

# The Stroke Prevention Programme: a programme of research to inform optimal stroke prevention in primary care

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## Plain English summary

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## Plain English summary

**M**any strokes and heart attacks that occur now would be avoided if the knowledge that we already possess was better applied. This programme of research explored three different ways in which we might achieve better stroke prevention in the community.

The first work programme looked at whether or not combining medicines to reduce stroke risk in a 'polypill' might help. In terms of value for money, we found that this approach probably had only a limited role in people known to be at high risk of a stroke, but it had greater potential if offered to people in whom the level of risk of stroke was unknown. However, we found misgivings from both health-care professionals and the public towards this latter approach.

The second work programme looked at whether or not giving patients greater responsibility for the management of their own blood pressure might lead to better control. We found that involving patients in monitoring their own blood pressure led to better control, but the benefit was greater if patients were also responsible for determining when their therapy should be increased. We found that this self-management approach represented good value for money for the NHS.

Finally, we tested how intensively people with a history of stroke or transient ischaemic attack (a type of 'warning' stroke) should have their blood pressure lowered. We concluded that the key message was that active management of blood pressure by the primary care team was more important than the level of blood pressure aimed for.

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