Transient Ischaemic Attack
After a TIA (Transient Ischaemic Attack)

A TIA is sometimes called a ‘mini stroke’ and the information is similar to that for a stroke. This leaflet aims to answer some of your questions about TIA.

It includes information about:

1. What should you do - key points
2. What is a TIA?
3. Keeping well
4. Taking your medications
5. Returning to previous activities
6. Healthy eating
7. References and Further Information
8. Feedback questionnaire

Stroke is a medical emergency.

By calling 999 early treatment can be given which can prevent further damage to the brain.

Suspect a stroke?
Act FAST and call 999.

Facial weakness  Arm weakness  Speech problems  Time to call 999

The Stroke Association is registered as a company limited by guarantee in England and Wales No. 61274. Registered charity No. 211015 and registered charity in Scotland No. SCO37789.
1. Key Points - What Should You Do?

DO...

- Make sure you are seen by a stroke specialist in clinic.
- See your GP for a new prescription. Your GP is responsible for your health care after hospital.
- Make sure your blood pressure is controlled and checked regularly, for example when you see your GP or practice nurse.
- Take your prescribed medications. Your medications are to protect you for the future, not to treat a TIA that has already happened.
- Take the advice given to you on lifestyle changes:
  - Have a healthy diet.
  - Keep your weight healthy.
  - Keep active.
  - Drink alcohol sensibly.

DON’T...

- Do not drive for at least a month.
- Don’t smoke.
2. What is a TIA?

A Transient Ischaemic Attack (TIA) is similar to a full stroke but the effects don’t last long – from a few minutes up to 24 hours. It may sometimes be called a “mini-stroke”.

A TIA happens when the blood supply to a part of the brain is cut off temporarily. This is usually caused by a blockage in a blood vessel that carries oxygen to the brain, either by narrowing of the blood vessels or by a clot travelling from elsewhere in your body. As a result, your brain cannot send out correct signals to your body and you experience the temporary symptoms of a stroke.

All of the symptoms completely recover in 24 hours, but it can be a warning sign of a full stroke, and requires urgent medical attention.

Why do TIAs happen?

Common reasons for a TIA are:

- High cholesterol.
- High blood pressure.
- Smoking.
- Diabetes.
- Excess alcohol.
- Problems which cause blood clots, such as Atrial fibrillation (heart flutter).

These are called ‘risk factors’ as they cause the blood vessels to become damaged or clots to form. The more of these risk factors you have, the higher the risk of a TIA or stroke.
Investigations

It is important to have investigations to find possible reasons for your TIA, and identify your own risk factors. Your doctor can explain these investigations to you. You should be seen in a special TIA clinic by a stroke specialist.

You may need:

- CT scan or MRI scan of your brain.
- Blood tests (e.g. cholesterol check, test for diabetes).
- Blood pressure checks.
- Doppler scans of the main blood vessels in your neck.
- ECG or echo tests to check your heart function.

Treatment

An untreated TIA has a high risk of further problems. It is very important to start the correct treatment to reduce as many of your risk factors as possible. This will help you to keep well and to reduce the chance of another TIA or stroke. If you stay on your treatment, your risk of further problems will reduce over time.

Usual treatment after a TIA is by medication to control blood pressure & cholesterol, and to reduce clots forming.

Also see ‘Keeping Well’ (3) and ‘Taking Medications’ (4).
3. Keeping well after a TIA

The following advice can help to prevent future TIAs or strokes:
You may have just one or a number of risk factors.

