Editorial

Even Minor Strokes may Take Years Off Life: Study

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Despite life-saving advances in treating strokes, these "brain attacks" can seriously impair the quality of the years a person has left, a new study shows.

The damage is most pronounced after a severe stroke, but even those people who have a so-called mini-stroke or transient ischemic attack (TIA) are at risk. The new findings appear online in the Oct issue of the journal Neurology. Experts stress that preventing strokes by taking control of known risk factors such as high blood pressure remains the best way to improve the outlook for patients. Strokes occur when blood flow to part of the brain is blocked. The National Stroke Association estimates that as many as 80 percent of strokes are preventable. In the new study, nearly 750 people who had a stroke and about 450 who experienced a TIA were followed for five years. They completed questionnaires about their post-stroke quality of life. Of the full-blown strokes, close to 60 percent were considered minor, 23 percent were moderate and 18 percent were severe. When compared to members of the general population, a person who has a stroke will, on average, lose 1.71 out of five years of perfect health due to an earlier death. In addition, the stroke will cost them another 1.08 years due to reduced quality of life, the study found. In total, people who have had strokes lose an average of 2.79 "quality-adjusted life years." This is a measure that quantifies survival and quality of life in the same scale. And the more severe the stroke, the greater the loss in terms of quality-adjusted life years. Older people, women and those who had a second stroke also were at higher risk for worsening quality of life and earlier death after the stroke.

Exactly how strokes affect quality of life varies. They can hamper a person's ability to walk, talk or perform daily activities such as bathing, eating and getting dressed.

"The degree to which a stroke will impact an individual's quality of life will be driven by the severity of the event," said study co-author Ramon Luengo-Fernandez, a senior researcher and associate research fellow at the University of Oxford, in England. "Whereas in many cases a minor stroke may have little impact on a patient's life, a severe

stroke will almost invariably pose a considerable negative impact."

This study is believed to be the first to assign such a value to mini-strokes. Like a stroke, a TIA is marked by an inability to move, numbness on one side of the body or difficulty speaking. Unlike in many strokes, however, these symptoms often are fleeting and leave little or no signs of permanent damage to the brain. Still, the study showed that they do affect quality of life going forward. "TIA, on its own, would be expected to have little impact on quality of life; however, the combined impact of medication, anxiety about suffering subsequent events and, for those in employment, the impact on their working life will impact quality of life," Luengo-Fernandez said. "We found that suffering subsequent strokes following TIA significantly and considerably reduced quality of life."

Avoiding stroke is the key. "By preventing a stroke in the first place, we will also improve quality of life," Luengo-Fernandez said. "Cost-effective treatments such as cholesterol-lowering drugs and treatments for reducing high blood pressure already exist that significantly reduce the risk not only of stroke, but also cardiovascular events." "In addition, reducing risk factors for stroke, [such as] obesity, smoking and physical inactivity, will also reduce the risk of suffering a stroke," he said. A U.S. expert agreed that preventing strokes is the way forward.

"We need to do a better job of addressing high blood pressure before stroke; controlling cholesterol and diabetes; and encouraging smoking cessation, daily exercise and a healthy diet," said Dr. Zeshaun Khawaja, a neurologist at the Cleveland Clinic Foundation.

These measures are all known to lower risk of stroke and heart disease. The study showed what it's like to survive a stroke from the vantage point of the person who suffered it, another expert said. Dr. Richard Libman, vice chairman of neurology at Long Island Jewish Medical Center in New Hyde Park, N.Y., added: "The quality of life of the person is what counts. Even though we are doing well with treating strokes, a lot of patients will say their quality of life is compromised, and this is an incentive for us to do better."