

Transient ischaemic attack (TIA)

- › Signs
- › Treatment
- › Reducing your risk of stroke

About Stroke Foundation

Stroke Foundation partners with the community to prevent stroke, save lives and enhance recovery. We do this through raising awareness, facilitating research and supporting stroke survivors.

Acknowledgement

Stroke Foundation respectfully acknowledges the Traditional Owners and Custodians of Country throughout Australia and acknowledges their continuing connection to land, water, sky and community.

We pay our respect to the peoples, cultures, and Elders past and present for they hold the memories, culture and hope of their peoples.

What you need to know

- › A **transient ischaemic attack (TIA)** is when blood can't get to all parts of your brain for a short time.
- › **The F.A.S.T. test** is an easy way to remember the most common signs of stroke. With a TIA, the signs are the same, but they disappear after a short time.
- › **If you have any of the signs of stroke, call triple zero (000) straight away.** Even if you aren't sure, or the signs only last for a few minutes, call triple zero (000).
- › Your doctor will arrange **tests, referrals and follow-up appointments**. Go to all your appointments.
- › You **can't drive for 2 weeks** after a TIA. If you have a commercial driving licence, you can't drive for 4 weeks.
- › After a TIA, your risk of stroke is higher, especially in the first few days. Getting tests and treatment early on helps reduce your risk. Looking after your health will also help reduce your risk.

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StrokeLine

The StrokeLine team are nursing and allied health professionals. They can answer your questions. They can help you get on the right track.

StrokeLine is a free, confidential and practical service.

StrokeLine is open Monday to Friday, 9am to 5pm Australian Eastern Time. StrokeLine is closed on Australian national public holidays.

Call: **1800 787 653**

Email: **strokeline@strokefoundation.org.au**



What is a transient ischaemic attack?

A transient ischaemic attack (TIA) is when blood can't get to all parts of your brain for a short time.

Blood carries oxygen and nutrients for your brain cells. Blood flows through your arteries. Arteries are like tubes or pipes.

If an artery gets blocked by a blood clot, blood can't get through. Brain cells start to die, and there are signs something is wrong. If the blockage clears, the blood starts to flow again, and the signs disappear.

Unlike a stroke, a TIA has no lasting impact on how well you can walk, move, swallow, think, talk or see.

Don't ignore a TIA. After a TIA, your risk of stroke is higher. It's highest in the first few hours and days after the TIA.

Getting treatment and looking after your health can reduce your risk of stroke by up to 80 percent.

Signs

The F.A.S.T. test is an easy way to remember the most common signs of stroke.

The signs are the same for TIA, but they disappear after a short time. They may only last for a few minutes.

There can be other signs, including:

- › Numbness, clumsiness, weakness or paralysis. This can be in the face, arm or leg. It's usually on one side, but can be on both.
- › Headache. It's usually severe and sudden.
- › Dizziness, especially head spins.
- › Loss of balance.
- › Unexplained fall.
- › Loss of vision in one or both eyes.
- › Difficulty swallowing.
- › Nausea or vomiting.

If you have any of the signs of stroke, call triple zero (000) straight away.

Even if you aren't sure, or the signs only last for a few minutes, call triple zero (000).

Share the F.A.S.T. message with family, friends and workmates:

- › Send them a link to our website strokefoundation.org.au
- › Order free F.A.S.T. cards, magnets and bookmarks to give out to people. Visit our website, go to the online store and choose F.A.S.T. resources.
- › The StrokeLine team can send you free F.A.S.T. resources. Call **1800 787 653** or email strokeline@strokefoundation.org.au

Learn the F.A.S.T. signs of STROKE



FACE
drooped?



ARMS
can't be raised?



SPEECH
slurred or confused?



TIME
*is critical!
Call 000.*

If you see any of these signs
Act FAST call 000
(triple zero)



Tests

You need tests to find out why you had a TIA and how to reduce your risk of stroke.