<table>
<thead>
<tr>
<th>Risk factors for TIA &amp; Stroke</th>
<th>What can you do?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>High Blood Pressure</strong></td>
<td>■ Know your blood pressure.</td>
</tr>
<tr>
<td>Your blood pressure should ideally be less than 135/90.</td>
<td>■ Take your prescribed blood pressure medications.</td>
</tr>
<tr>
<td>High blood pressure damages blood vessel walls, which leads to furring up.</td>
<td>■ Eat less than 6g/day of salt (1 level teaspoon) per day (6).</td>
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<tr>
<td>Eating too much salt can raise blood pressure.</td>
<td>■ Keep active – it is your body’s way to control blood pressure.</td>
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<tr>
<td></td>
<td>■ Try to find ways to relax and reduce stress.</td>
</tr>
<tr>
<td><strong>High Cholesterol</strong></td>
<td>■ You will be prescribed a ‘statin’ medication to lower your cholesterol.</td>
</tr>
<tr>
<td>Your cholesterol level should ideally be less than 3.5 mmol/l.</td>
<td>■ Reduce fatty meat and dairy products, which are high in saturated fats.</td>
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<tr>
<td>Fatty deposits in the blood can cause blocked blood vessels.</td>
<td>■ Foods high in fibre help control blood cholesterol levels.</td>
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<tr>
<td><strong>Smoking</strong></td>
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<tr>
<td>Doubles your risk of a stroke because it causes the arteries to fur up and makes the blood more likely to clot.</td>
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</tbody>
</table>
| - Giving up smoking reduces your risk of having another TIA or stroke.  
- The NHS Stop Smoking Service can offer free help. 0117 984 1650 or www.bristolstopsmoking.nhs.uk |
| **Diabetes** | 
| The blood vessel walls become damaged and are more likely to fur up. A normal blood sugar is 4 - 7 mmol/l. | 
| - Your blood will be tested. It is important to keep diabetes well controlled through diet and/or medications.  
- See a diabetic nurse at your local surgery. |
| **Being Overweight** | 
| This is associated with high blood pressure, diabetes and inactivity. | 
| - Eat a well balanced diet.  
- Aim for at least five portions of fruit and vegetables each day.  
- Reduce fatty foods.  
- Increase physical activity. |
| **Heavy Alcohol Intake** | 
| Drinking too much alcohol raises blood pressure. Binge drinking (drinking more than six units in six hours) is particularly unhealthy. | 
| - Limit your alcohol to within recommended units;  
  - 21 units per week for men.  
  - 14 units per week for women.  
  - 1 unit = ½ pint beer/cider/lager or a 125 ml glass wine or 25ml spirits.  
  - Have 2 alcohol free days per week. |
4. Taking medications after a TIA

It is important to keep taking your prescribed medications to help reduce your chances of having another TIA or stroke. Most people need to continue taking them for the rest of their life to keep well.

You will need to see your GP for a repeat prescription or if you have any concerns.

**Common Medications** (You may be on other similar ones):

<table>
<thead>
<tr>
<th>Type of medication</th>
<th>What it does</th>
<th>Common Medications</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Blood pressure lowering drugs</strong>&lt;br&gt;”ACE inhibitors”</td>
<td>Helps to keep your <strong>blood pressure lower</strong>.&lt;br&gt;You will be on a <strong>combination</strong> of blood pressure medications to get the best control possible.</td>
<td>Perindopril&lt;br&gt;Ramipril&lt;br&gt;Indapamide&lt;br&gt;Bendroflume-thiazide</td>
<td>We aim for a blood pressure of lower than <strong>135/90</strong>. You should get your <strong>blood pressure checked</strong> when you get a <strong>new prescription</strong>. ACE inhibitors often have a side effect of causing a <strong>dry tickly cough</strong>. If you experience this and find it troublesome, see your GP.</td>
</tr>
<tr>
<td><strong>Blood pressure lowering drugs</strong>&lt;br&gt;”Diuretics”</td>
<td>To prevent <strong>blood clots</strong>.&lt;br&gt;Reduces the stickiness of your blood so it flows more easily to the brain.</td>
<td>Aspirin&lt;br&gt;Asasantin retard (<strong>which contains aspirin + dipyridamole</strong>)&lt;br&gt;Clopidogrel&lt;br&gt;Dipyridamole</td>
<td><strong>Aspirin</strong> - take with/after food to avoid stomach problems. If you experience severe indigestion seek advice from your GP. <strong>Asasantin/Dipyridamole</strong> - headaches are common when first started, but tend to wear off. The headaches can be treated with painkillers if needed but if they continue seek advice from your GP.</td>
</tr>
<tr>
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<tr>
<td>Statin</td>
<td>Helps to <strong>reduce your cholesterol.</strong></td>
<td>Simvastatin Atorvastatin</td>
<td>We aim for a total cholesterol of <strong>less than 3.5 mmol/l</strong>. It is measured by a <strong>blood test</strong>. Take your statin at <strong>night</strong>. (Atorvastatin can be taken in the morning) Sometimes statins can cause <strong>muscle pains</strong> - see your GP if this is happening. <strong>Avoid grapefruit juice</strong> if you are on Simvastatin or Atorvastatin.</td>
</tr>
</tbody>
</table>

