

Stroke
Association

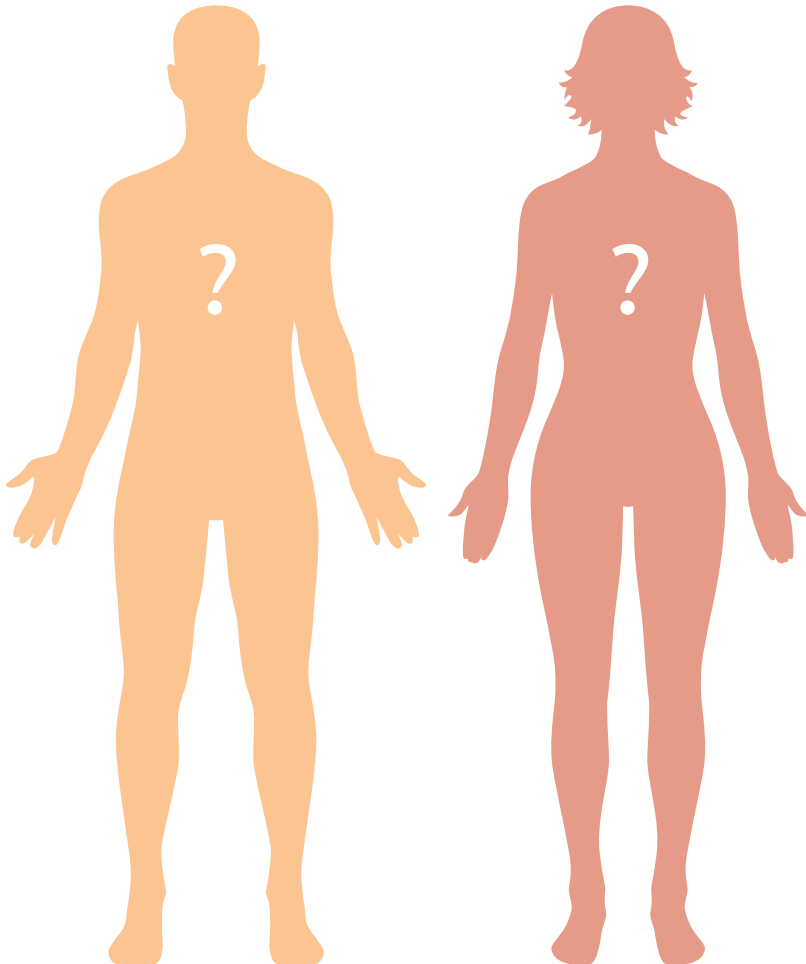
How to reduce your risk of a **stroke**

Active steps everyone can take



Stroke and you

How much do you know about your risk of a stroke?



I'm too young to think about stroke

A quarter of all strokes happen to people aged 18-65 who may feel fit and healthy. To learn more about your risk of stroke, see **page 5**.

I'm older or have some health problems

It is never too late to take steps to reduce your risk of a stroke, like being more active, eating healthily, and treating your health problems. To find out more, see **page 9**.

I have high blood pressure

High blood pressure is a factor in up to half of all strokes. For more information, see **page 22**.

I'm a smoker

Stopping smoking is one of the best things you can do for your health. For help with quitting, see **page 10**.

I could do with losing weight

Being overweight or obese means you are more likely to have a stroke. For more information and healthy living ideas, see **page 11**.

I've had a stroke or a transient ischaemic attack (TIA or mini-stroke)

If you've already had a stroke or TIA, you are at higher risk of having another stroke. This guide includes handy tips that can help you reduce your risk, and how to get more help and support so you don't feel alone.



Anyone can have a stroke, at any age.
To find out more about your individual
stroke risk, visit your GP or pharmacist.

Your risk of a stroke

Everyone has a different risk of having a stroke, which depends on the unique factors that belong to them.

