



Stroke Unit

Transient Ischaemic Attack (TIA)

You have been given this leaflet because you have been referred to the TIA clinic. This means that you may have had a suspected TIA or “mini stroke”.

This leaflet explains the causes of TIA, the medications used to prevent further TIAs, the tests you will have during the appointment and the process to expect. It will help you to understand the procedure and the care that you will receive.

If you have any further symptoms while awaiting your appointment, please call 999.

What is a TIA?

TIA stands for transient ischaemic attack. You may hear this referred to as a “mini stroke”. A TIA is like a full stroke, except the symptoms do not last as long (anything from a few minutes up to 24 hours). It is caused by a temporary disruption to the blood supply to an area of the brain. This is usually due to a blockage caused by either a narrowing of blood vessels, or a clot from somewhere else in the body. This blockage causes an area of the brain to be starved of oxygen. As a result, your brain cannot send the correct signals to your body, and you experience symptoms similar to that of a stroke. Unlike a stroke, this blockage is temporary, and once blood flow is restored, the symptoms resolve.

What are the key symptoms?

TIA always causes a loss of function which comes on suddenly. This can be, but is not limited to:

- Weakness on one side of the body, for example in an arm, leg and/or face
- Numbness on one side of the body
- Loss of co-ordination on one side of the body
- Loss of vision of one or both eyes
- Speech disturbance - this can either be slurred speech or speaking “gobbledygook” or struggling to say what you want to (expressive dysphasia)
- A sudden change in or loss of concentration.

What causes TIA?

There are several conditions which can increase your likelihood of having a TIA, including:

- Having problems which may cause blood clots, such as an irregular heart rhythm (atrial fibrillation)
- Having high blood pressure (hypertension)
- Having diabetes

- Having high cholesterol (hyperlipidaemia)
- Smoking
- Drinking excessive alcohol
- Taking illegal drugs such as cocaine.

What to expect at TIA clinic

Once you have been referred to the TIA clinic, the referral is seen by a stroke consultant who will decide when you need to be seen and which investigations you require. The stroke secretaries will be in contact with you then to arrange for you to come in for an appointment. At your appointment you will be seen in the Same Day Emergency Care (SDEC) department by a stroke clinician. This could be a stroke consultant, stroke nurse consultant, stroke advanced clinical practitioner or junior doctor. When attending your clinic appointment, it is important that you bring a list of current medications which you take regularly.

About your medication

Medications you may be prescribed to reduce the risk of further TIAs or strokes may include:

- **Anti-platelet medications**, such as aspirin or clopidogrel; these are to prevent clots forming by making the blood less “sticky”
- **Statins** to reduce the cholesterol levels in your blood (such as atorvastatin)
- **Blood pressure tablets** to help lower your blood pressure (such as amlodipine or ramipril)
- **Anticoagulants** to “thin” your blood and reduce the risk of blood clots forming.

Tests and investigations you may have

There are a few tests or investigations that you may require. This will either be to help with diagnosis or to determine the cause of a TIA. These include:

- **Blood test** - if you have not had bloods taken recently the SDEC staff will take blood. This will be to check your cholesterol, how your liver and kidneys are working and your blood count amongst other things
- **ECG** - if you have not had a recent ECG, the SDEC staff will perform one ready for you to be seen by the stroke clinician
- **Carotid doppler** - to assess the blood flow in the arteries in your neck
- **CT brain scan** - on some occasions the clinician may want you to have a CT scan to check for any changes in your brain, particularly if you take anticoagulant medication
- **MRI brain scan** - this takes more detailed pictures of your brain than a CT scan
- **24-hour or 48-hour tape** - this records your heart rhythm over one or two days. A small tape recorder is attached to your chest by stickers. This is to look for an irregular heart rhythm which may increase a person’s risk of TIA/stroke.

Driving

If you are referred to the TIA clinic, you must not drive until you have been seen. If you are then diagnosed with a TIA, the DVLA (Driver and Vehicle Licensing Agency) states that you **must not** drive for **one month** from the date of your symptoms. If you have more than one event within a month, then you **must not** drive for **three months**. You do not need to inform the DVLA as long as the symptoms have completely resolved.

If you hold a passenger carrying licence (for example, as a taxi driver) or a HGV or PSV licence, there may be additional restrictions. Please contact the DVLA directly for more information in this case.

Follow-up

If you have been diagnosed with a TIA, you will receive a follow-up appointment in six to eight weeks. Currently this is done over the telephone. It will enable us to check how you are getting on with medications and to give you any test results. Usually this will be with the same person who sees you in TIA clinic to ensure continuity of care.

Contact Numbers:

We hope that you have found this information useful. If you have any questions or are worried about anything, please speak to the following Dorset County Hospital Staff:

To contact the Stroke Consultant, Stroke Nurse Consultant or Stroke Advanced Clinical Practitioner please phone the secretaries on 01305 255185. They can then pass on any queries to the relevant clinician.

Useful Websites:

Stroke Association www.stroke.org.uk

About this leaflet:

| | |
|--------------|---|
| Author: | Joanne Smith, Stroke Advanced Clinical Practitioner |
| Written: | December 2022 |
| Approved: | December 2022 |
| Review Date: | December 2025 |
| Edition: | v1 |

If you have feedback regarding the accuracy of the information contained in this leaflet, or if you would like a list of references used to develop this leaflet, please email pals@dchft.nhs.uk



© 2022 Dorset County Hospital NHS Foundation Trust
Williams Avenue, Dorchester, Dorset DT1 2JY
www.dchft.nhs.uk