

Overview

- You have been referred to the TIA team due to a suspected TIA (transient ischaemic attack or mini-stroke).
- A TIA is the sudden onset of stroke-like symptoms that resolve within 24 hours (but most commonly within thirty minutes). It usually occurs due to a temporary blockage in the blood supply to the brain.
- If your symptoms have lasted longer than 24 hours it is likely you have had a small stroke, rather than a TIA.
- TIA symptoms vary, depending on which part of the brain is affected and include:
 - Speech disturbance (slurred and/or difficulty finding words)
 - Visual disturbance
 - Weakness of face, arm or leg
 - Altered sensation of face, arm or leg
 - Clumsiness
 - Difficulty swallowing
- Call 999 if you feel you are having a stroke, for example, you develop:
 - Slurred speech
 - Facial droop
 - Arm/ leg weakness or numbness
 - Word finding problems
 - Sudden visual disturbance

General support

- For general medical advice please use the NHS website, the NHS 111 service, walk-in-centres, or your GP.
- The **NHS** website provides online health information and guidance www.nhs.uk
- **NHS 111** phone line offers medical help and advice from trained advisers supported by nurses and paramedics. Available 24 hours a day. Calls are free from landlines and mobile phones.
- There are walk-in and urgent treatment services at Brighton Station, in Crawley and at Lewes Victoria Hospital. www.bsuh.nhs.uk/services/ae/
- **Patient Advice and Liaison Service (PALS)** can be contacted with your comments and concerns, and to provide general support. PALS@bsuh.nhs.uk
RSCH: 01273 664683.
PRH: 01444 448678
PALS, Royal Sussex County Hospital, Eastern Road, Brighton BN2 5BE

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Disclaimer: The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

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NHS

**Brighton and Sussex
University Hospitals**
NHS Trust

**TIA - Transient
Ischaemic Attack**
Advice for patients seen in the
Emergency Department

Emergency Department

Royal Sussex County Hospital
Level 5, Thomas Kemp Tower,
Eastern Road, Brighton BN2 5BE
01273 696955 extn. 64261

Princess Royal Hospital
Lewes Road, Haywards Heath RH16 4EX
01444 448745

www.bsuh.nhs.uk

Why are TIAs important?

- TIAs are important as we know that patients who have had a TIA are at risk of developing strokes. The TIA clinic will investigate the underlying cause of your TIA and aim to manage your individual risk factors. This will reduce your chance of developing further TIAs and/or a stroke.

Investigations in TIA clinic

- If required, the TIA team may undertake a range of tests. These may include:”
- **Blood pressure** – so that your GP can adjust your medication to control this.
- **ECG** – to look for an irregular heart rhythm (atrial fibrillation) which is a risk factor for a stroke/TIA.
- **Blood tests** – to look for underlying risk factors of your TIA.
- **Chest x-ray** – to look at your heart and lungs to see if there is anything contributing to your TIA/stroke.
- **Carotid duplex** – to look for narrowing of the blood vessels to your brain. You may be considered for an operation to correct any significant narrowing. This test is not useful for all TIAs.
- **CT/ MRI scan** – to identify further any permanent damage to your brain or any other cause for your symptoms. This is not required for all TIAs.

TIA risk factors

- There are many risk factors for having a TIA or a stroke. Some risk factors cannot be changed. These include increasing age, a family history of stroke and ethnicity (Asian, African, African Caribbean).
- Other risk factors for TIAs and stroke can be changed. The TIA clinic aims to identify these and help you manage them.
- High blood pressure (hypertension) is an important risk factor for TIA and stroke. If blood pressure can be kept at 130/80 or less then this will significantly reduce your chance of developing a stroke.
- Ways to do this include reducing your salt intake, eating a balanced healthy diet and through regular blood pressure checks from your GP with consideration for blood pressure medications.
- The TIA clinic will also look at your blood sugar control if you are diabetic, your alcohol intake, your cholesterol levels and discuss smoking cessation if you smoke.
- There may be other medications started at the TIA clinic or recommended to help reduce your risks. The main medications are overviewed in the next section. Sometimes they are started by the doctor that saw you in the Emergency Department, based on advice from the stroke/TIA team.

Possible new medications

- **Aspirin** 300mg once daily with food for two weeks in total to make your blood less sticky to prevent another TIA or stroke.
- **Lansoprazole** 30mg once daily to protect your stomach while you are taking the high dose of Aspirin.
- **Clopidogrel** 75mg once daily after finishing Aspirin to make your blood less sticky to prevent another TIA or stroke. This can be taken long term.
- **Anticoagulant** to stop your blood clotting so easily to help prevent strokes in atrial fibrillation (irregular heart beat).
- **Statin** to reduce the amount of cholesterol that your body makes. Your body makes most cholesterol at night.
- The doses and exact medications may vary and the TIA clinic and/or your GP will advise you of which medications they have recommended for you.
- If you experience any problems associated with your medications then you should ideally consult your GP or the TIA clinic before making any changes.

Note: Please ensure we have your correct contact details. The TIA team will contact you to discuss whether they feel a clinic appointment is required, based on your symptoms. The clinics are held on the stroke unit at RSCH, Brighton. Your appointment is at