

UK stroke care is improving, but inequalities still exist

February 25 2011

The quality of stroke care in the UK is improving, but significant inequalities still exist, warns a new study published in the British Medical Journal today.

Previous reports have suggested that the quality of UK [stroke](#) care is improving, but there is limited information on trends of care from population-based studies. So a team of researchers in London assessed the provision of acute stroke care for 3,800 patients registered on the south London stroke register between 1995 and 2009.

They measured the provision of effective acute stroke care, in line with current guidelines, against demographic factors such as age, sex, ethnic origin and [socioeconomic status](#).

The proportion of patients receiving effective acute stroke care interventions increased substantially between 1995 and 2009.

However, between 2007 and 2009, 5% of patients were still not admitted to hospital after an acute stroke, particularly those with milder strokes, and 21% of patients were not admitted to a stroke unit.

They also found a disproportionate access to effective care. For example, compared with white patients, black patients had significantly increased odds of being admitted to a stroke unit and receiving occupational therapy or physiotherapy, independent of age or stroke severity.

The odds of brain imaging were lowest in older patients (aged 75 or more years) and those of lower socioeconomic status, whereas older patients were more likely to receive [occupational therapy](#) or physiotherapy.

Despite a government goal of universal access to healthcare, the findings of this study suggest a disproportionate access to [acute stroke](#) care, say the authors. They conclude that strategies to minimise these inequalities are urgently needed to increase the chances that all patients receive optimal care with improved outcomes.

Provided by British Medical Journal

Citation: UK stroke care is improving, but inequalities still exist (2011, February 25) retrieved 12 May 2024 from <https://medicalxpress.com/news/2011-02-uk-inequalities.html>

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