Risk factors can be anything about you and your lifestyle, like your age, a health problem, or whether you drink or smoke.

If you have had a stroke or TIA, you are at higher risk of having a stroke in the future. You will have advice from professionals about treating any medical conditions that could have led to your first stroke or TIA, such as high blood pressure.



Turn to **page 9** for healthy lifestyle choices everyone can try!

The main risk factors for stroke

Age

As you get older, your arteries naturally become harder, making them more likely to become blocked. You can take active steps to reduce your stroke risk at any age, so have a look at our healthy living tips on **page 9**.

Health problems

Some health problems raise your risk of a stroke. These include:

- High blood pressure.
- Atrial fibrillation (irregular heartbeat).
- Diabetes and pre-diabetes.
- High cholesterol.

Lifestyle

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

- Smoking.
- Being overweight.
- Drinking too much alcohol.
- Being inactive.
- Eating food high in salt, fat and sugar.

Family history

Strokes can run in families, so speak to your GP or nurse if you have a family history of stroke. You may need some tests and health checks, and advice on reducing your risk.

Ethnicity

Strokes happen more often in people who are black or from South Asian families. If you're black or South Asian, you may need to get checked at an earlier age for diabetes, especially if you have any risk factors like being overweight. Contact your GP surgery to ask for a health check.



Actively reduce your risk

You can help to reduce your risk of a stroke by making some healthy lifestyle choices. Whether it's your diet, activity levels, smoking or drinking, it's never too late to make a change.



Get individual advice

Remember, this guide can only give general information. You should always get individual advice about your own health and any treatment you may need from a medical professional such as a GP or pharmacist.



Cut down on alcohol

Regularly drinking too much alcohol raises your risk of a stroke. In the UK, the government advises that to keep health risks low, it's best to drink no more than 14 units a week, and to spread the units over the week. The limit is the same for men and women.

For tips on knowing your limits, or if you are worried about your drinking, visit [drinkaware.co.uk](https://www.drinkaware.co.uk).



Stop smoking

Smoking greatly increases your risk of a stroke. But the minute you quit, your risk starts to drop right away. Stopping smoking could be one of the best things you ever do for your health, and there is lots of help available.

To find your local stop-smoking services around the UK, look online [nhs.uk/smoking](https://www.nhs.uk/smoking). You can also call these free helplines: England: **0300 123 1044**, Scotland **0800 84 84 84**, Wales **0800 085 2219**.

Visit [stroke.org.uk/smoking](https://www.stroke.org.uk/smoking) for tips on quitting.

E-cigarettes (vaping)

E-cigarettes can be helpful as part of a stop-smoking plan. Unlike nicotine replacement therapy, e-cigarettes aren't available on prescription. They are not harmless, and it's possible to remain addicted to vaping after quitting smoking. Get individual advice from a stop-smoking service on how to use e-cigarettes to help you quit.

Waterpipes

Different types of waterpipe include shisha, narghile, hookah and hubbah-bubba. Despite being seen as a 'safe' way to use tobacco, a waterpipe can actually deliver far more nicotine, smoke and toxic chemicals during a session than smoking a cigarette.



Reduce your waist size

Being overweight makes you more likely to have a stroke, and your risk goes up with your weight. Extra weight affects your body in many ways, such as raising the risk of high blood pressure and type 2 diabetes, which are both linked to stroke.

If your waist is larger than 94cm (37 inches) in men, or 80cm (31.5 inches) in women you could be overweight.

BMI, or body mass index, shows whether you are the right weight for your height. A healthy BMI is between 18.5 and 25. People from African/Caribbean and South Asian ethnic groups should aim for a lower BMI of 23 due to the higher rates of diabetes in those groups.

If you are advised to lose some weight or you want to make some healthy lifestyle changes, you don't have to do it alone. There are some great resources online such as NHS One You, and apps for losing weight. Your local pharmacist may be able to help. Your family and friends could give support by encouraging you, or joining in with your healthy eating and exercise plans.



