Secondary Stroke Fact Sheet

A stroke occurs when a blood clot blocks a blood vessel or artery, or when a blood vessel breaks, interrupting blood flow to an area of the brain. One of the major risk factors for stroke is experiencing a previous one. There are more than six million stroke survivors in the United States today, and many will suffer a secondary, or recurrent, stroke.

Occurrence

- 795,000 Americans experience a stroke each year, and one out of every five will have another stroke within five years.
- Secondary strokes often have a higher rate of death and disability because parts of the brain already injured by the original stroke may not be as resilient.
- Within five years of a stroke, 24 percent of women and 42 percent of men will experience a secondary stroke.
- Up to 35 percent of all people who experience a transient ischemic attack (TIA, or mini-stroke) will go on to have a stroke.

Prevention

- Lifestyle changes – such as quitting smoking, drinking in moderation, exercising regularly and eating a low-fat, low-sodium diet – can help reduce stroke risk.
- Managing certain medical conditions, including high blood pressure, diabetes, circulation problems and atrial fibrillation (an irregular heartbeat), can reduce the risk of stroke.
- Some risk factors for stroke cannot be changed, including being over age 55, male or African American; having a family history of stroke; or having a history of diabetes.
Treatment

- Aspirin is currently viewed as the “gold standard” antiplatelet drug because of its effectiveness and low cost.
- Antiplatelet and anticoagulant drugs are currently the most common medications used to reduce the risk of secondary stroke. They thin the blood and inhibit the formation of platelets, elements of the blood that bond together to form clots.
- Antiplatelet drug Aggrenox®, in combination with aspirin, has been shown to reduce the risk of recurrent stroke by 37 percent when compared to placebo in a clinical trial.
- Plavix®, an antiplatelet medication, proved to prevent 7.3 percent more secondary strokes than aspirin in a study.
- Ticlid®, an antiplatelet prescribed for those allergic to aspirin, produced a 21 percent relative risk reduction for secondary stroke over aspirin in a three-year study.
- Coumadin® is a commonly prescribed anticoagulant drug, particularly for patients with atrial fibrillation (AF), a form of irregular heartbeat. Studies show Coumadin® use in AF patients resulted in an overall stroke risk reduction of 45 to 86 percent.