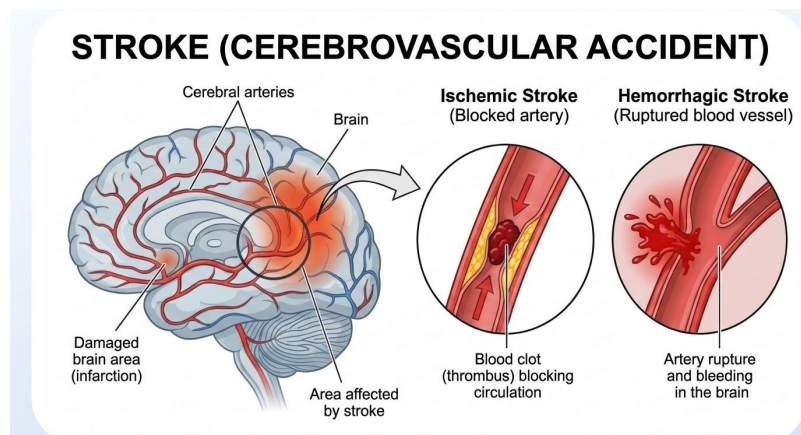




29 October 2026

World Stroke Day Cerebrovascular Accident : Every minute counts



A stroke (or brain attack) is an **absolute medical emergency**. It occurs suddenly and affects **thousands of people** every year in France.

Knowing how to **identify it** and **react immediately** is **essential** to save lives and limit severe long-term consequences



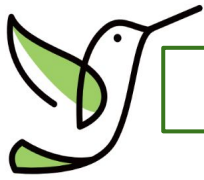
In the Workplace

Executives and Managers show an increased vulnerability to psychosocial risks and stroke due to four specific factors (1):

- **Workload and pressure**: 41% of them face regular pressure, demanding targets, high workload, long hours, and struggle to disconnect.
- **Combining multiple responsibilities**: The need to constantly juggle production, team supervision, and conflict management generates overload and intense stress.
- **Isolation and performance culture**: Pushed to excel, many hide their distress for fear of harming their career progression.
- **Excessive working hours**: This prolonged pace fosters harmful stress levels and reduces time spent on cardiovascular health protective factors, such as physical activity.

Blue-Collar Workers are also highly exposed to stroke risks.

Indeed, **physical stress factors** (chronic noise, exposure to **certain air pollutants**, extreme temperature variations), **atypical schedules** (night shifts or 3x8 shifts disrupting the circadian rhythm), and **difficult socio-economic conditions** put heavy strain on the cardiovascular system (2).



Stroke Figures

The epidemiological impact of stroke makes it a major public health priority in France:

Individual Risk	1 in 6 people in France will suffer a stroke during their lifetime (3)
Hospitalizations	Over 120,000 adult hospitalizations per year (4, 5)
Mortality	1st cause of death for women and 2nd cause for men with 20 to 30% mortality in the year following the accident (6,7,8)
Sequelae and disability	1st cause of acquired non-traumatic disability in adults (hemiplegia, aphasia, pain) and 2nd cause of dementia behind Alzheimer's disease



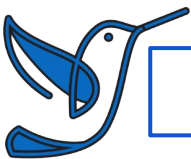
Understanding Stroke

A stroke is caused by the interruption of blood flow in the brain. This deprivation of blood, oxygen, and glucose leads to asphyxiation of the affected area and massive, rapid destruction of neurons (approx. **2 million per minute** out of 86-100 billion), leading to **irreversible sequelae**.

There are two main types of stroke:

- **Ischemic stroke (or cerebral infarction)** : represents the majority of cases. An artery is blocked by a blood clot, preventing blood flow.
- **Hemorrhagic stroke** : accounts for about 15% of cases. A brain artery ruptures, causing intracerebral bleeding.

There is also the **Transient Ischemic Attack (TIA)**, where the artery is blocked temporarily. Even if symptoms disappear after a few minutes or hours, a TIA is a major warning sign due to the **very high risk of early recurrence within 24 hours**.

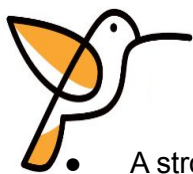


React FAST to Stroke Symptoms

The most characteristic feature of a stroke is the sudden onset of neurological signs. Depending on the affected brain area, symptoms vary (3):

- **Facial paralysis** : facial asymmetry, drooping or twisted mouth.
- **Hemiplegia or muscle weakness** : inability to move or loss of strength in an arm, hand, leg, or an entire side of the body.
- **Speech disorders (aphasia)** : difficulty or inability to speak, find words, understand spoken language, read, or write.
- **Vision disorders** : sudden loss of vision in one eye (amaurosis) or double vision.
- **Balance disorders** : sudden difficulty walking or dizziness.
- **Headaches** : intense, severe, and sudden headaches.