Look for the online BMI calculator and the NHS Weight Loss Plan on [nhs.uk/loseweight](https://www.nhs.uk/loseweight).



Tip: when you're shopping, look out for the 'traffic light' signs on the back of many food packets. A red circle tells you when food is high in fat, sugar or salt. Amber and green mean it's a healthier choice.



Eat healthily

Practical support for healthy eating

Shopping and cooking can sometimes be difficult if you have a disability or you're living on a low income. For tips on finding support, visit stroke.org.uk/support or call our Helpline on **0303 3033 100**.

1. Reduce salt

Eating too much salt can raise your blood pressure, which is a major risk factor for stroke.

The most salt we should have in a day is about a teaspoon (6g).

A lot of the salt we eat is hidden in everyday foods, including bread, cereal and processed meats like ham. Ready meals and takeaways are often high in salt too.

In your cooking, try adding spices to boost flavour instead of salt. At the table, taste your food before adding salt – you might not need it!

Some people like using low-sodium salt products to help them cut down. These products are not suitable for some people at risk of stroke, including those over 65, and those using medication that affects potassium levels. Check with your GP or pharmacist before using low-sodium salt.

2. Reduce your sugar

Having too much sugar can make you gain weight, which increases your risk of stroke and type 2 diabetes.

You should aim to eat no more than seven sugar cubes-worth (30g) of sugar per day. It's not very much when you know that a can of fizzy drink can have more than nine cubes of sugar.

Just like salt, a lot of sugar is hidden in common foods. And it's not only sweet food – savoury foods like baked beans and tomato ketchup can be very high in sugar.

Hidden sugars in one serving of some everyday foods

 One sugar cube = 4g sugar



**Baked
beans**



Cola drink



**Pasta
sauce**



**No-added-
sugar
muesli**



3. Eat less fat

Cutting down on fat can help with losing weight, which reduces your risk of a stroke.

You can help to reduce your cholesterol by eating less saturated fat and replacing it with a small amount of unsaturated fat. But if you have high cholesterol you may need medication, so visit your GP.

Saturated fat is often a solid fat, such as butter. You'll find it in foods like cheese, cakes, fatty meat and sausages, as well as coconut oil and palm oil.

Unsaturated fat is often an oil, such as olive oil or groundnut oil. It's also in oily fish like salmon and sardines, and other foods like peanut butter, avocados, nuts and seeds.

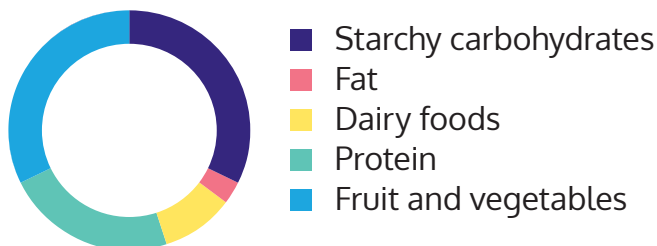
For cooking, try replacing saturated (hard) fats like butter and coconut oil with small amounts of olive oil or groundnut oil.

4. Boost your fibre

Going for foods with lots of fibre can help with weight loss, diabetes and heart health, which can reduce your stroke risk. Eating plenty of vegetables and fruit is a great way to get more fibre. Choose whole grains in foods like bread, pasta and rice. Eat the peel on things like potatoes and apples. Oats, nuts and seeds can also boost your daily fibre intake.

5. Balance your diet

Across the day, try to eat something from each of the food groups below. Home-made food is often the best option because you know it's made with fresh ingredients, and it has much less fat, salt or sugar than ready-made food.



Fruit and vegetables: aim for five a day. Remember that tinned and frozen fruit and veg count. Go for a colourful variety of vegetables on your plate. These can make up about a third of your food each day.

Starchy carbohydrates like potatoes, rice, bread and pasta can make up about a third of what you eat.

