Life after stroke or TIA

Manage your health and live well after a stroke or transient ischaemic attack (TIA)
What is a stroke?

Stroke attacks the brain – our most vital organ.

A stroke happens when the blood supply to the brain is interrupted. Blood is carried to your brain by blood vessels called arteries. Blood carries oxygen and nutrients for your brain cells. If the blood supply stops, your brain cells die and your brain is injured.

A stroke can be caused by the artery being blocked by a clot or by plaque. It can also be caused by bleeding if the artery breaks or bursts.

What is a TIA?

A transient ischaemic attack (TIA) happens when the blood supply to your brain is blocked temporarily. When the blood supply stops, the brain cells in the area start to shut down, and you experience signs something is wrong.

If the blockage clears, the blood supply starts again and the signs disappear. A TIA will have no lasting impact, making it different to a stroke.

After a TIA your risk of stroke is higher. A TIA is a warning that you may have a stroke and an opportunity to prevent this from happening.

Every stroke is different depending on where in the brain it strikes and how severe it is. What is common are the changes it can bring for survivors, carers and family.
Know the signs of stroke and TIA

It’s important you and everyone around you know the signs of stroke. *Never ignore the signs, even if they disappear*. Medical treatment may lessen the impact and improve your chance of survival, but it depends on getting to hospital quickly. Always call 000.

The F.A.S.T. test is an easy way to remember the most common signs of stroke and TIA.

**There can be other signs, such as:**

- Numbness, clumsiness, weakness or paralysis of the face, arm or leg on one or both sides.
- Dizziness (in particular ‘head spins’), loss of balance or an unexplained fall.
- Loss of vision in one or both eyes.
- Headache, usually severe and sudden.
- Difficulty swallowing.
- Nausea or vomiting.
Work with your doctor to reduce your risk if you have:

- High blood pressure (hypertension)
- High cholesterol
- Atrial fibrillation (AF or irregular heart beat)
- Uncontrolled diabetes
How do I reduce my risk of having another stroke or TIA?

After a TIA or stroke, your risk of stroke is higher. The good news is there are things you can do to reduce your risk.

It is important to understand the cause and how to manage your risk factors. Sometimes the cause is unknown, but you still need to understand all the risk factors and how to control them.

The most important thing you can do to reduce your risk is to attend appointments arranged by the hospital, and visit your general practitioner (GP) regularly.

Work with your doctor to reduce your risk

High blood pressure is the biggest risk factor for stroke. If your blood pressure is too high, your arteries can thicken over time. They become weaker and less flexible. The chance of blood clots forming increases and this can cause a stroke.

Normal blood pressure is around 120/80. If your blood pressure is regularly over 140/90, you have high blood pressure. Medication, diet changes and exercise can all reduce your blood pressure.

High cholesterol can lead to fatty build-up in the arteries. It narrows or blocks the artery to the brain, and this can cause a stroke. Medication, diet changes and exercise can all reduce your cholesterol.

Atrial fibrillation, or AF, is an irregular heartbeat. Blood does not move through the heart completely or smoothly. Blood clots can form in the heart and travel to the brain, and this can cause a stroke. Medication is used to control AF.

Uncontrolled diabetes can lead to your artery walls becoming hard and narrow. The chance of blood clots forming increases, and this can cause a stroke. Maintaining healthy blood sugar levels will help reduce your risk.

Medication

After a stroke or TIA, almost everyone will need to take medication for the rest of their life. Medications to lower blood pressure and cholesterol are usually prescribed, even if blood pressure and cholesterol are normal. These medications have been shown to reduce the risk of another stroke. Never stop taking your medication or change your dose without talking to your doctor.
Make lifestyle changes to reduce your risk of stroke:

› Be smoke free
› Be active
› Eat well and maintain a healthy weight
› Drink alcohol safely
Make lifestyle changes to reduce your risk

Be smoke free. Smoking increases your risk of stroke by increasing blood pressure and reducing oxygen in the blood. The chemicals in tobacco narrow and harden your arteries. The chance of blood clots forming increases, and this can cause a stroke. Once you stop, your risk of stroke starts to drop immediately.

Speak to your doctor about quitting. Call Quitline for information and support on 13 78 48, or visit www.quitnow.gov.au

Be active. Not moving enough increases your risk of high blood pressure and cholesterol, increasing your risk of stroke. Get started by increasing your level of activity and the number of steps you take each day.

Speak to your doctor about exercising safely, and see a physiotherapist or other allied health professional if needed.

