

# Make **stroke** a priority

A manifesto on stroke for the next UK Government

April 2024

Rebuilding lives after stroke

**Stroke**  
Association

**Stroke is the UK's fourth biggest killer.**  
It is a leading cause of disability, instantly changing the lives of the 281 people who have a stroke every day.

The good news is that with the right investment, stroke is **preventable, treatable, and recoverable.**



Max, stroke survivor

# Foreword

**In the next 10 years, the number of stroke survivors is set to increase by 60%, costing the Government £75 billion: nearly half the current NHS budget. This means one in five people will have had a stroke before the end of their lives. This doesn't have to be the case. The next 10 years are critical to stroke prevention, treatment and recovery.**

Stroke strikes the brain in an instant, killing 1.9 million brain cells every minute it goes untreated.

In 2035, someone will call 999 to report a stroke every four minutes. This means 151,000 people will be admitted to hospital with stroke. This is 414 per day. The demand for NHS services will be unsustainable. There will be thousands more experiencing a stroke who will not go to hospital. 42,000 people will die every year.

A stroke happens when blood can't get to the brain, either because of a bleed or a clot blocking the way. Immediately, patients begin to lose control of their body, speech, and sight. Some patients become unconscious. 60% of patients who survive will be left with a disability. Many will not be able to walk, write, speak or even see, or eat, drink and dress themselves alone.

We will need hundreds more doctors, nurses, physios, speech and other therapists focused exclusively on stroke, or many

more patients will die or be left disabled and lose their independence.

There will be 2.1 million stroke survivors alive in the UK in 2035– this is the current population of Slovenia. They will be at significantly higher risk of developing vascular dementia.

By then, stroke will cost the public purse £75 billion: that will be nearly half the current NHS budget.

173,000 stroke survivors will be missing from the workforce. The economy will lose billions through inactivity as thousands of working-age stroke survivors lose confidence in their abilities and develop depression in the face of their new reality.

These bleak 2035 stroke scenarios are already happening. If the next Government fails to tackle prevention, treatment, and recovery at the root, then stroke will become the most avoidable burden on the NHS. Every stroke is a tragedy, but 151,000 and growing every year, will be a failure of leadership. In 2000, stroke was the second leading cause of death in the UK. By making stroke a national priority reflected in local resources, stroke mortality was halved by 2010. Change is possible.

Stroke is not inevitable- nine in ten strokes are preventable. We know the causes of stroke and we know how to prevent it.

We know what life after stroke support is vital to stop problems becoming crises. The right physiotherapy, occupational therapy and speech and language therapy will get stroke survivors out

of hospital; giving them back movement, their voice and their independence.

Getting stroke right will drive improvements in prevention, treatment and recovery across all health conditions and touch every corner of the NHS.

We have the knowledge and the treatments, but we do not yet have the political will to get this to patients. Any party wanting to transform health in our country should place stroke at the top of its priority list. The next government has the choice to stop stroke or let it spiral. We need to see the start of real change.

**Juliet Bouverie OBE**  
Chief Executive  
Stroke Association



**By 2035, the UK will see a 60% increase in first-time strokes over a 20-year period. This means more people experiencing strokes for the first time. That translates to about 2.1 million stroke survivors living in the UK, all working to rebuild their lives.**

There are significant challenges across the health and care system that are having an immediate impact on the quality of stroke care. Shortages of stroke professionals, delays in ambulance response times and timely access to stroke units have led to a deterioration in access to life-changing stroke treatments. Last year, only 40% of stroke patients were admitted to specialised stroke care units within the four-hour target, a considerable decline from 55% pre-pandemic.

This means people aren't getting the care they need as quickly as they should. Declining access to specialist stroke units directly translates into more stroke survivors living with significant disabilities – not only derailing their lives but compounding the cost on health and social care.

Next year, the cost of stroke in the UK will be £43 billion. By 2035, the cost will have risen to £75 billion - an eye-watering increase of almost 200% over 20 years. 1 in 4 strokes happen to people of working age, causing a loss in productivity of £1.6 billion per year, set to increase 136% by 2035. Successive governments have not addressed the scale of the problem, leaving stroke care underfunded, understaffed and under-prioritised in policies and plans. However, there's hope. Given the right focus, stroke is preventable, treatable and recoverable.

When we invest in preventing strokes and providing good treatment and rehabilitation, we not only save lives and improve quality of life but also save money for the healthcare system, families, and the wider economy. We have some great solutions already in place, and there's potential for even more innovative treatments in the future.

We're asking the next UK Government to make stroke the priority it needs to be.

#### **This means:**



Putting in place a dedicated stroke lead and team in the Department of Health and Social Care in the first 100 days.



Bold investment in stroke prevention to save lives and reduce disability.



Widening access to game-changing treatments and support so that stroke survivors can make a full recovery, return to work and regain their independence.

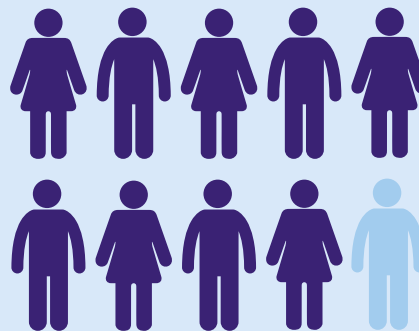
# Stroke is preventable

## Ask 1:

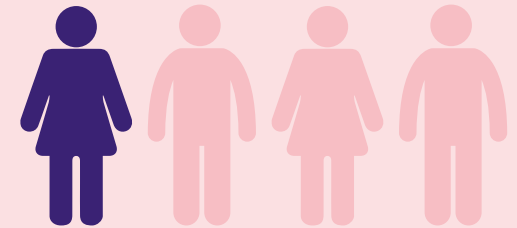
The Department of Health and Social Care should publish a funded stroke prevention plan.

