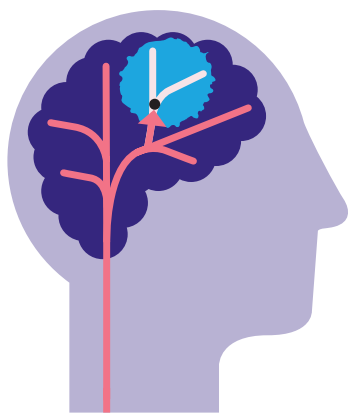


Transient ischaemic attack (TIA)



Transient ischaemic attack (TIA)

A transient ischaemic attack (TIA or mini-stroke) is the same as a stroke, but the symptoms last a short time. You get stroke symptoms because a clot is blocking the blood supply in your brain. When the clot moves away, the stroke symptoms stop. TIA symptoms may last between a few minutes to a few hours and fully resolve within 24 hours.



Ischaemic stroke due to a blocked blood vessel in the brain.



You might feel like you're fine afterwards, but it's vital to get medical help right away to help stop another TIA or stroke. Call **999** as soon as symptoms start. If it happened some time ago, get an urgent appointment with a GP.

Why is it urgent?

Having a TIA is a warning you're at risk of having a stroke. The risk is greatest in the first days and weeks after a TIA. But you urgently need to find out what caused the TIA and get advice and treatment to help you stay healthy.

Why did it happen?

Clots in the brain can happen in different ways, and doctors look for risk factors like high blood pressure, heart problems or smoking. They will talk to you about your health and give you the treatment and advice you need. See **page 10** for more information.

Will I have a stroke after a TIA?

It's difficult to tell for sure if someone is going to have a stroke after a TIA. But having a TIA is a major sign that you have a much higher than normal risk of having a stroke. That's why doctors work so hard to find out what caused it and help you improve your health. And by following treatments and making healthy lifestyle changes, you can actively reduce your risk of a stroke.



Your risk of a stroke goes down over time following a TIA. So by looking after your health, you can give yourself the best possible chance of staying well in the long-term.

Spot the signs of TIA and stroke

A TIA has the same main symptoms as a stroke. The FAST test helps spot the three most common symptoms:

F

Your face has dropped on one side.



A

You cannot raise both arms and keep them there.



S

You cannot speak clearly or understand what others say.



T

It's time to call **999** if you see **any one** of these signs.



Other common signs of TIA or stroke include:

- Sudden weakness on one side in your arms, hands or legs.
- Sudden blurred vision or loss of sight in one or both eyes.
- Sudden confusion.
- Dizziness or a sudden fall.
- Sudden, severe headache.

A TIA is a medical emergency, the same as a stroke.

If you spot **any one** of the signs of a TIA or stroke, call **999**. Do not wait to see if the symptoms pass.

If you did not get medical help at the time, get an urgent appointment with your GP or go to an NHS urgent treatment centre. You need to get your symptoms checked as soon as possible.



What happens next?

If you call 999 with stroke symptoms, you should be taken to hospital. If you go to your GP after TIA symptoms, they can refer you to hospital for an assessment. If a TIA is suspected, you will be given aspirin to reduce the risk of a stroke, unless there is a medical reason why you cannot take aspirin.

Seeing a specialist

A GP or paramedic will ask you about what happened. If they think you may have had a TIA, they will arrange for you to see a specialist doctor or nurse within 24 hours of your symptoms.

Your appointment with a specialist might be at a TIA clinic or in a hospital stroke unit. If a TIA is confirmed, doctors will try to find out how it happened. You will be given treatment and advice to reduce your risk of having a stroke in future.

How TIA is diagnosed

The most important information for confirming a TIA is your story about the symptoms and when they happened. You might find it helpful to have a family member with you to help with the story.

Symptoms can be caused by other problems, so the specialist doctor or nurse will listen carefully to you and confirm if you have had a TIA.

Tests and checks you might have

- You may have a brain scan, but not everyone needs a scan.
- You will have tests for health problems linked to stroke, such as high blood pressure, high cholesterol and diabetes.
- You might have heart monitoring to check for heart conditions.
- You might have an ultrasound scan to check for blocked blood vessels in your neck.

