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child of children's

A collection of stories from Children's Hospital of Alabama.

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Stroke

Brandon Hicks

Brandon Hicks pounded up and down the basketball court, playing one of his best games ever that hot day, even though the match on June 10, 2008, between his visiting Ragland High School team and Moody High was only a practice game. But then the 15-year-old began feeling strange, so he took a break. When the half-time buzzer rang, the boy tried to rise but his 6'5", 250-pound body refused.

"At first the coaches thought he was suffering from heat exhaustion," recalls Paige Hicks, Brandon's mom. Her husband Kyle, reached by phone at his UAB job, asked that his son be taken to Children's Hospital. Paige, who works at Energen Resources, met him there. "Dr. Tony McGrath and his team quickly determined it was something more severe," Paige says. The neurologist diagnosed the teen as suffering an ongoing stroke.

"We were dumbfounded," Paige says. "I said, 'You mean he's having a stroke like an old person would have?'" Later she learned the astronomical odds of a healthy child undergoing a stroke. "My kids had never even had a broken arm or leg," the mother says about Brandon and his brother, Matthew, age 12. But the blood clot on the right side of Brandon's brain was clearly visible in images. Although the teen retained cognitive abilities, the left side of his face and his left arm and leg were paralyzed.

Dr. McGrath explained that a "super-duper blood-clot buster" drug, TPA, helped adult stroke victims. It might provide Brandon's best chance at complete stroke recovery as well. But the blood-thinning drug could also cause excessive, even fatal bleeding. "If we don't do anything," the doctor told them, "this is as good as it's going to get—and it will probably get worse."

The medicine had to be administered within three hours of the onset of symptoms. Only 30 minutes remained on Brandon's window of opportunity when Paige and Kyle gave the go-ahead. Brandon spent that night in the Pediatric Intensive Care Unit, carefully watched after receiving an intravenous drip of TPA.

"Dr. McGrath's words to us—and I will never forget him saying this—were, 'If Brandon makes it during the first 24 hours'...and that's all I heard," Paige says, growing emotional at the memory. The first 24, then 48, and finally 72 hours, post-stroke, are crucial. Within 48 hours, Brandon's condition improved enough for him to move into

the special care unit. By Friday, three days after the stroke, he settled into a regular room. He remained in Children's for physical, occupational, and speech rehabilitation until his June 26th release, 16 days after the stroke.

"I firmly believe God put the right people in our path that day to save my son's life," says Paige, "one of which was Dr. McGrath. It's just amazing that the day we showed up, the doctor that we happened to get specializes in pediatric strokes." In rehabilitation, she continues, "they treated Brandon like a friend, although they didn't cut him any slack." For instance, she says, "Brandon was all-sports before the stroke, so they tried to use balls in his therapy." Brandon's rehab team also trained the parents to safely care for him at home. "I really can't say enough good things about the people at Children's," says Paige. "They were caring and very knowledgeable."

This fall, the St. Clair County teen began taking a full load of honor courses at school. He has moved from wheelchair to crutch to leg brace. With twice-weekly therapy, he has recaptured much of the use of his left leg, arm, and fingers except for the thumb. Perhaps as important for a boy his age, says Paige, "He's regained most of his independence."

And he attends every football practice and game with his Ragland High teammates. "His goal," his mother says of his continued rehabilitation, "is to get all his mobility back so he can play sports again."

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