

**THE PRELIMINARY RESULTS OF THE SCIENTIFIC-RESEARCH PROGRAM
"TRANSIENT ISCHAEMIC ATTACK - CHOOSE THE CORRECT WAY!"**

G. Kaishibayeva, G. Khassenova, K. Zhumagulova, B. Zhiyenbayeva, L. Kuzina,
A. Yemelyanov
*Neurology, Scientific Practical Center "Institute of Neurology named by Smagul
Kaishibayev", Kazakhstan*
gulnaz63@mail.ru

Aim of study: To making the register of patients with transient ischaemic attack (TIA), to studying the risk factors, the factors of prognosis, frequency stroke in outcome and the quality of diagnostics and treatment in ambulance.

Objective: The 166 neurologists from 16 cities of Kazakhstan advised 3707 patients with TIA symptoms.

Methods: To all patients the neurological survey, blood analysis, ultrasonic research of cerebral vessels, brain MRI, assessed stroke risk on ABCDD scale was carried out, selected individual therapy, made recommendations of individual risk factors. Duration of monitoring was 6 months.

Results: The TIA was diagnosis on 785 patients. The men was 335 (42,7%), women 450 (57,3%). Average age of men 58,5 years, women 58,9. Hypertension was at 66,7% of women, 10,4% of men. Combination with diabetes at 7,1% of women, 2,7% of men. Vestibular ataxy was at 277 (61,5%) women and 64 (19,1%) men, combination with headache 116 (25,8%) women, 176 (52,5%) men, movement disorders 28 (6,2%) women, 63 (18,8%) men, headache 19 (4,2%) women, 14 (4,2%) men, dysarthtia 10 (2,2%) women, 18 (5,4%) men.

After treatment normal status at 691 (88%) patients, stroke at 87 (11,12%), fatal stroke 7 (0,88%). The stroke developed on second day at 16 (18,4%), on seventh day at 24 (27,6%), during 90 days at 47 (54,0%). From them 58 (66,7%) was into group of high risk on ABCDD scale.

Conclusions: The directing of register of TIA by the independent scientific practical center allows to take stock of all cases TIA in ambulance, monitoring the quality of diagnostics and treatment, treatment outcomes to take the recommendations about organization of qualified help to this patients.