

Study shows stroke prevention clinics reduce one-year mortality rates by over 25 percent

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Research led by Dr. Vladimir Hachinski of The University of Western Ontario reveals just how important it is for patients to be referred to a stroke prevention clinic following either a mild stroke or a transient ischemic attack (TIA). The study, published in the journal *Stroke* in November, showed a 26% reduction in one-year mortality rates among those referred to a stroke prevention clinic.

The risk of stroke after a TIA may be as high as 20% in the first three months. Half of the strokes occur in the first 24 to 48 hours after a TIA. Organized inpatient care has been shown to decrease morbidity and mortality but little research has been done on the benefits of organized outpatient [stroke prevention](#) clinics. These clinics facilitate early assessment, diagnosis and treatment of patients with a recent TIA or non-disabling stroke.

Using data from the Registry of the Canadian Stroke Network, the researchers compared more than 16,000 patients with [ischemic stroke](#) or TIA seen in the emergency department or admitted to hospital in Ontario between July 1, 2003 and March 31, 2008.

"Organized [stroke care](#) works," says Dr. Hachinski, a Professor in the Department of Clinical Neurological Sciences at Western's Schulich School of Medicine & Dentistry, and a Scientist with the Lawson Health Research Institute. "It doesn't really matter about the size, location and hours of these clinics. Patients benefit because you have interested people with some expertise, following best practice standards and

gaining experience from doing things repeatedly."

"This study provides important evidence that referral to a SPC reduces mortality. The basic underlying principle of our study is that organized care, even with staggered models, makes a positive difference at all levels," adds Fiona Webster, first author and Education Scientist/Assistant Professor in the Department of Family and Community Medicine at the University of Toronto.

Provided by University of Western Ontario

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