

Only a Minority of Stroke Victims Are Being Seen by Doctors Within the Recommended Timeframe



In a study, published online yesterday in the journal *Age and Ageing*, of over 270 patients newly diagnosed with minor strokes or transient ischaemic attack (TIA), only a minority sought medical help within the timeframe recommended by the Royal College of Physicians. This is despite the high profile FAST campaign, which was taking place at the time that the study was conducted.

Rapid assessment and treatment of patients with TIA or minor stroke reduces the risk of early recurrent stroke. The Royal College of Physicians' Guidelines suggests that TIA patients who are deemed high-risk should be seen within 24 hours of the onset of symptoms, while those at lower risk should be seen within a week.

A team of researchers led by Professor Andrew Wilson of the University of Leicester interviewed 278 patients from a TIA rapid response clinic who had been newly diagnosed with TIA or minor stroke between 1 December 2008 and 30 April 2010. Of those 278, 222 were diagnosed with TIA and 56 with stroke. The patients were interviewed about the onset of their symptoms, seeking help, their first consultation with a health care professional, attendance at the TIA clinic, and any additional contact with health care professionals before clinic attendance.

There were 133 TIA patients who were assessed as high-risk. Of these, only 11 (8%) attended the TIA clinic within 24 hours. Of the 89 low-risk TIA patients, 47 (53%) attended the clinic within the recommended 7 days.

Professor Wilson said: "Factors contributing to delay include incorrect interpretation of symptoms and failure to contact the emergency services, which demonstrates an on-going need for patient education. Despite the FAST campaign, which was taking place at the time of the study, only 60% of the patients we interviewed reported a FAST symptom, which is actually fewer than in some other studies."

The FAST campaign promoted awareness of Face or Arm weakness, Speech difficulty, Time to call 999.

The researchers also found that service factors contributed to a delay in referral to the TIA clinic. Most of the patients who first consulted an out-of-hours GP, and all who consulted an optometrist, experienced a further consultation before clinic attendance, usually with a GP.

Professor Wilson and his team, from the University of Leicester's Department of Health Sciences, recommend that services could be streamlined to encourage clinic referral, as well as continued education for patients themselves: "Patients are encourage to respond urgently to symptoms, but when they do so, a significant number are then referred back to their GP. Our findings suggest that referral pathways from emergency departments and acute medical units could be improved."

Key Messages:

- Only a minority of TIA/minor stroke patients are assessed by a specialist within the timeframe recommended by NICE
Patient delay and uncertainty remains a problem, despite the recent FAST campaign
Delays between initial consultation and specialist could be addressed by streamlining referral pathways

Source: Oxford University Press via [AlphaGalileo](#)

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