

Blood pressure control, lifestyle changes key to preventing subsequent strokes

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Stroke survivors should control their blood pressure, cholesterol and weight and do moderate physical activity regularly to avoid having another stroke, according to an American Heart Association/American Stroke Association scientific statement.

They should also receive other evidence-based therapy specific to their individual health, which may include aspirin therapy or a surgical procedure to keep neck arteries open.

The statement, "Guidelines for the Prevention of Stroke in Patients with Stroke and Transient Ischemic Attack (TIA)," is published in the American Heart Association journal *Stroke*.

"A vast amount of new research is revealing new and improved ways to protect patients with an ischemic [stroke](#) or [transient ischemic attack](#) from having recurrent events and further brain damage," said Walter Kernan, M.D., lead author and chair of the guideline writing group and professor of medicine at Yale University School of Medicine in New Haven, Conn.

Treating [high blood pressure](#) is possibly most important for secondary prevention of ischemic stroke, according to the statement. About 70 percent of people who have had a recent ischemic also have high [blood pressure](#).

The statement notes that intensive cholesterol-lowering therapy is also

important for survivors whose stroke was caused by hardened arteries. However, the association no longer recommends niacin or fibrate drugs to raise good cholesterol, due to sparse data establishing their effectiveness at reducing secondary stroke risk.

It's also good for stroke/TIA survivors capable of engaging in physical activity to have three to four sessions per week of moderate-vigorous intensity aerobic physical exercise such as walking briskly or riding a bike, according to the statement. Since the last update in 2011, the association added sections on nutrition, sleep apnea, aortic arch atherosclerosis and pre-diabetes.

New recommendations include:

- Screening stroke and TIA survivors for diabetes and obesity
- Possible screening for sleep apnea
- Possible nutritional assessment
- 30-day monitoring for irregular heart beat (atrial fibrillation) for those who had a stroke of unknown cause
- Anticoagulants in specific situations
- Following a Mediterranean-type diet that emphasizes vegetables, fruits, whole grains and includes low-fat dairy, poultry, fish, legumes and nuts and limits sweets and red meat

Clinical trials haven't proven the benefits of a Mediterranean diet after ischemic stroke or TIA, so statement recommendations are based on compelling but lower levels of research.

Each year in the United States, more than 690,000 adults have an ischemic stroke, which originate from blood clots that block blood flow in the brain or in a vessel leading to the brain.

Another 240,000 Americans will experience a TIA. Although TIA leaves

no immediate impairment, survivors are at high risk for a future stroke.

On average, the annual risk for a future ischemic stroke after an initial ischemic stroke or TIA is about 3 percent to 4 percent.

"The key to staying healthy after an [ischemic stroke](#) or TIA is careful and rapid assessment of the cause of the event and identification of [stroke risk factors](#) so that appropriate preventive interventions can be quickly provided," Kernan said.

"Then, patients must work with their doctors regularly to stay on their prevention program. With this approach, every patient can look forward to a healthier future."

Provided by American Heart Association

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