



Canadian Stroke Network

Réseau canadien contre
les accidents cérébrovasculaires



HEART &
STROKE
FOUNDATION
OF CANADA

FONDATION
DES MALADIES
DU CŒUR
DU CANADA

*Finding answers. For life.
À la conquête de solutions.*

News release: Dec. 2, 2008

Stroke guidelines to fill gaps in health care

Action required to save lives and prevent disability

OTTAWA—Ambulances should be sent to the closest hospital that can treat stroke, not the closest one on the map. Patients who have mini-strokes should not be sent home from hospital without a plan for appropriate follow-up care. And, stroke patients need to be checked for memory and thinking problems and not just physical disabilities.

These are among 27 recommendations in a major new document called *Canadian Best Practice Recommendations for Stroke Care 2008*, released today in the *Canadian Medical Association Journal*. Developed by a panel of experts from across the country, the document aims to address gaps in the health-care system and to improve treatment for stroke patients.

“As it stands, many stroke patients in Canada are not getting the care they require,” says Dr. Antoine Hakim, CEO and Scientific Director of the Canadian Stroke Network. “By putting in place these recommendations, lives can be saved and disability can be prevented for thousands of people every year.”

Stroke is a leading cause of death and the major cause of adult disability. Every year, there are about 50,000 strokes in Canada, and another 8,000 Canadians go to hospital with a mini-stroke, or transient ischemic attack (TIA).

New recommendations call for health authorities in every province to hammer out agreements that allow ambulances to take stroke patients to the closest stroke centre, sometimes bypassing smaller hospitals on the way. This will ensure that stroke patients get immediate access to special brain scans and clot-busting drugs -- services that are often not available in smaller centres.

As well, expert recommendations urge immediate follow-up care for patients who have TIAs because they are at high risk of a major stroke. As it stands, many patients are sent home from emergency departments without a plan for urgent follow-up assessment and treatment by stroke specialists, even though between 10 and 20 per cent of TIA patients will have another stroke within the next three months.

And, finally, new evidence that links stroke to memory and thinking problems requires health-care providers to assess all stroke patients for dementia and to ensure that they get appropriate medical care.

“These newly expanded recommendations highlight the need for healthcare professionals to work together as coordinated stroke teams,” says Sally Brown, CEO of the Heart and Stroke Foundation of Canada. “They also point out the importance of active participation by patients and family in stroke care and recovery.”

The first set of *Canadian Best Practice Recommendations for Stroke Care* were released in 2006 and distributed to more than 400 health-care centres and 4,000 health-care professionals working in the field of stroke. The 2008 update reflects new research evidence to improve care.

The full list of 2008 recommendations is posted at www.cmaj.ca/content/vol179/issue12/#supplement

The Canadian Stroke Strategy (CSS) is a joint initiative of the Canadian Stroke Network and the Heart and Stroke Foundation of Canada. The goal of the Canadian Stroke Strategy is to help support an integrated approach to stroke prevention, treatment, rehabilitation and reintegration in every province and territory. Learn more at www.canadianstrokestrategy.ca

The **Canadian Stroke Network** (www.canadianstrokenetwork.ca) includes more than 100 of Canada’s leading scientists and clinicians from 24 universities who work collaboratively on various aspects of stroke. The Network, which is headquartered at the University of Ottawa, includes partners from industry, the non-profit sector, provincial and federal governments. The Canadian Stroke Network, one of Canada’s Networks of Centres of Excellence, is committed to reducing the physical, social and economic impact of stroke on the lives of individual Canadians and on society as a whole.

The **Heart and Stroke Foundation** (www.heartandstroke.ca) is a leading funder of heart and stroke research in Canada. Our mission is to improve the health of Canadians by preventing and reducing disability and death from heart disease and stroke through research, health promotion and advocacy.

For information, contact:

Cathy Campbell
Canadian Stroke Network, 613-562-5696 613-558-6691 (cell)
cathy@canadianstrokenetwork.ca

Eileen Melnick-McCarthy
Heart and Stroke Foundation of Canada, 613-569-4361, ext 318
emelnick@hsf.ca