Eat well and maintain a healthy weight. A poor diet increases your risk of high blood pressure and cholesterol, increasing your risk of stroke. A healthy diet will reduce this risk and help you maintain a healthy weight.

Eat a wide variety of nutritious foods, including plenty of vegetables, fruit, grains and cereals. Include lean meats and poultry, fish, eggs, tofu, nuts and seeds. Eat dairy foods or their alternative, choosing mostly reduced fat. Drink plenty of water. Limit the amount of salt, sugar and saturated fats you eat.

Speak to your doctor and see a dietitian or other allied health professional if needed.

Drink alcohol safely. Drinking too much alcohol contributes to several risk factors for stroke, including high blood pressure. For healthy people, drinking no more than two standard drinks on any day reduces the risk of harm.

After a stroke or TIA, you need individual advice. Your doctor can tell you when it is safe for you to start drinking alcohol again and how much alcohol it is safe for you to drink.

Stroke Foundation’s StrokeLine health professionals can give you advice on controlling your risk factors. Call StrokeLine on 1800 787 653 or email strokeline@strokefoundation.org.au
How a stroke can impact you

Because a stroke affects the brain, it can affect everything you do, think and feel.

Some impacts of stroke are obvious immediately. Other impacts may take some time to notice and can become worse over time. You may need more information about:

**Fatigue.** Fatigue is a feeling of weariness, tiredness or a lack of energy. Fatigue can affect anyone, no matter how mild or severe their stroke. For many people it does improve with time, however it is unpredictable and can last longer than you expect.

**Depression and anxiety.** It’s normal to experience strong emotions after a stroke. Emotional reactions usually improve with time, but you may experience more long-lasting emotional difficulties. Depression and anxiety are common after a stroke.

You may have depression if you feel sad or down for more than two weeks. You may lose interest in things you normally enjoy, lack energy, have difficulty sleeping, or sleep more than usual.

You may have anxiety if anxious feelings do not go away once a stressful situation is over or if you feel anxious for no particular reason.

Depression and anxiety are highly treatable and recovery is common. Never ignore the signs of depression or anxiety – speak to your doctor.

**Thinking and memory.** These difficulties can often become more noticeable after you get home and start getting back into routines and activities. You may find it hard to pay attention or to remember things. Getting organised and solving everyday problems may be hard.

**Muscle spasticity.** High tone or activity in your muscles makes them feel stiff and tight. Muscle spasticity can cause stiffness in the fingers, arms or legs. It can also cause muscle spasms, overactive reflexes and involuntary jerking.

**Relationships.** Coping with the initial crisis of stroke and building a ‘new normal’ for yourself can be challenging. Stroke can bring changes to lifestyle, routines and roles. Couples and families may have to adjust to changes in their relationships.

Your doctor or allied health professional can help you manage the impact of your stroke. They can give you advice on treatment and rehabilitation.

StrokeLine’s health professionals can give you advice and support on managing your health better, and living well after stroke. They can give you details about helpful services.

Call StrokeLine on 1800 787 653 or email strokeline@strokefoundation.org.au
Paul, stroke survivor
Fear of having another stroke or TIA

For anyone who’s had a stroke or TIA, one of the biggest fears is whether it will happen again. Having a plan and taking action to reduce your risk can help. There is support available to manage anxious thoughts and feelings. Speak to your doctor or allied health professional about how you are feeling.

Driving after a stroke or TIA

It is important to follow the rules about driving after a stroke or TIA. You must:

Wait. Don’t drive for two weeks after a TIA or four weeks after a stroke. These times are longer if you hold a commercial licence.

Check with your local licensing authority. It is your responsibility to know the rules in your state or territory.

Speak to your doctor. You need medical clearance to return to driving. Your doctor can clear you to drive if you have made a good recovery from the stroke and you don’t have any remaining impairments affecting your ability to drive.

Have a driving assessment if needed. Your doctor may recommend an occupational therapy driving assessment if you have impairments after your stroke.

Find out more at strokefoundation.org.au

Neuroplasticity and recovery

Neuroplasticity is the brain’s ability to change. After a stroke, pathways in the brain can change. Undamaged parts of the brain can take over the job of damaged areas.

Working on the things you find difficult is the best way to promote neuroplasticity. Stroke survivors can continue to make improvements for years after their stroke.
Accessing allied health and rehabilitation services

Allied health professionals include physiotherapists, occupational therapists, speech pathologists, dietitians, social workers, psychologists and podiatrists. You may like to consult an allied health professional to:

› Make lifestyle changes to control your risk factors.
› Manage the impacts of your stroke.
› Maintain the gains you have made or work towards new goals.

