



# **NATIONAL CLINICAL GUIDELINE FOR STROKE**

for the United Kingdom and Ireland

Plain language summary

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} Patient voice representatives on  
guideline development group

## Care after stroke or transient ischaemic attack

### What, when, and why?

Plain language summary for people affected by stroke



## What, when, and why?

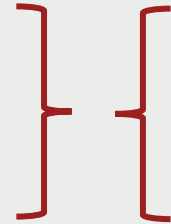
This presentation:

- **Why** a plain language summary?
- **What** is in it?
- **When** should it be used?
- **Who** produced it?
- **How** was it produced?
- **Where** can you find it?
- **What** can you do now?
- **When** should you do it?
- **Why** a plain language summary?

# Why a plain language summary?

- Inform

- Person with stroke
- Family, carers, friends



- What is happening now and why
- Where journey is going and why

- Empower

- Person with stroke
- Family, carers, friends



Being informed => can participate in process more effectively

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# What is in the plain language summary?

- Key points from full guideline of interest to people affected by stroke
  - What should be done
  - When should it be done
  - Why should it be done

## 6 | Treatments to remove a blood clot: thrombolysis and thrombectomy

### What should be done?

\***Thrombolysis** is a **treatment** to **break up** a blood clot that is **blocking** an artery (\*infarction). It is given by a doctor.

\***Thrombectomy** is an operation to **remove** a blood clot that is **blocking** an artery in the brain.

Breaking up or removing a clot is usually **only** for people who arrive at hospital **soon after** their stroke.

### When should this be done?

\***Thrombolysis** should be done as soon as possible (mostly **within 4½ hours** of stroke).

\***Thrombectomy** should be done as soon as possible (usually **within 6 hours** of stroke).

### Why should this be done?

\*Thrombolysis and \*thrombectomy treatments **reduce disability**.

These treatments can also improve a person's ability to **live independently**.

## 14 | Speech and communication difficulties

### What should be done?

People with **difficulty communicating** should be **assessed** by a **\*speech and language therapist** to diagnose:

- \*Dysarthria (unclear speech)
- \*Aphasia or \*dysphasia (language difficulties)
- Other communication problems.

The therapist should **explain** the **problem** to the person with stroke, and **support family members, carers** and **people** they might have conversations with.

People should have **opportunities** to **practise everyday communication**.

Staff should **review** any difficulties and provide **additional treatment, communication aids** or **technology** if needed.

### When should this be done?

Early after stroke the focus should be on **explaining** and **practising communication**.

People with **continuing difficulties** should be **offered further treatment** and **support**.



### Why should this be done?

Communication is important for **independence, confidence** and **wellbeing**.

## 19 | Reducing the risk of another stroke: abnormal heart rhythm

### What should be done?

People with stroke need to have their **pulse checked** to make sure that they do not have an **irregular heartbeat** (this is called **\*atrial fibrillation** or AF).

People with \*atrial fibrillation should **receive \*anticoagulant treatment**.

People who have **difficulty** with their \*anticoagulant **treatment** should **tell** their **doctor**.



### When should this be done?

**Pulse checks** should happen **before discharge** from hospital and again at **reviews**.

Some people should have their **pulse checked** whenever they have their **blood pressure measured**.



### Why should this be done?

Identifying \*atrial fibrillation (AF) and treating it with an \*anticoagulant can **prevent blood clots** from **forming** and **reduces** the **risk** of **another stroke**.



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## What is in the plain language summary?

- Additional information of interest
  - How guideline was developed
  - Sources of help and support
  - How to complain
  - List of unfamiliar terms
- Link to full guideline for more detail

# When should it be used?

- **Whenever** people affected by stroke have questions about their stroke care
- **Whenever** a doctor, nurse, therapist, care staff wants to talk to a person affected by stroke about treatment or next steps on care pathway
- **When** someone has first had a stroke or TIA and their families/carers want to understand what has happened and what will happen



# Who produced it?

## Guideline development group (GDG) patient voice representatives:



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Stroke guideline  
programme  
manager



# Who produced it?

SIGN  
designed  
pdf

**NATIONAL CLINICAL  
GUIDELINE FOR STROKE**  
for the United Kingdom and Ireland

2023 edition

## Care after stroke or transient ischaemic attack

### What, when, and why?

Plain language summary for people affected by stroke



Healthcare Improvement Scotland **SIGN**

Royal College of Physicians

ROYAL COLLEGE OF PHYSICIANS OF IRELAND

NICE accredited  
www.nice.org.uk/nice/accredited

Itineris  
produced  
online  
version

## 8. Swallowing problems (dysphagia)

### What should be done?

People with stroke should **not drink, eat or swallow medicine** until their **swallowing** has been **tested**.

People with **difficulty swallowing** (\*dysphagia) should receive **advice** and **support**.

People with some types of \*dysphagia should receive specialist **swallowing assessment** and \***rehabilitation** from a \*speech and language therapist.