Protein comes from lean meat, fish and eggs. Non-animal protein could be dried beans, lentils and nuts.

Dairy foods like milk, cheese and yoghurt provide calcium, to help keep bones strong. Try choosing lower-fat varieties.

Fat contains the most calories per gram so you need very little. Try to use unsaturated fats like olive oil instead of solid fats like butter and coconut oil.





Swallowing difficulties after a stroke

If you have trouble swallowing after a stroke, you should have support from a dietitian or speech and language therapist to help you eat safely. A dietitian can advise on making safe and tasty food, and taking part in family meals. For more information see our leaflet 'Dealing with swallowing problems'.



Be as active as you can

Being physically active can help to reduce your risk of a stroke. Moving around more can also help your emotional wellbeing by releasing chemicals into your brain that make you feel better.

If you are able to be more active, it can make a difference to your health and wellbeing. For some people, this could mean walking around the room, and for others it means joining a fitness class or doing some gardening.

Get online for ways to be active

Visit stroke.org.uk/getting-active for information on getting active after a stroke, plus a free, 12-week video exercise programme that allows you to join in at the level that's right for you.

Illegal drug use

People may use illegal drugs without knowing about the risk of stroke. Drugs such as cocaine can raise the risk of a stroke in the days after using them. Others, like cannabis, heroin and khat, are also linked with an increased risk and higher death rate from stroke.

More help and information

The drugs advice organisation FRANK provides information and confidential advice about drugs to users, their friends and family. Visit [talktofrank.com](https://www.talktofrank.com) or call **03001 236 600**. Our Stroke Helpline can also advise you on ways to get help.



Having an active, healthy lifestyle and treating your medical problems can also help reduce your risk of heart disease, dementia and cancer.



Treat your health conditions

If you have a health condition linked to stroke, sticking to your treatment can help you reduce your risk. If you have had a stroke or TIA, one of the best ways to reduce your risk of another stroke is to follow the treatment for your health conditions advised by doctors.

How to get your health checked

All the health conditions listed here can happen to you at any age. So even if you feel in good health, get a regular health check.

Contact your GP to ask for a health check. A local pharmacist can also give advice and do some health checks.

In England, people aged 40-74 can have the NHS Health Check, which looks for signs of health problems including stroke risk.

High blood pressure

High blood pressure plays a part in half of all strokes so it's the biggest single risk factor for stroke.

What is it? Your heart pumps blood through your blood vessels. When the blood presses too hard against the walls of the blood vessels, this is known as high blood pressure. It's also called hypertension.

Why is it a risk? High blood pressure can lead to clots forming, or cause bleeding in the brain. High blood pressure can also increase the risk of heart attacks, dementia and kidney failure.

How do I know I have it? It usually has no symptoms, so get your blood pressure checked regularly. You can get this done at your GP surgery or pharmacy. Blood pressure monitors are also available to buy.

What can I do about it? If you are diagnosed with high blood pressure, making some healthy lifestyle changes can help, and you may need some medication. If you are advised to take tablets it is very important to take them regularly.

Learn how to read blood pressure test results, and how high blood pressure is treated in our guide 'High blood pressure and stroke'. Read online or order a print copy from stroke.org.uk/high-blood-pressure.



Atrial fibrillation (AF)

If you have untreated atrial fibrillation (AF), your risk of a stroke is up to five times higher, and a stroke can be more severe if you have AF.

What is it? In AF your heartbeat is irregular and may be abnormally fast.

Why is it a risk? The heart might not empty itself of blood at each beat, and a clot can form in the blood left behind. The clot can travel to the brain and cause a stroke.

How do I know I have it? You might feel your heart racing, but most people don't get any symptoms. A GP or nurse can check you and send you for further tests.

