

eso-stroke.org

The European Stroke Organisation (ESO) Guidelines on Management of Transient Ischaemic Attack (TIA)

PRESS RELEASE

Basel, 16 March 2021 – The European Stroke Organisation (ESO) guidelines on management of Transient Ischaemic Attack focus on issues specific to early TIA management. Therefore, aspects such as services organisation including the role of stroke specialists and TIA clinics; usefulness of risk prediction tools such as the ABCD2 score; brain imaging (plain and perfusion CT, MRI), imaging of cervical arteries, and single and dual antiplatelet therapy are covered.

A transient ischaemic attack or TIA (also known as a mini-stroke) is similar to a stroke, except that the symptoms last for a short amount of time. A TIA may act as a warning for a more serious and disabling stroke and it is a frequent reason that people seek medical care. Recognition of the significance of TIAs allows for prompt specialist treatment, which may include medications to reduce the risk of subsequent stroke.

For some people with a high risk of a stroke, and whose TIA is not due to a heart problem taking two medicines together as tablets (Aspirin and clopidogrel), within the first day after a TIA and for up to 3 weeks afterwards, can reduce the risk of stroke.

For every 50 'at risk' patients treated in this way, one patient will avoid having a recurrent stroke.

For someone who has had a TIA, it is recommended that they have a specialist review in a TIA clinic within the first day of the TIA, rather than waiting for more than a day to attend a regular outpatient appointment.

Healthcare professionals will sometimes use simple equations, known as risk prediction tools, to help them assess who is most at risk of a subsequent stroke. However, these prediction tools should not be the only way in which the risk is assessed. TIA is a clinically based diagnosis and calculated prediction scores should not replace a clinical assessment where a diagnosis is made by an experienced stroke specialist healthcare professional.

Brain scans using a specialist CT or an MRI scanner may help to confirm that temporary neurological symptoms are indeed due to a TIA. These specialist scans are considered more useful than a standard CT brain scan, however these advanced scans may not always be possible to perform in every location.

When diagnosing a TIA, it's important to try to see if there is any narrowing of certain large blood vessels in the brain. Blood tests that are done in conjunction with a brain scanner e.g. MRA (an MRI based blood vessel test) or CTA (a CT based blood vessel test also known as an angiogram) should be available to help detect any narrowing and to decide the best course of treatment.

Head Office

European Stroke Organisation

Reinacherstrasse 131 4053 Basel Switzerland +41 61 686 77 76 esoinfo@eso-stroke.org



eso-stroke.org

It is still not known which is the best healthcare setting to treat TIA. Large research studies are needed to compare TIA treatment in for example a TIA clinic, or on a stroke unit, or in an emergency department etc., to see which of them is the most useful and cost effective in preventing stroke.

These recommendations aim to emphasise the importance of prompt acute assessment and relevant secondary prevention.

Please visit the ESO Website <u>here</u> to access the full Guideline on the Management of TIA. In addition, we have produced a short video with the most important recommendations.

You can watch the video here.

Always stay informed by visiting our **ESO Guideline Directory**.

Contact: ESO Head Office esoinfo@eso-stroke.org

About ESO

The European Stroke Organisation (ESO) is a pan-European society of stroke researchers and physicians, national and regional stroke societies and lay organisations founded in 2007. The aim of ESO is to reduce the burden of stroke by changing the way that stroke is viewed and treated. This can only be achieved by professional and public education, and by making institutional changes. ESO serves as the voice of stroke in Europe, taking action to reduce the burden of stroke regionally and globally. www.eso-stroke.org.