

Reducing your risk of stroke: information for African and Caribbean people

Stroke can happen to anyone at any time, but if you are of African or Caribbean origin you may have a higher risk of stroke than other people in the UK. This guide explains the factors that can make you more at risk of stroke and what you can do about them.

Why am I more likely to have a stroke if I am African or Caribbean?

Studies show that if you are of African or Caribbean origin you are twice as likely to have a stroke, and at a younger age, than the rest of the population.

Part of the reason for this is that you are more likely to have health conditions that put you at risk of stroke, including high blood pressure, diabetes and sickle cell disease. It's also thought that African and Caribbean people may be more likely to carry weight around their waist, which by itself increases your risk of having a stroke as well as making you more prone to having high blood pressure and diabetes. There may be a genetic link that makes people in this ethnic group more likely to have a stroke, so it's important to understand your own risk factors. This guide gives ideas for easy ways that everyone can lower their stroke risk.

What is a stroke?

A stroke is a brain attack. It happens when the blood supply to part of your brain is cut off, killing brain cells. Damage to the brain

can affect how the body works. It can also change how you think and feel.

There are two main types of stroke. Ischaemic stroke is due to a blocked blood vessel in the brain. You may hear it called a clot. Haemorrhagic stroke is due to bleeding in or around the brain. It's often called a bleed. Around 85% of strokes are due to a clot, and 15% are due to a bleed.

What factors will increase my risk of stroke?

High blood pressure

High blood pressure is the most important risk factor, contributing to over half of all strokes. In the UK high blood pressure is more common among black Caribbean people than any other ethnic group.

Blood pressure is the measure of how strongly your blood presses against the walls of your arteries when it is pumped around your body. If this pressure is too high, it puts additional strain on your arteries and heart, which can cause health problems and lead to a stroke or heart attack.

Reducing your risk of stroke

High blood pressure (also known as hypertension) is when your blood pressure is consistently too high (140/90mmHg or higher).

High blood pressure puts a strain on all the blood vessels in your body, including the ones supplying blood to your brain. This makes a blockage more likely, or can cause a weakened blood vessel in the brain to bleed.

What can I do about high blood pressure?

High blood pressure usually has no symptoms so the only way to check is to have your blood pressure measured regularly. All adults over 18 should have their blood pressure measured at least every five years. If you are over 40, have high blood pressure or are overweight you should get your blood pressure checked at least once a year. This can be done by your GP or nurse, or you can check it yourself with a home testing device.

Leading a healthy lifestyle can help to reduce your risk of high blood pressure. You can read more about this further on in this guide.

Diabetes

Diabetes is up to three times more common among black African and black Caribbean people compared to the rest of the UK population. And people in this group are also more likely to develop complications like heart disease and stroke at a younger age. Diabetes happens when the body can't control the amount of sugar in the blood. There are two main types of diabetes.

- Type 1 is when the body stops producing insulin, the main hormone responsible for controlling blood sugar. This type of diabetes usually begins in childhood and around 10% of diabetics have type 1.

- Type 2 is when the body does not produce enough insulin, or the body's cells don't react to insulin in the right way. Type 2 diabetes is strongly linked with obesity and physical inactivity, and can develop in children and adults. This type of diabetes accounts for around 90% of diabetics.

Having diabetes almost doubles your risk of stroke, and contributes to up to one in five strokes. This is because high levels of sugar in the blood can damage your blood vessels, making them harder and narrower and thus more likely to become blocked. If this happens in a blood vessel supplying the brain it could cause a stroke.

What can I do about diabetes?

As African and Caribbean people are more at risk of developing diabetes it is important that you get checked by your GP, especially if you are 25 or older and you have any other risk factors:

- a history of diabetes in your family
- a history of heart disease or stroke
- high blood pressure
- being overweight or obese
- having diabetes during pregnancy.

If you have diabetes, you must have regular check-ups with your GP or at a diabetes clinic to make sure your blood glucose and blood pressure stay at healthy levels. Type 2 diabetes can sometimes be managed by making changes to your lifestyle, such as eating healthy food or doing more exercise. There are tips about leading a healthier lifestyle further on in this guide.

Sickle cell disease

Sickle cell disease (SCD) is a disorder that affects your red blood cells. Blood cells are normally round and flexible, but in people with sickle cell disease they become stiff and crescent or sickle-shaped. This can lead them to block blood vessels and disrupt blood flow, causing painful episodes. SCD can often cause anaemia, damage to major organs and raise the risk of severe infections. Children with SCD are three times more likely to have a stroke, and about a sixth of all people with sickle cell disease will have had at least one stroke by the age of 45. Blood transfusions are the main treatment given to people with SCD who are at high risk of stroke or have had a stroke.

Around 10,000 people in the UK have sickle cell disease and it mostly affects people of African, Caribbean, Asian, and Mediterranean origin.

What can I do about sickle cell disease?

Sickle cell disorders can be detected with a blood test. All newborn babies in the UK are checked for SCD.

Although sickle cell disease cannot be cured, treatment can reduce its symptoms and the risk of complications. If you are diagnosed with SCD you will be referred to a team of health professionals that will help you manage the condition.

