

ABCD2 SCORE: HELP OR HINDRANCE?

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Introduction: ABCD2 score is the tool used in the initial assessment of patients presenting with transient neurological symptoms of vascular origin, to determine their probability of going on to develop a stroke. It is used primarily by General Practitioners and Emergency Department staff to refer into specialist TIA clinics. Scores greater than or equal to 4 should be assessed in 24 hours, those with scores less than 4 in 7 days.

Method: We reviewed the ABCD2 score for patients seen in the TIA clinic between July and November 2015. The total number of patients reviewed was 153. Patients were divided into two groups; high risk with ABCD2 score ≥ 4 (61) and low risk 4 (92). The diagnoses were recorded for all patients. Aids used to come to diagnosis included CT brain, MRI brain and Carotid Doppler ultrasound.

Results: Of the 153 patients referred, 50 were clinically diagnosed as "definite TIA", 15 as "probable TIA" and 19 as "possible TIA" (54.9%). The remaining 69 were diagnosed with conditions unrelated to transient ischaemia. Of those with a TIA diagnosis, 44 had an ABCD2 score ≥ 4 and 40 an ABCD2 score 4.

Conclusion: Diagnosing TIA is a complex and demanding task. ABCD2 score can be a useful aid to categorise urgency of referral. However, it is apparent when used incorrectly, it leads to inappropriate referral to TIA clinics. In our case 69 referrals based on ABCD2 score were not related to TIAs.