

Medicine and TIA after stroke

What you need to know

- › After a transient ischaemic attack (TIA) or stroke, your risk of having another one is higher. Almost everyone will need to take medicine to reduce this risk.
- › If your doctor prescribes medicine, keep taking it until they tell you to stop. It can be dangerous to suddenly stop taking medicines or change the dose.
- › There are other things you can do to reduce your risk. Be active, eat well, maintain a healthy weight, avoid alcohol and don't smoke.

What is a stroke or TIA?

A stroke is when **blood cannot get to all parts of your brain**. If this happens, your brain can be injured. An ischaemic stroke is when an artery is blocked. A haemorrhagic stroke is when a blood vessel breaks or bursts.

A transient ischaemic attack (TIA) is when blood can't get to all parts of your brain for a **short time**. An artery is blocked, but the blockage clears, and the blood starts to flow again.

Blood pressure medicine

High blood pressure is also called hypertension. Medicines that lower your blood pressure are called **anti-hypertensives**.

Almost everyone who has had a TIA or stroke should take anti-hypertensives, even if their blood pressure is normal.

High blood pressure is the biggest risk factor for stroke. Normal blood pressure is around 120/80. If your blood pressure is regularly over 140/90, you have high blood pressure.

High blood pressure can damage the walls of blood vessels. It can lead to heart problems. It can cause clots or plaques to break off and block an artery in the brain. All these things can cause a stroke.

Cholesterol-lowering medicines

Statins are the most common type of medicine used to control cholesterol levels.

Statins are effective in reducing the risk of ischaemic stroke, no matter what your cholesterol level is. Higher-dose statins are the most effective. This means that high doses are usually prescribed, even for people with normal cholesterol levels.

Cholesterol can build up on the walls of arteries and narrow the arteries. A clot can then block the artery and cause a stroke.

Blood-thinning medicines

Blood-thinning medicines lower the risk of blood clots forming and causing a stroke.

If you have had a TIA or an ischaemic stroke you will almost always need to take blood thinners. Take your medicine regularly and don't miss a dose. Your stroke risk goes up very quickly if you miss doses.

Blood thinners can make you bleed more easily. Tell your doctor you are on blood thinners before medical treatments or surgery.

There are two types of blood thinners:

Antiplatelet medicine

Platelets are tiny blood cells. Antiplatelet medicines stop platelets from sticking together, forming a blood clot and causing a stroke.

Antiplatelet medicines are also called platelet aggregation inhibitors. They include aspirin, a combination of aspirin and dipyridamole, and clopidogrel.

Anticoagulant medicine

Anticoagulants also stop your blood forming clots.

Anticoagulants include direct-acting oral anticoagulants such as dabigatran, apixaban and rivaroxaban. Warfarin is also an anticoagulant. If you take warfarin, you may need regular blood tests to check the amount of warfarin in your blood. There will also be diet restrictions.

Atrial fibrillation (AF) is an irregular heartbeat. If you have AF or certain heart conditions such as a prosthetic heart valve, you should take anticoagulant medicine.

Managing your medicines

- › Take your medicines at the same time every day.
- › Being able to see your medicines will help you remember. Making them part of your routine helps too. So if you need to take them in the morning, keep them on the counter where you make breakfast.
- › Use a dosette box that shows the day of the week and the time of day. You can also ask your pharmacist to pack all your medicines into a blister or webster pack.
- › You can set alarms to remind you to take your medicines using a regular clock or a smartphone.
- › There are apps that remind you to take your medicines. They remind you to get a refill or new script. These apps make it easy to show the doctors a list of your medicines if you go into hospital.
- › When travelling, take enough medicine for your entire trip. Put a few days' supply in your hand luggage. Take a list of your medicines and the dose in case you need to see a doctor while you're away.

Side effects and interactions

If your doctor prescribes a medicine, keep taking it until they tell you to stop. It can be dangerous to suddenly stop taking medicines or change the dose. If you are worried or have questions, speak with your doctor or pharmacist.

Sometimes medicines don't work as they are supposed to. Your doctor may be able to make changes to reduce or eliminate any side effects or interactions. Tell your doctor or pharmacist about everything you are taking. This includes over-the-counter medicines, natural remedies and vitamins. Your doctor can organise a medicine management review if needed.

Get help

StrokeLine is a free, confidential and practical service. StrokeLine's nursing and allied health professionals can give you information, advice and support.

Open Monday to Friday, 9am to 5pm Australian Eastern Time. StrokeLine is closed on national public holidays.

Call **1800 787 653**

Email strokeline@strokefoundation.org.au

Medicines Line can tell you about:

- › How medicines work
- › Side effects and interactions
- › How to store and take medicines.

Call **1300 633 424** Visit nps.org.au

EnableMe can help with your stroke recovery and life after stroke. Visit enableme.org.au

About us

Stroke Foundation partners with the community to prevent, treat and beat stroke. We do this through raising awareness, facilitating research and supporting survivors of stroke.

Contact us

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