The first three symptoms are the most characteristic. **Beware of temporary improvements: even if they last only a few minutes, call emergency services immediately.**



What to do when this happens?

- A stroke is a **"race against time"**.
- Action must be immediate. **Speed = Effectiveness** of treatments. Admission within the first few hours reduces mortality and the severity of long-term consequences.



FACE DROOPING

One side of the face droops or feels numb. Ask the person to smile to check if it is uneven.



ARM WEAKNESS

One arm is weak or numb. Ask the person to raise both arms to see if one drifts downward.



SPEECH DIFFICULTY

Speech is slurred, hard to understand, or the person cannot speak. Ask them to repeat a simple sentence.



TIME TO CALL EMERGENCY SERVICES

If you see any of these signs, call emergency services immediately, even if the symptoms go away.

Instructions

At Airbus

Regardless of the workplace, call the numbers on the card **PeopleSafety@Work***.



Outside Airbus

Call 15 or 112

Call immediately **15** (SAMU), **18** (Fire Department) or **112**

Deaf, hard-of-hearing, or aphasic individuals alone: contact **114** via SMS, video call, or app.

Mobilize SST First Aiders

Immediately call upon nearby first aiders present in the building.

Do not contact your attending physician

Avoid this call to save time. **Only SAMU can direct without delay to the appropriate neurovascular unit.**

React even if symptoms fade

A transient episode (TIA) remains a vital emergency: symptoms can reappear very quickly.

Follow instructions

Strictly follow medical dispatch instructions while waiting for help, **do not hang up until instructed to do so.**

* These numbers connect to site PCS (Security Control Centers), which dispatch on-site firefighters capable of quick intervention & trigger the medical team or SAMU as needed based on urgency.

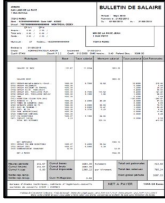
Take action, become a First Aider!

To **take action** for your health and that of others, nothing could be simpler: sign up for **Occupational First Aid (SST)** training in MyPulse.





How CFDT can help you



Information on salary, health insurance, Social Security benefits



Pre-return visit with occupational physician (necessary adjustments if needed..)



Contact with employee (if they wish)

During Sick Leave



Support for returning to work



Help with RQTH application



Workstation adjustment

Return to work



Working time organization



Team and manager awareness & regular follow-up



Your occupational medicine

The Medical Service organizes several awareness events throughout the year:

- The **HEART pathway**
- Mornings dedicated to **high blood pressure** with blood pressure checks

In December, **Disability Week** organized by the disability mission will offer webinars focused on: identifying signs and medical emergency reflexes, understanding **stroke sequelae**, support for returning to work (**SPST**, **Disability Mission**), as well as individual and collective prevention (**Airbus Heart**).

(1) <https://corporate.apec.fr/files/live/sites/corporate/files/Nos%20etudes/PDF/Sante%20mentale%20chez%20les%20cadres%20et%20les%20managers.pdf>

(2) <https://trustmyscience.com/vivre-pres-espaces-verts-reduirait-risque-avc-16-pourcent/>

(3) <https://institutduncerveau.org/fiches-maladies/l'accident-vasculaire-cerebral-avc>

(4) : 1. Gabet A, Béjot Y, Touzé E, Womant F, Suissa L, Grave C, et al. Epidémiologie des accidents vasculaires cérébraux en France. Bull Epidemiol Hebdo 2025;(HS):23-38

(5) : https://www.has-sante.fr/upload/docs/application/pdf/2025-10/dir2/avc_-_guide_du_parours_de_sante.pdf

(6) Olié V, Grave C, Tuppin P, Duloquin G, Béjot Y, Gabet A. Patients hospitalized for ischemic stroke and intracerebral hemorrhage in France: time trends (2008-2019), in-hospital outcomes, age and sex differences. J Clin Med 2022;11(6):1669. <https://dx.doi.org/10.3390/jcm11061669>

(7) : Institut national de la santé et de la recherche médicale. Accident vasculaire cérébral (AVC). La première cause de handicap acquis de l'adulte [En ligne]. Paris: INSERM; 2017. <https://www.inserm.fr/dossier/accident-vasculaire-cerebralavc/>

(8) Santé publique France, Carcaillon-Bentata L, Ha C, Delmas MC, Deschamps V, Fosse-Edorh S, et al. Enjeux sanitaires de l'avancée en âge. Epidémiologie des maladies chroniques liées à la perte d'autonomie et déterminants de ces maladies à mi-vie. Saint-Maurice: SPF; 2022.

<https://www.santepubliquefrance.fr/maladies-ettraumatismes/diabete/documents/rapport-synthese/enjeuxsanitaires-de-l-avancee-en-age-epidemiologie-desmaladies-chroniques-liees-a-la-perde-d-autonomie-etdeterminants-de-ces-maladies-a-mi-vie>

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