada’s Metis population in order to control risk factors and prevent stroke,” says Dr. Antoine Hakim, CEO and Scientific Director of the Canadian Stroke Network. “This study provides valuable information to create targeted education and outreach initiatives.”

“Aboriginal people are twice as likely to die from stroke than the general Canadian population,” says Heart and Stroke Foundation spokesperson Dr. Michael Hill. “They are more likely to have high blood pressure and type 2 diabetes, putting First Nations, Inuit and Metis people at an even greater risk of stroke than the general population.”

He says that culturally appropriate prevention strategies and novel health-care solutions will improve outcomes. “Awareness of how to control risk factors such as high blood pressure, obesity, physical activity, diabetes, and smoking is essential.” Heart and Stroke Foundation health information for Aboriginal people can be found at [heartandstroke.ca/Aboriginal](http://heartandstroke.ca/Aboriginal).

The Canadian Stroke Congress is a joint initiative of the Canadian Stroke Network, Heart and Stroke Foundation of Canada and the Canadian Stroke Consortium.

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The **Canadian Stroke Network** ([canadianstrokenetwork.ca](http://canadianstrokenetwork.ca)) is a national research network headquartered at the University of Ottawa. It includes scientists, clinicians and health-policy experts committed to reducing the impact of stroke.

The **Heart and Stroke Foundation** ([heartandstroke.ca](http://heartandstroke.ca)), a volunteer-based health charity, leads in eliminating heart disease and stroke and reducing their impact through the advancement of research and its application, the promotion of healthy living, and advocacy.

**For more information and/or interviews, contact**

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