Your doctor will ask you about:

- › The signs you noticed.
- › How long they lasted.
- › Whether you've had them before.

Your doctor will arrange the tests you need. The results will help your doctor understand if:

- › You had a TIA.
- › You had a small stroke.
- › You have a condition that 'mimics' a TIA.

Brain scan. Everyone should have a brain scan as soon as possible after a suspected TIA.



Computerised tomography (CT scan) or magnetic resonance imaging (MRI) take pictures of your brain.

If you have had a TIA, your scan will not usually show any signs of recent injury to your brain.

Heart tests. Your heart pumps blood to your brain, so problems with your heart can cause a TIA.



- › **Electrocardiogram (ECG).** Everyone should have an ECG after a suspected TIA.

Electrodes placed on your chest record heart activity. A Holter monitor is a wearable ECG. It measures your heart activity over a longer period.

- › **Echocardiogram (ECHO).** You may need an ECHO. This is an ultrasound test.

Artery tests. Arteries carry blood from the heart to the brain. Narrowed or blocked arteries can cause a TIA.

Artery tests take pictures of your arteries. Tests can be done by ultrasound, computerised tomography (CT) angiogram or magnetic resonance angiogram (MRA).

Blood pressure check. After an initial check of your blood pressure, you will need to get it checked regularly.

Blood tests. These tests help find health problems that may have caused your TIA.

You may need to go to the hospital for tests. Your doctor may refer you to a specialist. Your doctor will discuss your test results with you and make a plan for follow up. **Make sure you go to all your appointments.**

Surgery

The carotid arteries in your neck carry blood to your brain.

A carotid endarterectomy is surgery for severely narrowed carotid arteries. This surgery removes plaque to improve blood flow and reduce your risk of stroke.



Driving

You can't drive for two weeks after a TIA. If you have a commercial driving licence, you can't drive for four weeks.

The rules about driving are different for different medical conditions. You need your doctor to confirm you have had a TIA.

Contact your state licensing authority for more information.

Reduce your risk of stroke

Looking after your health helps reduce your risk of stroke.

Risk factors are things that can cause a stroke or make it more likely to happen. They are different for everyone.

Your doctor will let you know what you need to do to keep your risk factors under control. They'll make sure you have the medicines you need.

There are some stroke risk factors you cannot do anything about – being older, being male, a family history or already having had a stroke. But everyone can take action to reduce their risk.

High blood pressure

Normal blood pressure is around 120/80. If your blood pressure is over 140/90 a lot of the time, it's too high.

High blood pressure can damage the walls of blood vessels, and it can lead to heart problems. It can cause clots or plaques to break off and block an artery in the brain.

Control your blood pressure:

- › Take medicine prescribed by your doctor.
- › Ask your GP or pharmacist to check your blood pressure regularly. You can buy a monitor and check it yourself.
- › Eat well, move more and maintain a healthy weight.
- › Don't have too much salt. Read the Eat well section.
- › Don't smoke, and avoid alcohol.



Cholesterol

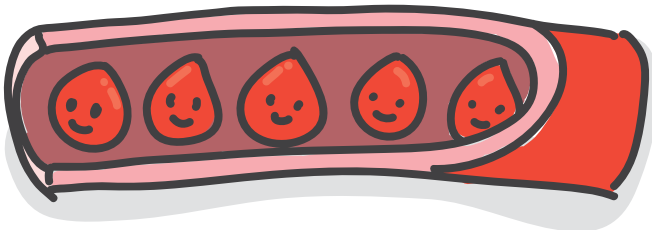
Cholesterol can build up in plaques on the walls of arteries, narrowing the artery and leading to a clot.

There are two types of cholesterol:

- › Low density lipoprotein (LDL) is the bad cholesterol that builds up on the artery walls. The more LDL you have, the higher your risk of stroke.
- › High density lipoprotein (HDL) is the good cholesterol that removes other cholesterol from the blood stream. The more HDL you have, the lower your risk.