Why didn't I have a brain scan?

A TIA is a temporary clot in your brain, so it does not always cause damage that would show up on a scan. If doctors are not sure what caused your symptoms, you may have a magnetic resonance imaging scan (MRI). This can rule out other causes of the symptoms, such as bleeds or abnormalities in the brain. An MRI can sometimes show the site of the TIA, especially if it's done soon after it happens. But this is not the main way that a TIA is diagnosed.

Driving

After a TIA, you must not drive a car or motorbike for at least one calendar month. There are different rules for bus and lorry drivers. Ask your doctor for advice on whether you can start driving again. Driving assessment centres can also give individual advice.

See stroke.org.uk/driving for more information.

How does a TIA happen?

Clots that cause a TIA can happen for different reasons. One type of clot is caused by a build-up of fatty deposits in the blood vessels around your body, known as atherosclerosis.

Another type of clot is due to heart conditions such as atrial fibrillation (a type of irregular heartbeat). This can lead to a clot forming in the heart and travelling to the brain.

Damage to the arteries in the neck, known as arterial dissection, can also cause clots. Small vessel disease is a condition where the tiny blood vessels deep inside your brain get blocked. This can also lead to clots forming and causing a TIA or stroke.

Treatments to reduce the risk of another clot

Having a TIA means you had a temporary clot in your brain, giving you stroke symptoms. TIA treatments aim to reduce the chance of another clot entering your brain.

Blood-thinning medication

You may be offered a type of blood-thinning medication to reduce the risk of another clot. If your clot was due to clogged arteries due to fatty deposits (atherosclerosis), you may be given antiplatelet medication. These include aspirin and clopidogrel. This makes the sticky particles in your blood less likely to clump together and form clots.

If the clot came from the heart because of a condition like atrial fibrillation, you may be given an anticoagulant. Anticoagulants reduce the risk of clot formation.

Taking blood-thinning medication

It's important to keep taking the medicines in the way they are prescribed. It's likely to be a long-term treatment, so if you need some support, speak to your pharmacist or GP. See **stroke.org.uk/blood-thinning** for more information on types of medication.

Treating blocked arteries in the neck

If you have a narrowed artery in your neck (carotid artery), you might be offered surgery to clear the blockage.

Treating a damaged artery in the neck

If you have a damaged artery in the neck (arterial dissection), you will be given blood-thinning medication for some time. Arterial dissection is often due to an injury. It's more common in younger adults and children.

Risk factors for TIA

Age

Around a third of people with TIA and stroke are of working age. Getting older makes you more at risk of having a TIA or stroke, but it can happen to anyone, at any age.

Lifestyle

Stroke risk can be increased by things we do in everyday life, including:

- Smoking.
- Being overweight.
- Regularly drinking too much alcohol.
- Not being active.
- Eating unhealthy food.

See **page 14** for practical advice about healthy lifestyle changes.

Family history

You are more likely to have a TIA or stroke if a close family member has had one.

Ethnicity

People from some ethnic backgrounds, such as South Asian and black African and Caribbean people, also have a higher risk of stroke or some of the risk factors linked to stroke.

Health conditions linked to TIA

High blood pressure

High blood pressure is the biggest single risk factor for TIA and stroke, and it plays a part in around half of all strokes. It does not have any symptoms so you might not know you have it. By treating high blood pressure, you can significantly reduce your risk of a stroke. You might need medication. It can take a while to adjust to new blood pressure medication, so give it some time, and speak to your pharmacist or GP if you need any support.

You can also help improve your blood pressure through lifestyle changes such as exercise and healthy eating.

Atrial fibrillation (AF)

Atrial fibrillation (AF) is a heart condition that causes an irregular and sometimes abnormally fast heartbeat. It means that the heart does not always empty itself of blood at each beat. A clot can form in the heart and travel to the brain, causing a stroke.

AF can come and go, so you might need home-monitoring to diagnose it.

If you're diagnosed with AF, you may be given blood-thinning medication to reduce the chance of clots forming.