What can I do about it? If you have AF and your GP or nurse finds that your stroke risk score is high, you will be given an anticoagulant (blood-thinning medication) to reduce your risk of a stroke. It's important to keep taking the anticoagulants to keep your stroke risk lowered.

Diabetes

Having diabetes almost doubles your risk of a stroke.

What is it? Diabetes means that your body can't take the sugar out of your blood properly.

Why is it a risk? Too much sugar in your blood can lead to damage to the blood vessels and nerves. This increases the risk of having a stroke. It can also lead to heart attacks, vision loss and kidney problems.

How do I know I have it? You might not have any symptoms, but diabetes can make you need to wee more often, and feel very tired and thirsty. A blood test can confirm if you have diabetes or pre-diabetes. For more information about the symptoms of type 1 and type 2 diabetes, visit [nhs.uk/diabetes](https://www.nhs.uk/diabetes).

What can I do about it?

People with type 1 diabetes generally need insulin treatment. Some people with type 2 diabetes only need to make changes to their diet, while others need drugs or insulin treatment. Treating your diabetes and making healthy lifestyle choices, such as losing weight if you need to, can help you reduce your risk of a stroke.



Ask your GP or pharmacist about getting a health check.



High cholesterol

High cholesterol doesn't usually have any symptoms, but it's a major risk factor for stroke.

What is it? Cholesterol is a vital substance in our bodies, but if there is too much cholesterol in your blood it can cause heart disease and stroke. There are two main types. 'Bad' cholesterol can cause a build-up of fatty material inside your blood vessels, and 'good' cholesterol helps to reduce the levels of bad cholesterol.

Why is it a risk? Excess cholesterol in your blood can make the blood vessels clogged up with fatty material (atherosclerosis). This can lead to a clot forming and causing a stroke.

How do I know I have it? A blood test from your GP or pharmacist.

What can I do about it? Your cholesterol result can be used to calculate your risk of having a stroke. If your risk is high, you can try making lifestyle changes such as losing weight, being more active and eating healthily. Drugs called statins are often given for high cholesterol, and have been shown to reduce the chances of a stroke.

Some people are born with high cholesterol. This is an inherited condition called familial hypercholesterolaemia. It can lead to people dying in their 20s or 30s, so it's vital to get tested if you know of early deaths from heart disease or stroke in your family. It can be treated with cholesterol-lowering drugs.

Other health conditions linked to stroke

Sickle cell disease (SCD)

A quarter of people with sickle cell disease (SCD) have a stroke before the age of 45. SCD mainly affects people of African, African-Caribbean, Asian and Mediterranean heritage. It raises the risk of a stroke because the red blood cells change shape, making them more likely to form clots.

In the UK, SCD is usually diagnosed during pregnancy or soon after birth with a blood test. The main treatment to reduce the risk of a stroke is regular blood transfusions. For information and support on SCD contact the Sickle Cell Society sicklecellsociety.org.

Women's contraception and hormone treatment

Some oral contraceptives and hormone replacement therapy (HRT) can cause a higher risk of stroke in women. Your doctor should assess your stroke risk before giving you these treatments. If you have high blood pressure, get migraines or have had a previous blood clot or stroke, you may not be eligible. Smoking, being overweight, or over 35 years old, can also increase your risk of having a stroke while taking the pill or HRT.