Control your cholesterol:

- › Take medicine prescribed by your doctor.
- › Ask your GP to check your cholesterol regularly.
- › Eat well, move more and maintain a healthy weight.
- › Eat less saturated fat. Read the Eat well section.
- › Don't smoke.



Type 2 diabetes

Type 2 diabetes affects the body's ability to absorb glucose, which is a kind of sugar. It can cause fatty deposits or clots in blood vessels.

Control your diabetes:

- › Take medicine prescribed by your doctor.
- › Check your blood glucose when you're supposed to.
- › Eat well, move more and maintain a healthy weight.
- › Don't smoke, and avoid alcohol.

Atrial fibrillation

Atrial fibrillation (AF) is an irregular heartbeat. One of the smaller heart chambers doesn't coordinate the pumping of blood properly. Blood stagnates and clots can form. These clots can then travel to the brain.

Control your AF:

- › Take medicine prescribed by your doctor.
- › Eat well, move more and maintain a healthy weight.
- › Don't smoke, and avoid alcohol.

Other medical risk factors

Heart problems including heart disease and patent foramen ovale (PFO). A PFO is a small hole between the two sides of the heart. Clots that form in veins can cross to arteries that supply blood to the brain.

Blood vessel problems such as atherosclerosis, which is a build up of cholesterol plaques in arteries. Atherosclerosis can be caused by high blood pressure, cholesterol or diabetes.

Blood disorders including essential thrombocytosis, polycythaemia vera, antiphospholipid syndrome and sickle cell anaemia.

Genetic disorders including CADASIL, Ehlers-Danlos syndrome and fibromuscular dysplasia.

Risk factors for women such as pregnancy, oral contraception with a higher dose of oestrogen, or hormone replacement therapy.

An injury to the head or neck.

Sometimes, despite testing, a cause can't be found. It's still important to:

- › Go to all your follow-up appointments.
- › Take the medicines your doctor prescribes.
- › Eat well, move more and maintain a healthy weight.
- › Don't smoke, and avoid alcohol.

Medicines

After a TIA, almost everyone will need to take medicine for the rest of their life.

Blood pressure medicine. Medicines that lower your blood pressure are called anti-hypertensives. Almost everyone who has had a TIA should take anti-hypertensives, even if their blood pressure is normal.

Cholesterol-lowering medicine. Statins are effective in reducing the risk of ischaemic stroke, no matter what your cholesterol level is. High dose statins are usually prescribed, as these are the most effective.

Blood-thinning medicine. These medicines reduce the risk of clots forming. If you have atrial fibrillation or certain heart conditions such as a prosthetic heart valve, you should take anticoagulant medicine.

Never stop taking your medicine or change your dose without talking with your doctor.



Eat well

Not eating well can cause:

- › High blood pressure.
- › High cholesterol.
- › Type 2 diabetes.
- › Heart disease.

Get into fresh food. Eat meals you prepare at home. Eat more:

Vegetables. Fresh, frozen and tinned vegetables are all good.

Grains. Wheat, oats, rice, rye, barley, millet, quinoa and corn. Grain foods include bread, breakfast cereals, rice and pasta. Wholemeal, brown, multigrain and high fibre are best.

Fruit. Fresh, whole fruit is best. Frozen fruit is good too.

Lean meat, eggs, tofu, nuts, seeds and beans. If you eat meat, eat lean beef, chicken and fish. Eat unsalted nuts and seeds. Split peas, lentils, chickpeas and low-salt baked beans are good too.

Milk, cheese and yoghurt. Low fat is best. Fresh, long-life and powdered milk are all good.

Water. This is the best drink. Ask your GP how much water you should drink each day.

Healthy fats and oils. There are different kinds of fats, and some are healthier than others.

Use sunflower, canola and olive oil. Try nut butter or avocado.