Diabetes

Diabetes causes high levels of sugar in your blood. Over time, this damages the blood vessels, which can lead to clots forming. Type 2 diabetes is the most common, and it's often linked to being overweight. You might need medication. But you can also help control your blood sugar through healthy eating, losing weight if you need to and being active.

High cholesterol

Cholesterol is a vital substance in our bodies. But if there is too much cholesterol in your blood, it can damage the blood vessels. Cholesterol and other substances can clog up the arteries with fatty deposits. If you have high cholesterol, you may be given statin medication to reduce your risk of a stroke.

Statin medications are shown to reduce the risk of a stroke, but some people may get side effects. If this happens to you, do not stop taking the medicine without speaking to your pharmacist or GP. They can support you with the medication or find another type that suits you.

You can also help lower your cholesterol levels by eating a healthy diet and being as active as possible.

How to **reduce your risk of a stroke** after a TIA

Follow treatments for your health conditions

If you have been diagnosed with a health condition following a TIA, such as high blood pressure or atrial fibrillation, you will be offered medication and advice. Taking your medication is a really important way to cut your risk of a stroke.



Managing new medications

After a TIA you might need to start taking one or more types of long-term medication. It can take a while to get used to some types of medication, and you might need to try different versions to find one that suits you.

If you have any problems like side effects or forgetting to take your medication, talk to your pharmacist. In England, ask your pharmacist about the New Medicines Service. This gives you three appointments with a pharmacist to help you get started with taking new medications.

Do not stop any medications before speaking to your GP or pharmacist. Stopping treatment can increase your risk of a stroke and you may have side effects.



Seek support for staying healthy

The changes in your life after a TIA might feel like a lot to deal with. For example, you might need to take several types of medication long-term. On top of that, you might be trying to make lifestyle changes such as giving up smoking or losing weight. These challenges may have an emotional impact.

Try to get support for anything you're struggling with. This could mean sharing your feelings with family or friends. They might be able to help by joining in with healthy lifestyle changes or giving practical support with taking medication.

You can also ask your GP about a medication review or for any support and advice after your TIA.

You can also visit our online forums at **stroke.org.uk** to connect with others affected by TIA and stroke.



Be as active as you can

Moving around more and being as active as you can every day will make a big difference to your health and wellbeing. You do not have to join a gym or fitness class. Just going for a short walk with a friend can help you start to be more active and increase your confidence.

Walking, dancing, housework, gardening and swimming all get your body moving. Start slowly and build up the amount you move bit by bit.

Being physically active can have all sorts of benefits, including lowering blood pressure, reducing cholesterol and controlling blood sugar. It can also make you feel good and help you with low moods and anxiety.

Is exercise safe?

On the whole, exercise and activity is safe and can help reduce your stroke risk and improve your wellbeing.

The only exception is if you have very high blood pressure or another health problem that could cause an injury or illness. Always check with your GP before starting to do more exercise if you're unsure or have not exercised in some time.

Visit **stroke.org.uk/getting-active** for more practical tips and ideas.

Eat a healthy diet

A healthy, balanced diet with plenty of fruit and vegetables can lower your risk of stroke by helping you manage health problems linked to stroke, like diabetes and high cholesterol. You do not have to change your diet all at once. Start by adding a piece of fruit or a vegetable each day, like a banana or tomatoes with lunch. Having fresh and home-made food can cut your salt intake and reduce your blood pressure. Cutting the amount of saturated fats, such as butter, in your diet and eating more unsaturated fats, such as vegetable oils, can help lower cholesterol levels.

Aim for a healthy bodyweight

TIA and stroke can happen to people of any body size and shape. But having more body fat raises your risk. Reducing your weight if you need to can make you less likely to have a stroke.

Losing weight can reduce high blood pressure and improve diabetes. It can also lower your cholesterol. You may even be able to reduce or stop taking certain medications. So if you lose weight, go back to your GP to discuss your health and medication.

Having a healthy diet and being active can help you stay a healthy weight. Many people find it's helpful to have some support such as joining a club or using a weight-loss app. Visit [nhs.uk/better-health](https://www.nhs.uk/better-health) for advice and a free app to support you.



