Transient ischaemic attack (TIA)
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Summary

A transient ischaemic attack (TIA) is a minor stroke and provides a powerful warning that a stroke may follow in the next few hours, days, weeks or months. A TIA has identical symptoms to stroke, although these last for less than 24 hours and are followed by a full recovery. A TIA is a medical emergency. Treatment aims to prevent the person from experiencing a stroke and may include drugs and lifestyle changes.

A transient ischaemic attack (TIA) is caused by a temporary cut in blood supply to the brain, due to the partial blockage of an artery by a blood clot or debris. A TIA has the same symptoms as a stroke, but they are temporary as the clot naturally dissolves or is dislodged from the blockage. While it is sometimes called a mini stroke, a TIA does not usually cause long-term brain damage.

A person who has had a TIA is at greater risk of having a stroke or heart attack. Early identification of symptoms and a diagnosis from your doctor greatly reduces the chances of a major stroke.

TIA is an early warning for stroke

A stroke interrupts blood flow to an area of the brain. A blood clot could block a blood vessel or (more rarely) a blood vessel might break. Brain cells in the immediate area are starved of oxygen and die. Without prompt medical treatment, the surrounding brain cells may also die.

A TIA has identical symptoms to a stroke, but these last for less than 24 hours and are followed by a full recovery. A TIA is a powerful warning that an area of the brain is being deprived of blood and that a stroke may follow in the next few hours, days, weeks or months. Urgent medical attention is needed.

Symptoms of TIA

The specific symptoms of a TIA depend on which areas of the brain are being deprived of blood. They can include:

- visual problems, such as blurring or reduced vision in one or both eyes
- numbness, weakness or paralysis of the face
- numbness, weakness or paralysis in an arm or leg, on either or both sides of the body
- difficulty speaking or understanding
- dizziness
- loss of balance
- swallowing difficulties
- severe headache or an unusual change in headache pattern
- nausea
- vomiting.

The FAST test is an easy way to recognise and remember the common signs of stroke or a TIA. The FAST test involves asking three simple questions. If the person has a problem with any of these functions, dial triple zero (000) to call an ambulance immediately. The questions to ask are:

- **Face** – Check their face. Has their mouth drooped?
- **Arm** – Can they lift both arms?
- **Speech** – Is their speech slurred? Do they understand you?
- **Time** – is critical. If you see any of these signs, call 000 straight away.

If you or someone you’re with suddenly experiences any of these symptoms, get to a hospital immediately. Remember, stroke is a life-threatening emergency.

Causes of TIA

The carotid arteries in the neck supply blood to the head. These arteries branch into smaller blood vessels in order to service the brain. If one of these blood vessels is temporarily blocked – by a blood clot or piece of fatty debris – then the symptoms of TIA will occur. If the blockage remains, the person will experience a full stroke. Sometimes, the cause of a TIA is a haemorrhage, when a small blood vessel inside the brain bursts.

Risk factors for TIA and stroke

Some of the risk factors for TIA and stroke are outside the person’s control, such as advancing age, gender (men are more likely than women to experience stroke) and family history. However, most risk factors can be attributed to lifestyle factors and can be changed.

Lifestyle-related risk factors include:

- high blood pressure
- cigarette smoking
• unmanaged diabetes
• high cholesterol levels
• lack of regular exercise
• overconsumption of alcohol, such as frequent binge drinking
• obesity
• high-fat diet, particularly saturated fats
• high-salt diet, which can cause high blood pressure.

Groups at high risk of stroke

A full stroke within three months (or more commonly within the first week) of a TIA is more likely under certain circumstances, including:

• if the TIA lasts for longer than 10 minutes
• if TIA symptoms include weakness and speech problems
• if the person is older than 60 years
• if the person has high blood pressure
• if the person has diabetes.

Diagnosis of TIA

A TIA is a medical emergency and you should always seek immediate help. It is important that your medical team distinguishes between a TIA and stroke, so they can decide on the right treatment for you. Medical history of specific symptoms and neurological examination provide the most important information required to diagnose a TIA.

The cause of a TIA is determined using a number of tests including:

• physical examination, including blood pressure measurement
• blood tests
• electrocardiogram (ECG) tests to check for abnormal heart rhythms
• chest x-ray
• computed tomography (CT) scan of the head
• ultrasound scan of the carotid arteries
• heart ultrasound (echocardiogram) to check for heart disease.