**Other common medications that you might need:**

<table>
<thead>
<tr>
<th>Medication</th>
<th>What it does</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Warfarin or Aspirin or Dabigatran/ Riualoxaban/ Apixaban</td>
<td>To prevent blood clots that can form if you have an <strong>irregular heart rhythm</strong> called atrial fibrillation or atrial flutter.</td>
<td>The warfarin dose needs to be monitored regularly by a <strong>blood test</strong> (the INR), which will be directed by your doctor/GP. Your warfarin pack has more information about managing warfarin and side effects.</td>
</tr>
<tr>
<td>Insulin or Gliclazide or Glipizide or Metformin</td>
<td>To treat <strong>diabetes</strong></td>
<td>If you are diabetic you should see your <strong>Diabetic Nurse</strong> at your surgery to be monitored.</td>
</tr>
<tr>
<td>Paracetamol or Cocodamol or Tramadol</td>
<td><strong>Painkillers</strong></td>
<td>Used if you have <strong>pain</strong> as a side effect of your stroke. <strong>Avoid</strong> non steroidal anti inflammatories (eg Brufen, Neurofen, Ibuprofen, Naproxen, Diclofenac). <strong>Avoid</strong> using aspirin as a painkiller.</td>
</tr>
<tr>
<td>Baclofen or Tizanidine</td>
<td><strong>Anti-spasmodics</strong> relieve muscle spasm</td>
<td>If <strong>spasms are a problem</strong> see your GP as you may benefit from anti-spasmodic medication.</td>
</tr>
</tbody>
</table>
5. Returning to Previous Activities

You may return to any of your previous activities/work as soon as you feel well enough and safe (as long as you follow driving restrictions).

You may feel tired for a while after a TIA – pace yourself and listen to your body.

**Sexual Difficulties after a TIA**

You may be worried about causing another TIA or stroke during sex due to raising your blood pressure. This is unlikely, as if you can climb the stairs comfortably your blood pressure will not be at risk during sex. If concerned ask your GP.

Sexual performance can be affected by: side effects of medications, depression, and loss of self-confidence.

Your GP might be able to alter your medications.

Counselling might help you cope with the effects of your TIA on relationships.

**Adjustment**

A TIA can be a worrying experience for you and your family, and you may naturally be concerned about your health. You may find it helpful to talk to your GP or the stroke co-ordinators, or you may wish to speak to other people who have had a similar experience. The following organisations can provide useful support and information.

**Bristol Area Stroke Foundation**

www.stroke-bristol.org.uk

0117 964 7657

**The Stroke Association**

www.stroke.org.uk

Helpline 0303 303 3100
Driving
You must not drive for at least one month after any TIA and then must discuss with your doctor before resuming driving.
If you have had more than one TIA then you must not drive for three months and you must notify the DVLA.
DVLA telephone **0870 600 0301**
(Monday to Friday, 8.00 am to 5.30 pm Saturday, 8.00 to 1.00 pm).
[www.dvla.gov.uk](http://www.dvla.gov.uk)
There are additional restrictions if you have an HGV licence.

Insurance
You will need to inform your car and travel insurance after a TIA.
It may be beneficial to shop around for a new provider.
The British Insurance Brokers Association can give useful independent advice:
Address: 18 Bevis Marks, London EC3A 7JB
Telephone: **0870 950 1790**
Website: [www.biba.org.uk](http://www.biba.org.uk)

Flying
There are no absolute rules for flying after a TIA but most airlines will not accept passengers within 1 month of having a TIA. Ask your doctor for advice.
You will need to follow the usual advice for air passengers such as moving your legs and drinking fluids.
6. Healthy eating

This advice helps everyone to prevent a TIA or stroke, and helps to keep you well after a TIA. It gives practical ideas for healthy eating.

