STROKE—Clinical Outcomes Studies

SEASONAL VARIATION OF TRANSIENT ISCHEMIC ATTACK (TIA) IN HUNGARY

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OBJECTIVES: The aim of our current study was to find out whether a weekly or seasonal variation can be revealed in the onset of a transient ischemic attack (TIA) in Hungary during a four year study period, and whether the occurrence of a TIA is influenced by age or sex. METHODS: The study was performed on patients received treatment at neurological departments in Hungary between 2002 and 2005, and diagnosed with TIA (N = 4898). Data was taken from the nationwide database of the National Health Insurance Fund Administration (OEP), in accordance with the International Classification of Diseases (ICD) (ICD codes G4580, G4590). RESULTS: Based on our results, the onset of cerebrovascular diseases, such as a transient ischemic attack (TIA), shows a weekly and seasonal variation. With consideration to seasonal variation, the peak period of TIA is the months of spring, with lowest number of events during the summer. There was a significant difference in the number of events during seasons (p < 0.01). The weekly peak of TIA-morbidity was during the first day of the week, on Monday, showing a gradually decreasing tendency until Sunday. Differences between sexes were only found in the weekly distribution of number of events. The difference between age-groups proved to be significant only in weekly analysis and the decrease on weekends is significantly higher in patients aged over 65 years (p < 0.01). CONCLUSION: In summary, the results of our study reveals, that the occurrence of TIA shows a certain variation with consideration to seasons and the days of the week.

STROKE—Patient Reported Outcomes

STROKE SURVIVORS’ CHANGE IN HEALTH RELATED QUALITY OF LIFE OVER TIME AS MEASURED BY THE STROKE IMPACT SCALE

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OBJECTIVES: The goal of this study was to analyze changes in disease-specific HRQoL over time. METHODS: The Stroke Impact Scale (SIS) was administered to 33 first-time stroke survivors discharged home from the hospital at baseline, 3, 6, 9 and 12 months post stroke. RESULTS: Statistically significant differences were observed between baseline and the follow-up assessments. CONCLUSION: The SIS is a useful tool for following changes in HRQoL in stroke patients.