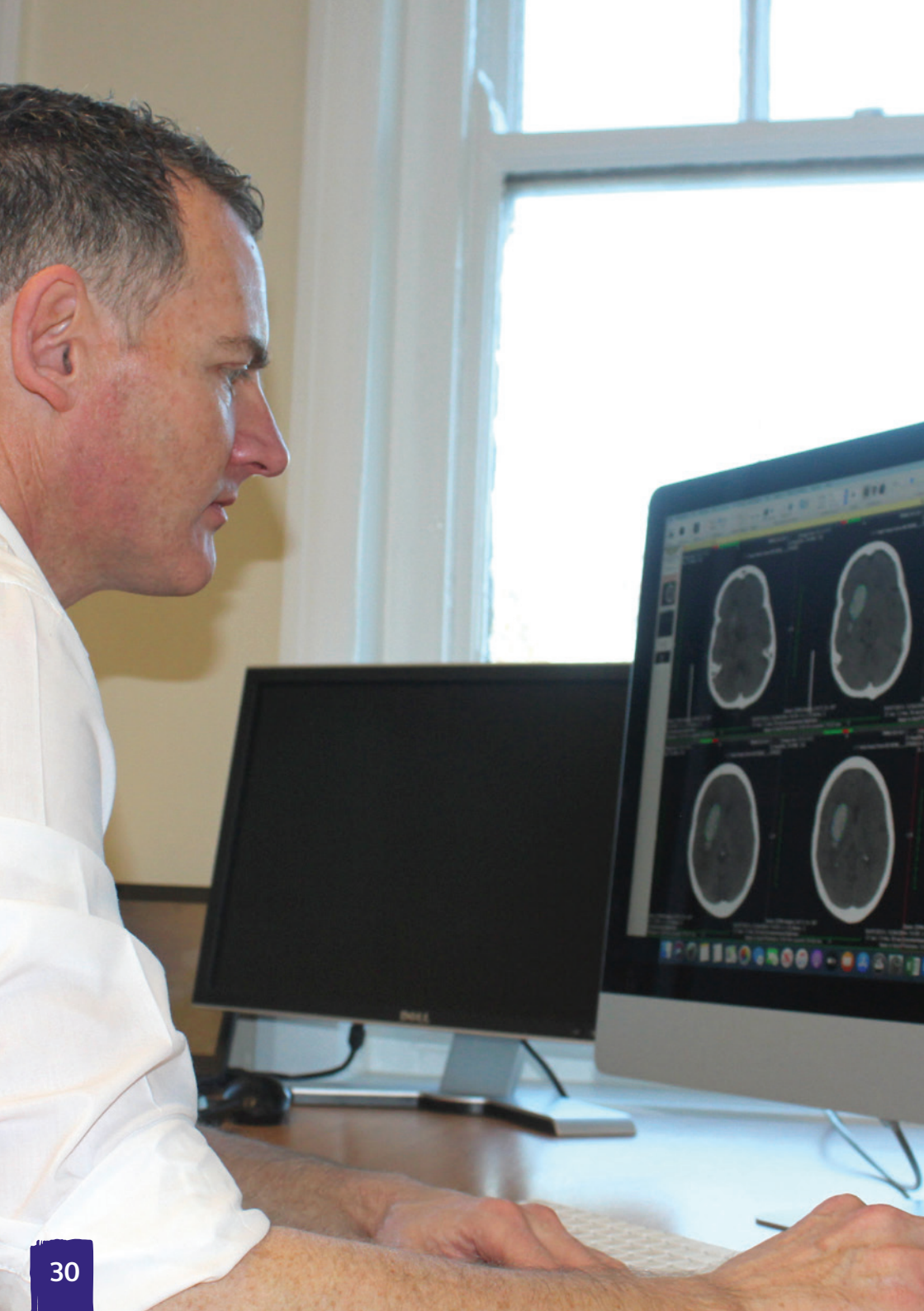
Overall, the risk of stroke from contraception or HRT is low, so if you are worried, don't stop any treatment until you can talk to your GP or nurse. Ask them about your own risk, and the best contraception or hormone treatment for you.

Stress, anxiety and depression

You can be at higher risk of stroke if you experience stress, anxiety or depression. It's not known why this is, but one reason could be that it's harder to look after your health if you are depressed or under a lot of pressure. Try to find support for any emotional problems from friends or professionals, and think about healthy lifestyle choices that could help your wellbeing.