Goals for healthy eating

- Eat at least five portions of fruit and vegetables each day.
- Cut down on fatty foods, particularly those high in saturated fat.
- Have at least one serving of oily fish every week.
- If you are overweight, try to lose some weight.
- Cut back on salt.

Does it matter what I eat?

Yes. Making simple changes to what you eat can help to reduce your risk of a TIA or stroke.

**Eat at least 5 portions of fruit and vegetables each day.**

Aim to ‘eat a rainbow’. Choose fruit and vegetables that are different colours as each contains different health-promoting benefits.

Fruit and vegetables contain vitamins and minerals, which may help protect against TIA/stroke. They are a good source of dietary fibre. Fibre can help to reduce the amount of cholesterol absorbed from your food into your bloodstream.

Fruit and vegetables are also low in fat and calories, making them a helpful choice if you are trying to lose weight or to keep to a healthy weight.
What is a portion?

- 3 heaped tablespoons of vegetables or beans.
- 1 dessert bowl of salad.
- 1 medium-sized fresh fruit – e.g. an apple, orange, pear, peach.
- 2 small fruits e.g. plums, kiwi fruit, satsumas and figs.
- 3 heaped tablespoons of fruit salad (fresh/tinned in juice).
- 1 heaped tablespoon of dried fruit.
- 1 small glass (150 ml) of unsweetened fruit juice.

Potatoes are classed as a starchy food (like bread, rice or pasta) and don’t count towards your five a day.

Have at least one serving of oily fish every week

Oily fish contain omega 3 oils, which may help protect against a TIA/stroke. They help your heart to beat more regularly and can help prevent blood clots.

What are the oily fish? This includes fresh or tinned mackerel, sardines, pilchards, kippers, whitebait, salmon, trout and herring, (but not tinned tuna). One serving is 100g/4oz once cooked, i.e. an average fillet or small tin of fish.

Cut down on fatty foods – saturated (animal) fat

- Replace full fat with lower fat alternatives of milk or cheese.
- Ready meals may be high in fat or oil. Try eating more freshly prepared meals or check the labels to choose the low fat varieties.
- Eat fewer pies, pasties, burgers or sausages.
- Cut back on crisps, biscuits, cake and chocolate. Try fruit instead.
- Choose vegetable or tomato-based sauces rather than butter or cream.
Eat more wholegrain cereals

Eating at least 75g/3oz of wholegrain cereals each day can reduce the risk of a TIA or stroke. They contain vitamins and minerals and are also a source of fibre.

Examples include, wholegrain pasta and bread, brown rice, oatcakes and high fibre breakfast cereals e.g. bran flakes, muesli or porridge.

Cut back on salt

Too much salt in your diet may lead to a rise in blood pressure and can increase your risk of a TIA or stroke. The recommended amount is less than 6g salt/day (1 teaspoon). Reducing your salt intake may help reduce blood pressure.

- Use less salt in cooking or avoid adding salt to your meal at the table.
- Use herbs, spices, pepper, chilli or garlic to add flavour to your food instead of salt.
- Cut back on salty foods such as cheese, processed/canned meats, ready-made meals and salty snacks e.g. crisps and salted nuts.
References and Further Information

The Stroke Association
0303 303 3100
Extensive information leaflets and factsheets about TIA and stroke.
www.stroke.org.uk

Bristol Area Stroke Foundation
0117 964 7657
www.stroke-bristol.org.uk
Individual counselling or group/peer support.

Different Strokes
Secretary – 01454 881 042
For people of working age. Exercise group and peer support.

Carers Centre (Princess Royal Trust for Carers)
0117 965 2200
Advice and support for carers and families.

Age Concern
Freephone – 0800 00 99 66

Food Standards Agency
www.eatwell.gov.uk. www.salt.gov.uk

British Dietetic Association
Tel: 0121 200 8080
www.bdaweightwise.com

Care Direct
Advice regarding social services
Bristol 0117 9222 700
South Glos 01454 868 007
N Somerset 01275 888 801

NHS Constitution. Information on your rights and responsibilities. Available at www.nhs.uk/aboutnhs/constitution
If you or the individual you are caring for need support reading this leaflet please ask a member of staff for advice.

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