Eat less:

Butter, cream, cooking margarine, coconut and palm oil.

Stay away from takeaway food like pies, hamburgers, pizza and chips. Same with biscuits, cakes and potato chips.

The fat in all these foods is called **saturated fat**. Too much of this fat can give you high cholesterol.

Salt. Too much salt can give you high blood pressure. Have less than four grams of salt a day. This is about three-quarters of a teaspoon. It's equal to 1600 milligrams of sodium.

Packaged food already has salt in it. The more fresh food you eat, the less salt you'll get. Don't add salt when you cook or when you eat.

Sugar. Too much sugar can damage your arteries. Eat fewer sweets – lollies, chocolate, cakes, biscuits and ice cream. Cut out sugary drinks – soft drinks, cordial, energy drinks, and fruit drinks.

Move more

Not moving enough increases your risk of:

- › Type 2 diabetes.
- › Being an unhealthy weight.
- › High blood pressure.
- › High cholesterol.

Move as much as you can throughout your day. Reduce the time you spend sitting or not moving. Break it up as much as you can.

Do jobs around the house. Walk places instead of driving.

Get into activities you enjoy. Go for a walk, kick a ball around, go fishing or work in the garden. Make it social. Invite family and friends to join you, or join a local exercise group.

Be active like this for at least 30 minutes every day. It can be split up into smaller bursts throughout the day. It's okay to start small and build up gradually.



Maintain a healthy weight

Being over the healthy weight range can cause:

- › High blood pressure.
- › High cholesterol.
- › Type 2 diabetes.

Talk with your doctor about what a healthy weight is for you. Eating well and moving more will help you get to and maintain a healthy weight.

Start by setting a small goal. Make small changes that will help you get there. Once you get there, set another goal.

Getting to a healthy weight can take time. It's not always easy. Don't give yourself a hard time, the main thing is to keep going. Feel proud of yourself for losing a bit of weight and keeping it off.

Don't smoke

Smoking can damage your arteries and cause a stroke. Breathing other people's smoke also increases your risk of stroke.

It's never too late to stop smoking. Once you stop, your risk of stroke starts to drop straight away.

It can be hard to quit smoking, so ask for help. Talk with your doctor about what can help you stop smoking.

Nicotine replacement therapy or a stop-smoking medicine can help you quit successfully.

Contacting Quitline increases your chance of quitting successfully. Get free advice from a Quit expert, create a personalised quitting plan and get text and email support.

Quitline 13 78 48 quit.org.au

Alcohol

Alcohol can cause high blood pressure and atrial fibrillation. It can make it hard to maintain a healthy weight and make diabetes harder to control.

The Australian Guidelines say healthy men and women should have no more than 10 standard drinks a week, and no more than 4 standard drinks on any one day.

The Guidelines are for healthy people. Talk with your doctor about alcohol and your risk of stroke.

The less you drink, the lower your risk of harm from alcohol. Change your drinking:

- › Check the drink label to keep count of how many standard drinks you are having.
- › Drink low or no alcohol beer, wine or spirits.
- › Say 'I'm not drinking' or 'I've had one already thanks.' You don't need to explain why you're not drinking.

For tips on drinking less, visit hellosundaymorning.org

Counselling Online is a free and confidential service for people affected by alcohol or drug use. counsellingonline.org.au

What is a standard drink?



