

Service Priorities and Programmes Electronic Presentations

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One-Year Outcomes of Cardiovascular Events After Transient Ischaemic Attack Yu CTM(1), Chan CK(2), Tam YM(2), Sham SYA(1), Ng PW(2) (1)Nursing Services Division, United Christian Hospital, Kowloon, Hong Kong

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Introduction

Patients with transient ischemic attacks (TIAs) are at risk of developing ischemic stroke or an acute coronary syndrome after a TIA. Therefore early management and continuous monitoring are of paramount importance. TIA early assessment clinic provides an early assessment within 5 days after a TIA. The clinic is a continuous access to monitor and modify the modifiable risk factors to minimize the risk of stroke or coronary events

Objectives

To evaluate the one-year outcomes of cardiovascular events and the cardiovascular risk factors control of TIA patients.

Methodology

A prospective study was conducted in a nurse-led TIA Clinic to evaluate the one-year outcomes of TIA patients in the United Christian Hospital from January 2013 to December 2017. The targeted TIA patients were recruited by Stroke Nurse and assessed by Neurologist in the TIA Clinic on the first month following TIA. Stroke nurse followed up the recruited patients on the first, third month and one year regularly. The cardiovascular risk factors were monitored continuously. The efficacy endpoints were measured by the cardiovascular outcomes, changes in biomedical parameters, lifestyle modification and mortality rate at first year.

Result

Results: A total of 337 patients were recruited and managed in the nurse-led TIA clinic. 37 patients were excluded due to loss to follow-up. 300 patients completed three times assessment and biomedical investigations. At first year, there were 24 (8%) patients for cerebrovascular events and 6 (2%) patients for acute coronary syndrome. The one year death rate which related to cardiovascular event was 2%. For biomedical parameters, there were significant reduction in mean total cholesterol (p=0.001), mean low-density lipoprotein (p<0.001), mean systolic blood pressure (p=0.011) and mean diastolic blood pressure (p=0.002). 10 (21%) smokers out of 47

active smokers ceased smoking. The risk of recurrent stroke at 90 days and 1 year was less than half that expected from historical cohorts. Conclusion: The lower cardiovascular event rates -may be explained by prompt risk factors screening, immediate initiation of antiplatelet or oral anticoagulation in the event of atrial fibrillation by Neurologist. An early carotid artery screening and lifestyle modification by stroke nurse are the other secondary stroke preventive measures. The results indicated that the TIA early assessment clinic is an effective way to reduce the cardiovascular events following TIA.