Treatment for TIA

Treatment aims to prevent the person from experiencing a stroke. Some of the options may include:

• drugs, such as aspirin, to reduce the risk of blood clots forming in the blood
• the blood-thinning drug warfarin, if the blood clot was caused by heart problems such as atrial fibrillation (abnormal heart rhythms)
• antihypertensive medication, if your blood pressure is too high
• drugs to lower cholesterol, if your blood cholesterol is too high
• surgery to remove the blockage inside an affected carotid artery (carotid endarterectomy). Sometimes, surgery is needed on both arteries.

Lifestyle changes after TIA

A person who has experienced a TIA needs to make lifestyle changes to reduce their risk of stroke, including:

• Stop smoking, since cigarette smoke narrows arteries and makes the blood ‘sticky’ and more likely to clot.
• Switch to a low-fat, low-salt, high-fibre diet.
• Strictly limit your dietary intake of saturated fats to help reduce your blood cholesterol.
• Maintain a healthy weight for your height.
• Exercise regularly.
• Limit alcohol to no more than one or two standard drinks per day.
• Properly control diabetes.

Where to get help

• Always dial triple zero (000) to call an ambulance if you think someone is having a stroke or TIA
• Your doctor
• Emergency department of your nearest hospital
• Neurologist
• National Stroke Foundation StrokeLine Tel. 1800 787 653

Things to remember

• A transient ischaemic attack (TIA) is a minor stroke and provides a powerful warning that a stroke may follow in the next few hours, days, weeks or months.
• A TIA has identical symptoms to stroke, although these last for less than 24 hours and are followed by a full recovery.
• A TIA is a medical emergency.
• Treatment aims to prevent the person from experiencing a stroke and may include drugs and lifestyle changes.

References

• Reducing the risk of stroke [online], Heart Foundation. More information here.

betterhealth.vic.gov.au
What is transient ischaemic attack? [brochure], National Stroke Foundation. More information here.

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Please note that we cannot answer personal medical queries.
If you are looking for health or medical advice we recommend that you:

- talk to your doctor or pharmacist
- dial triple zero (000) in an emergency
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**More information**

**Stroke**

The following content is displayed as Tabs. Once you have activated a link navigate to the end of the list to view its associated content. The activated link is defined as Active Tab

- Stroke explained
- Risk factors
- Life after stroke

**Stroke explained**

- Heart disease and stroke
  Although blocked blood vessels can cause both coronary heart disease and some types of stroke, stroke is not the same as heart disease.
- Stroke explained
  A stroke interrupts blood flow to an area of the brain and is a medical emergency.
- Transient ischaemic attack (TIA)
  A transient ischaemic attack (sometimes called a mini-stroke) is a warning that a stroke may follow, and requires urgent medical attention.
- Women and stroke
  Stroke is the second biggest killer of Australian women and kills more women than breast cancer.

**Risk factors**

- Blood pressure (high) - hypertension
  Hypertension, or high blood pressure, can increase your risk of heart attack, kidney failure and stroke.
- Health check
  This health assessment questionnaire will identify which zones of your lifestyle are contributing to your personal health risk and provide actions you can take to make positive change.
- Heart disease and stroke
  Although blocked blood vessels can cause both coronary heart disease and some types of stroke, stroke is not the same as heart disease.
- Heart disease and stroke - your risk score
  Absolute risk is a measure your doctor can calculate to understand the likelihood of you experiencing a heart attack or stroke in the next five years.
- Smoking kills
  Tobacco causes more illness and death than any other drug.
- Stroke risk factors and prevention
  Everyone can reduce their risk of having a stroke by making a few simple lifestyle changes.
- Women and stroke
  Stroke is the second biggest killer of Australian women and kills more women than breast cancer.

**Life after stroke**

- Effects of stroke
  The long-term effects of stroke depend on which part of the brain was damaged and by how much.
- Rehabilitation after stroke
  Early treatment and rehabilitation after stroke helps many people to regain a lot of function.
- Stroke: in mid-life - early days (video)
  People who have had a stroke talk about the events and emotions surrounding their stroke.

**Related Information**

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Stroke can occur in children

Stroke is rare among children and babies, but it can occur...

Stroke risk factors and prevention

Everyone can reduce their risk of having a stroke by making a few simple lifestyle changes...

Stroke explained

A stroke interrupts blood flow to an area of the brain and is a medical emergency...

Women and stroke

Stroke is the second biggest killer of Australian women and kills more women than breast cancer...

Heart disease and stroke

Although blocked blood vessels can cause both coronary heart disease and some types of stroke, stroke is not the same as heart disease...

Related information on other websites

- National Stroke Foundation - types of stroke

Content Partner

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