375mL bottle
of mid
strength beer
(3.5%)*



100mL
glass of
red wine
(13%)*



30mL nip
of spirits
(40%)*

My stroke risk factors

RISK FACTOR (Tick if applies to you)	WHAT I NEED TO DO (Tick the things you need to do and add in other things that will help)
High blood pressure <input type="radio"/>	<ul style="list-style-type: none"><input type="radio"/> Take medicine prescribed by your doctor.<input type="radio"/> Ask your GP or pharmacist to check your blood pressure regularly.<input type="radio"/> Eat well, move more and maintain a healthy weight.<input type="radio"/> Don't have too much salt.
High cholesterol <input type="radio"/>	<ul style="list-style-type: none"><input type="radio"/> Take medicine prescribed by your doctor.<input type="radio"/> Get your GP to check your cholesterol regularly.<input type="radio"/> Eat well, move more and maintain a healthy weight.<input type="radio"/> Eat less saturated fat.<input type="radio"/> Don't smoke.
Type 2 diabetes <input type="radio"/>	<ul style="list-style-type: none"><input type="radio"/> Take medicine prescribed by your doctor.<input type="radio"/> Check your blood sugar when you're supposed to.<input type="radio"/> Eat well, move more and maintain a healthy weight.<input type="radio"/> Don't smoke and avoid alcohol.
Atrial fibrillation (AF) <input type="radio"/>	<ul style="list-style-type: none"><input type="radio"/> Report any potential symptoms to your doctor – racing heart, palpitations, dizziness.<input type="radio"/> Take medicine prescribed by your doctor.<input type="radio"/> Eat well, move more and maintain a healthy weight.<input type="radio"/> Don't smoke and avoid alcohol.
Not eating well <input type="radio"/>	<ul style="list-style-type: none"><input type="radio"/> Eat more fresh food – vegetables, grains, fruit, lean meat, eggs, tofu, nuts, seeds and beans, milk, cheese and yoghurt.<input type="radio"/> Eat less butter, cream, cooking margarine, coconut oil and palm oil, salt and sugar.<input type="radio"/> Drink water. Ask your doctor how much water you should drink each day.

<p>Not moving enough</p> <p>○</p>	<ul style="list-style-type: none"> ○ Move as much as you can throughout your day. ○ Be active for at least 30 minutes every day. ○ Reduce the time you spend sitting or not moving. Break it up as much as you can.
<p>Unhealthy weight</p> <p>○</p>	<ul style="list-style-type: none"> ○ Ask your doctor what a healthy weight is for you. ○ Eat well, move more and avoid alcohol. ○ See your doctor regularly for help getting to a healthy weight.
<p>Smoking</p> <p>○</p>	<ul style="list-style-type: none"> ○ Talk with your doctor or pharmacist about stopping smoking. ○ Nicotine replacement therapy or a stop smoking medicine can help you quit successfully. ○ Call Quitline on 13 78 48 or visit quit.org.au
<p>Avoid alcohol</p> <p>○</p>	<ul style="list-style-type: none"> ○ Talk with your doctor about alcohol and your risk of stroke. ○ Get support to change your drinking.

Get help

Triple zero

Call triple zero (000) if you have any of the signs of stroke

Even if you aren't sure, or the signs only last for a few minutes, call triple zero (000).

See your GP regularly

Your GP will:

- › Make sure you have your medicines.
- › Arrange any tests you need.
- › Check your blood pressure and cholesterol.
- › Look after any health problems you have.
- › Refer you to any specialists or allied health professionals you need to see.

StrokeLine

The StrokeLine team are nursing and allied health professionals. They can give you information, advice and support. They take the time to listen. They can answer your questions.

StrokeLine is a free, confidential and practical service.

StrokeLine is open Monday to Friday, 9am to 5pm Australian Eastern Time.

StrokeLine is closed on Australian national public holidays.

Call **1800 787 653**.







Email strokeline@strokefoundation.org.au



How to get more involved

Many people affected by TIA, their family members and friends want to become involved in the fight against stroke and TIA.

There are many options and we would love to have your support.

-  **Give time** – become a volunteer.
-  **Raise funds** – donate or hold a fundraising event.
-  **Speak up** – join our advocacy team.
-  **Leave a lasting legacy** – include a gift in your Will.
-  **Know your numbers** – check your health regularly.
-  **Stay informed** – keep up-to-date and share our message.

-  **1300 194 196**
-  strokefoundation.org.au
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