Building on what's worked, we can drastically reduce the cost of stroke on the NHS and wider society through early detection and management of the risk factors. We must also prioritise supporting people of all ages to reduce their risk of stroke.

Unique innovations and opportunities can be leveraged if we get stroke prevention right. For example, electrocardiogram (ECG) sensors are being fitted onto supermarket trolleys in a trial to screen for atrial fibrillation (AF), a health condition which increases the risk of stroke.



**9 out of 10**  
strokes could  
be prevented.



**1 in 4**  
survivors will have  
another stroke  
within 5 years.

**A comprehensive stroke prevention plan from the new UK Government would:**

- Reduce the number of strokes in the most deprived areas of the UK through targeted stroke prevention activity.
- Accelerate national targeted stroke prevention activity to improve detection and management of stroke risk factors like high blood pressure and AF, especially among people of working age.
- Support investment into research on secondary stroke prevention so that the evidence can inform practice and reduce rates of recurrent stroke.



# Stroke is **treatable**

## Ask 2:

### Make sure that the stroke treatment thrombectomy is universally available 24/7

Stroke is a medical emergency and every minute counts. Thrombectomy is a game-changing and cost-effective treatment to remove the blood clot in the brain which has caused the stroke, restoring blood flow. It can dramatically improve recovery post-stroke and significantly reduces the chance of disabilities like paralysis, visual impairment and communication difficulties.

Universal 24/7 access to thrombectomy in England, for example, would enable 1,600 more people to be independent after stroke each year, and thousands more to live with fewer disabilities. It could also save the health and care system £73 million each year. However, thrombectomy is time sensitive and

requires quick access to brain imaging to determine suitability and rapid inter-hospital transfers. Workforce shortages are holding back the rollout of thrombectomy services, and the treatment is not available 24/7 in many regions. This creates shocking inequalities in access: nearly 10% of stroke patients receive a thrombectomy in London, compared to only 0-3% in more rural areas.

To access stroke treatments and ensure the best possible outcomes, stroke patients need to be able to access specialist stroke units quickly. By widening access to treatment like thrombectomy and specialist stroke care, we can significantly reduce stroke deaths and stroke-related disability.



For every minute a stroke is left untreated, **1.9 million** brain cells die.



Treating every patient who needs a thrombectomy could save the health and care system **£73 million** annually.



### The UK Government must:

- Deliver faster access to advanced imaging and specialist stroke units so patients can receive life-changing, disability-reducing treatments.
- Address regional disparities in thrombectomy access and invest in 24/7 thrombectomy services across the UK.
- Recruit and retain the specialist stroke workforce needed to widen access to game-changing stroke treatments like thrombectomy



"I was told I was a candidate for thrombectomy but couldn't have one because the thrombectomy service didn't run at the weekend. I felt I'd had my hopes dashed."

**Phil, stroke survivor  
and campaigner**

# Stroke is **recoverable**

## Ask 3:

**Ensure that all stroke survivors can access the rehabilitation and Life After Stroke support they need in line with national guidelines.**

Surviving a stroke is not the end of the story. A stroke can leave survivors facing paralysis, vision loss, mental health problems, and unable to speak or even swallow. Their needs are often constantly evolving throughout their recovery. Many stroke survivors will need family and friends to provide them with informal care whilst they recover, further compounding the economic impact as unpaid carers leave the workforce.

With the right support, stroke survivors can thrive after stroke, regaining lost skills and function, enabling more survivors and their informal carers to return to work. This benefits the healthcare system and

would help to boost the UK labour force, at a time when record numbers of people are out of work due to illness.

But the picture is bleak. Two thirds of rehabilitation teams are understaffed, meaning more than half of stroke survivors report receiving insufficient rehabilitation support to rebuild their lives. Stroke survivors routinely go without vital follow-up support, like physiotherapy and other community-based therapies. Just 37% of stroke survivors received a six-month review of their needs last year.



**1 in 4** strokes happen to people of working age.

**1 in 3** in this group will have to give up their job.



**44%** of stroke survivors experience depression after their stroke.

## The UK Government must:

- Address access to rehabilitation, including community rehabilitation and Life After Stroke programmes in line with national guidelines.
- Leverage the NHS England's Long Term Workforce Plan to achieve the significant expansion in community rehabilitation that is needed.
- Commit to ensuring that all stroke survivors have access to vital follow-up checks in the form of a six-month review, and a key worker to facilitate access to ongoing support.
- Prioritise equitable delivery of psychological and emotional support for stroke survivors across the UK.



“Stroke is one of the worst things because of the long-term impact. I need help to go to the toilet. I can’t even dress myself. My voice is different now. I’m a different person. I cry myself to sleep most days. It’s difficult for me.

Thanks to life after stroke services, I’ve slowly been rebuilding myself and I am also set to start a phased return to work later this year. If I didn’t have any of this support, I think I would still be in a chair in my living room watching the world go by.”

**Marwar, stroke survivor  
and campaigner**

When stroke strikes, part of your brain shuts down. And so does a part of you. Life changes instantly and recovery is tough. But the brain can adapt. Our specialist support, research and campaigning are only possible with the courage and determination of the stroke community. With more donations and support from you, we can rebuild even more lives.

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Donate or find out more at [stroke.org.uk](https://stroke.org.uk)

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Association

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Contact [campaigns@stroke.org.uk](mailto:campaigns@stroke.org.uk)  
for more information.

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