Quit smoking

If you're a smoker, quitting smoking is likely to be the first piece of advice you get after a TIA.

Smoking greatly increases your risk of having a stroke. But as soon as you quit, your risk starts to drop right away. So stopping smoking could be one of the best things you can do for your own health.

You do not have to do it alone. Help is available, including nicotine replacement products on prescription and the NHS Quit Smoking app. Contact your GP surgery or pharmacist to find out about local stop smoking services.

Reduce drinking

Regularly drinking too much alcohol raises your risk of a stroke. Regularly drinking large amounts over time can lead to high blood pressure. Cutting back on alcohol could help you lower your blood pressure and avoid clots forming.

Men and women are advised not to regularly drink more than 14 units of alcohol a week and to spread units out over the week. If you feel you're drinking too much, visit **[drinkaware.co.uk](https://www.drinkaware.co.uk)** or ask your GP surgery about local support services.



TIA: frequently asked questions

What happens if a TIA goes untreated?

Having a TIA is a warning you are at risk of having a stroke. If you do not seek urgent medical help, you may go on to have another TIA or a stroke. So it's important to get treatment as soon as possible to reduce your risk.

I feel fine now. Should I attend my TIA appointment?

Even if you feel OK, a TIA is still a major warning sign of a stroke. Attending a TIA clinic and follow-up appointments can tell you what caused the TIA. You will get treatment and advice to help you reduce your risk of a stroke and stay fit and well.

What if I'm worried about what I might find out at the TIA appointment?

It can be very worrying to be told you had a TIA. But by attending medical appointments and following any treatment and advice, you have a chance to make a real difference to your future health.

'I felt less anxious once I understood what a TIA was and what actions I could take to reduce the risk of this happening again.'

Why am I taking medication? Is it doing anything?

After a TIA, you are likely to be given at least one type of long-term medication, and possibly two or more.

Most of the conditions linked to stroke such as having clogged arteries or high blood pressure have few or no symptoms. So when you start taking medication, it probably will not have a noticeable effect on how you feel physically. But taking these medications could significantly cut your chance of a stroke.

If you get side effects or have problems with any medications, do not stop taking them but speak to your pharmacist or GP who can help.

When can I return to work after a TIA?

With the right support and advice, many people do return to work after a TIA. How long it takes may depend on how your TIA has affected you and when you feel ready. You might also need some support from your employer. Visit **stroke.org.uk/work** for more information or call our Stroke Support Helpline.

‘[When] I spoke to my GP about the medication, I understood how important it was that I took it every day to reduce the chance of me having another TIA or a stroke.’

TIA of unknown cause

Sometimes, doctors cannot find out exactly what caused a TIA. You will be checked for the main risk factors for stroke such as high blood pressure, diabetes, blocked arteries and atrial fibrillation (irregular heartbeat).

Treating a TIA of unknown cause

Even if the cause of a TIA is not found, you will probably be given the same treatment used for any TIA, which is usually blood-thinning medication to avoid another clot. If you have high blood pressure, diabetes or high cholesterol, you will be offered treatment for those conditions too.

Stay healthy and reduce your risk

Like anyone with a TIA, you can help to improve your health by sticking to your medications, as well as having a healthy diet and being active.

If you need to make some lifestyle changes like quitting smoking or losing weight, ask your GP surgery or pharmacist about the help that's available in your local area.



Long-term effects of TIA

Fatigue

Although the physical signs of a TIA end quickly, it can have some long-term effects. Some people get fatigue (extreme tiredness which does not always get better with rest). This could affect you going back to work after a TIA or limit how much you can do around the house.

You might need to discuss things with your employer and family. Make them aware of how you are feeling and any support you might need. You can also visit **stroke.org.uk/fatigue** for more information and tips on managing fatigue.

Emotional impact

A TIA can have a big emotional impact on you. You may feel very shocked or worried about your health. Some people experience anxiety and low mood afterwards. Sharing your feelings with family and friends can help them understand what you're going through and help reduce anxiety. Visit **nhs.uk/mental-health** for more information and support with mental health.

