Seminar

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Date : 2012

**Topic:** Prevention of Brain Attack (STROKE) and gaps in our knowledge with regard to stroke prevention.

Prevention of Stroke should be aims in levels prevention namely primary & secondary prevention.

Primary prevention is targeted non- modifiable & will documented modifiable risk factors such as Hypertension, Diabetes, Smoking Hyperlipidemia, Atrial Fibrillation.

**Secondary prevention**

Survivor s of TIA or stroke have an increased risk of another stroke . Secondary prevention aims to prevent or delay recurrence of stroke after first stroke or TIA.

At this level options are :

**Anti –platelets therapy**

**Anti Coagulant for AF**

**Blood Pressure control**

**Hypolipidemic therapy**

**Carotid Endarterectomy**

**Smoking Cessation**

**Life Style Modification**

**Diet-**

* Replaced Saturated fats by mono-unsaturated or poly –unsaturated lipid
* 5 Portion of fruits & Vegetables everyday
* 2 Portion of fish per week including one portion oily fish

**Knowledge gaps :**

* Risk assessment tool (an ideal) dose not exit yet
* Genetic factors for stroke may be potentially modifiable how over lacing of specific Gene therapy is not possible
* Hypertension remains undiagnosed & undertreated, Programmers to improve treatment compliance need to be developed and supported
* Controversy remains about optimal level of anticoagulant
* The causal association between Obesity & Brain attack not establish similarly Migraine & sleep apnea
* Controversy remains in the treatment Carotid Artery Steno sis