Options include:

Medicare-subsidised sessions. After a stroke, you can access five allied health sessions each year with a Chronic Disease Management Plan.

If you have been diagnosed with a mental health condition such as depression or anxiety, you can access 10 counselling sessions each year with a Mental Health Care Plan.

Access to Medicare-subsidised sessions is usually arranged by your GP. There is usually a gap payment so check this when you make an appointment.

Your NDIS plan. If you are eligible for the National Disability Insurance Scheme, think about how allied health therapy may help you to better manage everyday activities and achieve your goals. Make sure your needs are considered in the planning process with NDIS.

Private health insurance. Talk to your provider to see what is available to you. It may include access to allied health services or rehabilitation sessions at a private hospital.

Community-based rehabilitation. Ask your GP about community-based rehabilitation options. This is a good option if you need more than one type of allied health professional, if what you can do has changed or if you have new goals.

Research and student clinics. Research can involve testing a therapy so participation can help with recovery. Universities offer student clinics that can be a good way to access low cost allied health services. Visit strokefoundation.org.au for information about research.

StrokeLine can help you with advice on your options. Call 1800 787 653 or email strokelife@strokefoundation.org.au

Stroke support groups

Stroke support groups allow stroke survivors and carers to meet regularly to share information and support each other.

Visit strokefoundation.org.au to see if there is a group near you, or a stroke association in your state. Call StrokeLine for more information on 1800 787 653 or email strokelife@strokefoundation.org.au
Our TIA booklet has more information on TIA signs, treatment and risk factors.

Our fact sheets cover:

- Aged care homes
- Alcohol
- Communication
- Depression and anxiety
- Diet
- Driving
- Emotional and personality changes
- Fatigue
- Incontinence
- Medication
- Mobility and exercise
- Muscle spasticity
- Pain
- Palliative care
- Return to work
- Sex and relationships
- Swallowing problems
- Supporting children after a family member’s stroke
- Thinking and perception
- Upper limb management
- Vision loss.

To access free information about stroke:

Visit our website strokefoundation.org.au

Call StrokeLine for free copies of all our printed information.

Call 1800 787 653 or email strokeline@strokefoundation.org.au
**StrokeLine**

StrokeLine’s health professionals provide information and advice on stroke prevention, treatment and recovery. Our team can help you to find the support and services you need, whether you are a stroke survivor, carer or family member.

StrokeLine’s practical and confidential advice will help you manage your health better and live well.

StrokeLine is available Monday to Friday, 9am to 5pm Eastern Standard Time. StrokeLine is a free service of the Stroke Foundation, made possible through the generosity of our donors.

Call 1800 787 653 or email strokeline@strokefoundation.org.au

**Using an interpreter to call StrokeLine**

If you or a family member would like to speak to StrokeLine with an interpreter, just follow these steps:

› Call the Telephone Interpreting Service on 13 14 50
› Say the language you need and wait on the line for an interpreter
› Ask the interpreter to call StrokeLine 1800 787 653.

---

**EnableMe**

EnableMe will help you manage your own stroke recovery. EnableMe.org.au is Australia’s largest online stroke community.

› Get the information you need
› Connect with other stroke survivors and carers, or read and watch people’s stories of stroke and recovery.
› Get advice from StrokeLine via ‘Ask a Health Professional’.
› Use our goal setting tool to plan your recovery.

Every month we add a new podcast to EnableMe. Podcasts are radio programs that you can listen to on your computer, tablet or mobile phone. Listen to stroke survivors, researchers and health professionals as they tackle the topics that matter to stroke survivors.

It is free to join. Find out more at enableme.org.au.
Can you help?

After a stroke or TIA, many family members and friends often wish to become involved in the fight against stroke.

There are many options and we would love to have your support.

- **Give time** – become a volunteer.
- **Raise funds** – donate or hold a fundraising event.
- **Speak up** – join our advocacy team.
- **Leave a lasting legacy** – include a gift in your Will.
- **Know your numbers** – check your health regularly at over 300 digital health stations nationally.
- **Stay informed** – join our email list to keep up-to-date and share our message.

Join us or find out more at strokefoundation.org.au/help

---

**About the Stroke Foundation**

The Stroke Foundation is a national charity that partners with the community to prevent, treat and beat stroke.

We do this through raising awareness, facilitating research and supporting stroke survivors.

- **StrokeLine 1800 STROKE (1800 787 653)**
- **stokefoundation.org.au**
- **/strokefoundation**
- **@strokefdn**
- **@strokefdn**