People with \*dysphagia should have their **mouth checked** (\*mouth care) **three times a day**.

### When should this be done?

Swallowing should be **tested within 4 hours** of arriving at hospital.

People with serious swallowing difficulties should be considered for \***nasogastric** (through the nose) **tube feeding within 24 hours**.

If people are receiving **end-of-life care** (\*palliative care), they should **have food and drink** offered how they want it in the safest way possible.

### Why should this be done?

Some **swallowing difficulties** (\*dysphagia) caused by stroke can lead to **choking** or \***aspiration pneumonia**.

## 9. Eating and drinking (hydration and nutrition)

### What should be done?

People with stroke may be at risk of \***dehydration** (not enough water in the body) or \***malnutrition** (too little food). They should be **assessed** to see if they have been eating or drinking too little.

If there are concerns about \*malnutrition, people should be **referred** to a \***dietitian** for **advice** and **support**.

People who find it **hard to feed themselves** should be assessed and **receive equipment** and **support** to help them eat. Some people may need to be **fed** through a **tube** for a while.

### When should this be done?

\***Hydration** should be **assessed within 4 hours** of arrival at hospital.

Risk of \***malnutrition** should be **assessed when** the person is **admitted** to a stroke unit.

### Why should this be done?

\*Malnutrition and \*dehydration can cause **major health problems** for people who have had a stroke and can **delay recovery**.

# How was it produced?

## What?

- ‘What, when, why?’ format
- ‘If it ain’t broke, don’t fix it’
- 2016 text reviewed for:
  - Up to date
  - Relevant to all 5 nations
  - Clarity of language

## Who?

- 2016 patient version group
- Small focus group early 2022
- Reviewed by:
  - Martin James, GDG chair
  - Roberta James, SIGN
  - 7 UK & Irish patient organisations  
(enthusiastic engagement, hundreds of comments)

# How was it produced?

- Pdf, print & online versions
  - How reader feels most comfortable
  - Screen readers & browser options increase accessibility
- Bold face, lots of white space
  - Aphasia-friendly
- Plain language
  - Maximum accessibility, not just for person with stroke
- ‘Plain language summary’ of guideline, not ‘patient version’ (2016)

# Where can you find it?

[www.strokeguideline.org/plainlanguagesummary](http://www.strokeguideline.org/plainlanguagesummary)

- Online version
- Pdf to download
- A4 poster to download
- Print-ready pdfs
  - Summary
  - A4 poster
  - A5 leaflet
- Small no. print copies available

## Care after stroke or transient ischaemic attack What, when and why?

### Plain language summary for people affected by stroke

#### Summary

You can read the plain language summary of the guideline in two ways. The wording is the same in both formats.

- [Click here](#) to read it online. It is in an accessible format. You could make it even more accessible by adjusting your browser settings (for example, to increase the font size).
- [Click here](#) to download a pdf. It is in an accessible format which is easy to read.

#### Poster

You can download and print an A4 poster to put up on bulletin boards in hospitals and GP surgeries. The poster tells people that there is a plain language summary of the stroke guideline. The poster directs people to this website page.

[Click here](#) to download the A4 poster.

#### Professional printing

You can get the summary, the poster or an A5 leaflet professionally printed using these print-ready pdfs (with printer's marks and bleeds):

- [Plain language summary print-ready.pdf](#).
- [A4 poster print-ready.pdf](#).
- [A5 leaflet print-ready.pdf](#).

# What can you do now?

## GUIDELINE

The 2023 edition of the National Clinical Guideline for Stroke for the UK and Ireland is now available. It has been revised and new or have been updated. Big changes in the guideline since its publication in 2016 have led to significant updates in

- A big expansion in the use of thrombolysis and thrombectomy
- More intensive interventions for secondary prevention – antiplatelets, cholesterol, blood pressure
- More intensive rehab in hospital and at home to promote motor and language recovery.

Include it in newsletter



Use it in clinical practice

## Do you know someone who has had a stroke or TIA\*?

\*transient ischaemic attack



Put up A4 poster

### Read our booklet

This plain language summary of the national clinical guideline for stroke tells you what care should be given.

Read and download a pdf version online, or order a print copy at: [www.strokeguideline.org/plainlanguagesummary](http://www.strokeguideline.org/plainlanguagesummary).

Tweet about it (or other social media)

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Distribute A5 leaflet

SSNAP Audit @SSNAPudit · Apr.5  
Plain language summary of the 2023 National Clinical Guideline for Stroke for UK & ROI, for people who've had a stroke, families & carers now online & to download at [strokeguideline.org/plainlanguagesummary](http://strokeguideline.org/plainlanguagesummary)...  
@TheStrokeAssoc @CHSScotland @Irishheart\_ie @nichstweet @diffstrokes #strokeguideline2023

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**When** should you do it?

**Tomorrow**

(or tonight on the way home)



# Why a plain language summary?

For people like us...



...who've been affected by stroke