Obstructive sleep apnoea (OSA)

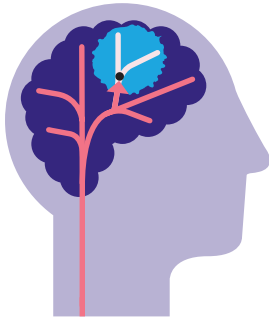
A sleep disorder called obstructive sleep apnoea (OSA) is linked to stroke. OSA interrupts your breathing during sleep. Some people with OSA snore, but not all. You might wake up a lot at night, and feel very sleepy in the daytime. Speak to your GP if you think you have OSA.



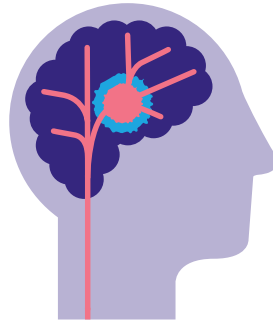
About stroke

A stroke is a brain attack. It happens when the blood supply to part of the brain is cut off, killing brain cells. Damage to the brain can affect how the body works. It can also change how you think and feel.

There are two main types of stroke



1. Ischaemic:
due to a blocked blood vessel in the brain.



2. Haemorrhagic:
due to bleeding in or around the brain.

Ischaemic stroke is often referred to as a clot.
Haemorrhagic stroke is often called a bleed.

Spotting the signs of a stroke

It's important to know how to spot the common signs of a stroke in yourself or someone else. Using the FAST test is the best way to do this.

FAST Test

F

Face

Can the person smile?
Has their face fallen on one side?



A

Arms

Can the person raise both arms
and keep them there?



S

Speech problems

Can the person speak clearly
and understand what you say?
Is their speech slurred?



T

Time

If you see any of these three
signs, it's time to call 999.



The FAST test helps to spot the three most common symptoms of stroke. But there are other signs that you should always take seriously. These include:

- Sudden weakness or numbness on one side of the body, including legs, hands or feet.
- Difficulty finding words or speaking in clear sentences.
- Sudden blurred vision or loss of sight in one or both eyes.
- Sudden memory loss or confusion, and dizziness or a sudden fall.
- A sudden, severe headache.

Stroke can happen to anyone, at any age. Every second counts. If you spot any of these signs of a stroke, don't wait. Call **999** straight away.

Transient ischaemic attack (TIA, or mini-stroke)

A TIA is the same as a stroke, but the symptoms last for a short amount of time. There is no way of knowing whether someone is having a TIA or a full stroke when the symptoms first start, so do not wait. Call **999** straight away.

Treating a stroke emergency

When someone has a suspected stroke, they should be taken to a specialist stroke unit in a hospital by ambulance. It's vital to get stroke treatment as soon as possible. Clot-busting and clot-removal treatments need to be given within a few hours of the stroke, so if you suspect a stroke, call **999** straight away.

Where to get help and information

From the Stroke Association

Helpline

Our Helpline offers information and support for anyone affected by stroke, including family, friends and carers.

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

Email helpline@stroke.org.uk.

Read our information

Get more information about stroke online at stroke.org.uk, or call the Helpline to ask for printed copies of our guides.

My Stroke Guide

The Stroke Association's online tool My Stroke Guide gives you free access to trusted advice, information and support 24/7. My Stroke Guide connects you to our online community, to find out how others manage their recovery.

Log on to mystrokeguide.com today.

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 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.

When stroke strikes, part of your brain shuts down. And so does a part of you. But the brain can adapt. Our specialist support, research and campaigning are only possible with the courage and determination of the stroke community. With more donations and support from you, we can rebuild even more lives.

Donate or find out more at stroke.org.uk

Contact us

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

Stroke Helpline: **0303 3033 100**

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

Email: helpline@stroke.org.uk

Website: stroke.org.uk

Rebuilding lives after stroke



© Stroke Association 2021
Version 3. Published May 2021
To be reviewed: April 2023
Item code: **A01L14**



Patient information awards
Highly commended

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