Staying active or doing some exercise can help to improve your mood. Regular activity can also help with fatigue by helping you sleep better and improving energy levels.

Focus on your wellbeing

By following any treatment and making some healthy lifestyle changes, you'll be helping your general health and wellbeing. Doing things like quitting smoking, eating healthy food and moving more make you feel better in yourself. You'll also know that you're doing all you can to improve your health and reduce your risk of a stroke.

If you feel anxiety or low mood is affecting your daily life, contact your GP or call our Stroke Support Helpline for ideas on finding support. You can also visit **stroke.org.uk/emotional-changes** for more information.



What to do about other problems

If you still have physical or cognitive problems (difficulties with memory and thinking) after a TIA, raise this at a clinic appointment or with your GP, as you might need some further investigations.

Where to get **help** and **information**

From the Stroke Association

Stroke Support Helpline

Our Stroke Support Helpline offers information and support for anyone affected by TIA and stroke. This includes friends and family.

Call us on **0303 3033 100**, from a textphone
18001 0303 3033 100

Email **helpline@stroke.org.uk**

Read our information

Log onto **stroke.org.uk**, where you can find easy-to-understand information, videos and an online community to support you. You can also call the Helpline to ask for printed copies of our guides.

Other sources of help and information

AF Association

Website: heartrhythmalliance.org/afa/uk

Provides information and support for people with atrial fibrillation.

Blood Pressure UK

Website: bloodpressureuk.org

Tel: **020 7882 6218**

Help and information about reducing and managing high blood pressure.

British Heart Foundation

Website: bhf.org.uk

Heart Helpline: **0808 802 1234**

Helpline run by cardiac nurses, plus information and advice on all aspects of heart health.

Chest, Heart and Stroke Scotland

Website: chss.org.uk

Helpline: **0808 801 0899**

Information about stroke and TIA for people living in Scotland.

Diabetes UK

Website: diabetes.org.uk

Helpline: **0345 123 2399**

Information and support for living well with diabetes.

Driver and Vehicle Licensing Agency (DVLA) (England, Scotland, Wales)

Website: **gov.uk/dvla**

Information on driving after stroke and TIA in England, Scotland and Wales.

Driver and Vehicle Agency (DVA) (Northern Ireland)

Website: **nidirect.gov.uk**

Information on driving after TIA and stroke in Northern Ireland.

Driving Mobility

Website: **drivingmobility.org.uk**

Tel: **0800 559 3636**

Offers individual advice and driving assessments for motorists with medical conditions, disabilities or after an illness.

Heart UK

Website: **heartuk.org.uk**

Tel: **01628 777046**

Cholesterol charity, with a helpline run by specialist nurses and dietitians.

NHS Better Health

Website: **nhs.uk/better-health**

Information about healthy living including advice on diet, exercise and sleep.

About our information

We want to provide the best information for people affected by stroke. That's why we ask stroke survivors and their families, as well as medical experts, to help us put our publications together.



How did we do?

To tell us what you think of this guide, or to request a list of the sources we used to create it, email us at **feedback@stroke.org.uk**



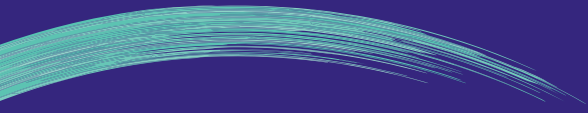
Accessible formats

Visit our website if you need this information in audio, large print or braille.



Always get individual advice

This guide contains general information about stroke. But if you have a problem, you should get individual advice from a professional such as a GP or pharmacist. Our Stroke Support Helpline can also help you find support. We work very hard to give you the latest facts, but some things change. We don't control the information provided by other organisations or websites.



The Stroke Association is the only charity in the UK providing lifelong support for all stroke survivors and their families.



Contact us

We're here for you. Contact us for expert information and support by phone, email and online.

Stroke Support Helpline: **0303 3033 100**

From a textphone: **18001 0303 3033 100**

Email: **helpline@stroke.org.uk**

Website: **stroke.org.uk**



Finding **strength** through **support**

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