

Health advice

What is a stroke?

A stroke is the rapid loss of brain function that results from a disturbance in the blood supply to the brain. This can be due to ischemia (lack of blood flow) caused by blockage (thrombosis, which is a blood clot and an arterial embolism, which is a blood clot that has travelled through your arteries and become stuck), or leakage of blood (called a haemorrhage).

As a result, the affected area of the brain cannot function and this may result in some or all of the following symptoms.

Signs and symptoms

The main symptoms of stroke can be remembered with the word FAST: Face-Arms-Speech-Time.

- **Face** – the face may have dropped on one side, the person may not be able to smile or their mouth or eye may have dropped.
- **Arms** – the person with suspected stroke may not be able to lift both arms and keep them there because of arm weakness or numbness in one arm.
- **Speech** – their speech may be slurred or garbled, or the person may not be able to talk at all despite appearing to be awake.
- **Time** – it is time to dial 999 immediately if you see any of these signs or symptoms.

A stroke is a medical emergency and can cause permanent neurological damage (damage to the brain), complications and death. It is the leading cause of adult disability.

Risk factors

Risk factors for stroke include old age, hypertension (high blood pressure), previous stroke or transient ischemic attack (TIA – see below), diabetes, high cholesterol, smoking and atrial fibrillation (irregular and/or abnormally fast heart rate).

High blood pressure is the most important modifiable risk factor of stroke.

A transient ischaemic attack (TIA) or "mini stroke" is caused by a temporary disruption in the blood supply to part of the brain. The disruption in blood supply results in a lack of oxygen to the brain. This can cause symptoms similar to those of a stroke, such as speech and visual disturbance and numbness or weakness in the arms and legs.

However, a TIA does not last as long as a stroke. The effects only last for a few minutes and are usually fully resolved within 24 hours. If the above signs and symptoms last longer than 24 hours, it is regarded as a full stroke.

It is important that a person who has a TIA is checked and treated as soon as possible to minimise the risk of having a further TIA or a full stroke. With treatment, the risk of a further TIA or full stroke can be greatly reduced.

How can I lower the risk of having a stroke?

The best way to help prevent a stroke is to eat a healthy diet, exercise regularly and avoid smoking and drinking too much alcohol.

These lifestyle changes can reduce your risk of problems such as atherosclerosis (where arteries become clogged up by fatty substances), high blood pressure and high cholesterol levels, all of which are important risk factors for strokes.

If you have already had a stroke, making these changes can help reduce your risk of having another one in the future.

Diet

An unhealthy diet can increase your chances of having a stroke because it may lead to an increase in your blood pressure and cholesterol levels.

Therefore, a low-fat, high-fibre diet is usually recommended, including plenty of fresh fruit and vegetables (five portions a day) and whole grains.

Ensuring a balance in your diet is important. Don't eat too much of any single food – particularly foods that are high in salt and processed foods.

You should limit the amount of salt you eat to no more than 6g (0.2oz) a day because too much salt will increase your blood pressure. Six grams of salt is about one teaspoonful.

Exercise

Combining a healthy diet with regular exercise is the best way to maintain a healthy weight, and regular exercise can also help lower your cholesterol level and keep your blood pressure at a healthy level.

For most people, at least 150 minutes (2 hours and 30 minutes) of moderate-intensity aerobic activity, such as cycling or fast walking, every week is recommended.

If you are recovering from a stroke, you should discuss possible exercise plans with the members of your rehabilitation team. Regular exercise may not be possible in the first weeks or months following a stroke but you should be able to begin exercising once your rehabilitation has progressed.

Stop smoking

Smoking significantly increases your risk of having a stroke. This is because it narrows your arteries and makes your blood more likely to clot.

If you stop smoking, you can reduce your risk of having a stroke. Not smoking will also improve your general health and reduce your risk of developing other serious conditions, such as lung cancer and heart disease.

The NHS Smoking Helpline can offer advice and encouragement to help you quit smoking. You can call on 0300 123 1044, or visit NHS Smokefree.

Cut down on alcohol

Excessive alcohol consumption can lead to high blood pressure and trigger irregular heartbeat (atrial fibrillation), both of which can increase your risk of having a stroke.

Because alcoholic drinks are high in calories they also cause weight gain. Heavy drinking multiplies the risk of stroke by more than three times.

If you choose to drink alcohol and have fully recovered, you should aim not to exceed the recommended limits. These are:

- men should not regularly drink more than 3-4 units of alcohol a day
- women should not regularly drink more than 2-3 units a day

If you have not fully recovered from your stroke, you may find that you will have become particularly sensitive to alcohol and even the recommended safe limits as above for the general population may be too much for you.

Managing underlying conditions

If you have been diagnosed with a condition known to increase your risk of stroke – such as high cholesterol, high blood pressure, atrial fibrillation, diabetes or a transient ischaemic attack (TIA) – ensuring the condition is well controlled is also important in helping prevent strokes.

The lifestyle changes mentioned above can help control these conditions to a large degree, but you may also need to take regular medication.