

# SECONDARY PREVENTION PRACTICE AND PROGNOSIS OF PATIENTS AFTER ISCHEMIC STROKE

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## ABSTRACT

It is evident that cerebrovascular disease including ischemic stroke belongs to the most common cause of disability or death in the world population. Secondary prevention in poststroke patients can lead to reduce risk of recurrence or extend lifetime like in coronary heart disease (CHD). The principles of secondary prevention are well implemented in population with CHD, but the situation in poststroke patients is quite different. The assessment of secondary prevention in poststroke patients and a comparison with patient with CHD was selected for a goal of this study. The study population consisted of Czech patients examined in the framework of well-defined surveys in patients after their first ischemic stroke. Patients represented pooled Czech samples of the project EUROASPIRE Stroke Modul or Stroke Survey in 2007 and in 2013. Better results in acute care were detected. Admissions in stroke unit in 2013 were realized more often than 2007 and fibrinolysis was applied more frequently too. On the contrary, arterial hypertension wasn't controlled better than the general population of hypertensives. Despite the decrease of average lipid level, patients didn't reach the target values in general. Also many poststroke patients couldn't quit smoking. There was a big group of poststroke patients without anticoagulation therapy. The real problem is a high prevalence of disorders of glucose metabolism, more than 50 percent patients had impaired glucose tolerance or diabetes mellitus. In the next part, we compared the adherence to secondary prevention principles between poststroke and CHD patients. Stroke was associated with a significant 85% risk of increase of all-cause mortality and 89% risk of increase of cardiovascular mortality. Poststroke patients were significantly less frequently treated with antiplatelets or anticoagulants, all antihypertensive and lipid-lowering drugs. Furthermore, we analysed less frequent factors of stroke. This study showed a „paradox“ interaction between overweight and better life expectancy in poststroke patients. There was also detected that mortality after undetermined subgroup of stroke in smokers with polymorphism gene of prothrombin was higher than in other subgroup of stroke. Another result was the finding that increased level of dp-ucMGP was associated with higher cardiovascular and total mortality in patients with stable atherosclerotic disease including stroke. The key for identifying the patients after stroke with independent psychosocial mortality risk is regular using a questionnaire SF 36 or HADS score. At the end, we are considering medical trends, guidelines and future in secondary prevention of stroke.

Key words: ischemic stroke, coronary heart disease, secondary prevention, EUROASPIRE, ESH-Stroke Survey, risk factors, hypertension, dyslipidemia, smoking, prothrombin, dp-ucMGP, SF 36 score.