As stroke is one of the most serious complications of sickle cell disease, you will need to have regular checks to monitor your risk. If a child is diagnosed with sickle cell disease they should have a transcranial Doppler (TCD) scan every year from the age of two. This scan uses ultrasound to measure the flow of blood through your

brain and can indicate whether there is a risk of a blockage.

If the scan shows that you are at a high risk of stroke, your doctor may recommend that you have more regular scans or receive blood transfusions.

Drinking plenty of water, taking regular exercise and eating healthily can help to reduce the symptoms of sickle cell disease. Some things are known to trigger a sickle cell crisis, including very hot or cold temperatures and stress.

Lupus (SLE)

Systemic lupus erythematosus (SLE), which is often just known as lupus, is an auto-immune condition that mainly affects women. It tends to appear more often among people of African, Caribbean and Asian descent, but anyone can be affected. Lupus mainly affect the skin and joints, but can also involve internal organs such as your heart and kidneys. Damage to the kidney may lead to high blood pressure, which contributes to the risk of a stroke. The typical symptoms of lupus include joint pain, skin rashes, fatigue and fever, although symptoms vary from person to person. There is another form of lupus known as discoid lupus which only affects the skin.

There is no cure for lupus itself, but you can treat the symptoms such as pain and high blood pressure. If you have lupus, your kidneys should be monitored, and kidney problems can be treated with immunosuppressants. You can also take steps to reduce your risk of a stroke by making healthy lifestyle choices like eating healthily, not smoking and taking plenty of exercise.

Atrial Fibrillation (AF)

AF is a type of irregular, uncoordinated heartbeat that can cause blood clots to form in the heart. If these clots move up into the brain, they can lead to a stroke.

If you are African or Caribbean and have AF, your risk of stroke could be slightly higher because you're more likely to have other risk factors (such as high blood pressure and diabetes) as well.

What can I do about AF?

Your doctor can test whether you have AF by checking your pulse and performing an electrocardiogram (ECG) – a simple and painless test that records the rhythm and electrical activity of your heart.

If you have AF you may be given blood-thinning medication to reduce your risk of a stroke. Adopting a healthy lifestyle by being physically active and eating healthy can help further reduce the risks from AF.

High cholesterol

Cholesterol is a fatty substance and is vital for your body to function properly. Most of the cholesterol in our body is made by the liver, but it can also be absorbed from some of the foods we eat.

High cholesterol usually has no symptoms, so you need to have your cholesterol level checked, especially if you are over 40 and have any of the other main risk factors for developing the condition:

- a history of heart disease or high cholesterol in your family
- being overweight

- having high blood pressure or diabetes
- smoking
- drinking large amounts of alcohol.

Your GP can check your cholesterol level with a simple blood test. Making changes to your lifestyle can help to reduce your cholesterol, but you may be given drugs called statins to help reduce your risk of a stroke.

Your lifestyle

You can help to reduce your risk of a stroke by making some healthy lifestyle choices.

Stop smoking

Smoking doubles your risk of dying from a stroke. Some people smoke cigarettes, but bidi/beedi and shisha also use tobacco, so if you smoke these you are at risk of the same kinds of diseases as cigarette smokers. The World Health Organization has shown that in one session of using shisha you can inhale as much smoke as if you smoked 100 cigarettes.

The nicotine in tobacco is highly addictive so giving up is not always easy, but there is a lot of support available to help you. You should be able to find an NHS service that can give you advice on the best way to quit. Speak to your GP or call the NHS Smokefree helpline to find your nearest service. You can find helpline numbers at the end of this guide.

Cut down on alcohol

If you do drink alcohol, keep within the safe limits recommended by the government. The guidelines say that men and women should drink no more than 14 units per week

Drinking a lot in a single session is particularly risky, even if the weekly total is within limits.

To reduce your risk, spread out your drinking over the week and have at least two alcohol-free days in a week. For more information see our guide F13, Alcohol and stroke.

Reduce your waist size

African and Caribbean people tend to carry more weight around their waist than the rest of the population. If you carry extra weight around your waist you are more likely to develop diabetes, high blood pressure or other health problems. Another way of measuring obesity is BMI, or body mass index. This shows whether you are the right weight for your height. The general population should have a BMI below 25, but people from African and Caribbean ethnic groups should aim to keep below a BMI of 23. This is because of the higher risk of diabetes and high blood pressure in these groups.

Eat healthily

Eating a healthy, balanced diet can help to lower your blood pressure and the amount of cholesterol in your blood. It can also help to control diabetes. All of this can help to reduce your risk of having a stroke.

- Eat more fruit and vegetables
Fruit and vegetables are an important source of vitamins and minerals and you should aim to have five portions of fruit and vegetables every day.
- Eat more fibre
Eating plenty of fibre as part of a healthy balanced diet has been associated with a lower risk of stroke, heart disease and type 2 diabetes.

Good ways to increase your fibre intake include choosing high-fibre breakfast cereals such as plain shredded whole grains or oats. Try going for wholemeal

or granary breads and choosing whole-wheat pasta, bulgur wheat or brown rice. Use potatoes with their skins on and add pulses such as beans, lentils or chickpeas to other dishes such as salads or stews, include plenty of vegetable with meals.

- Eat healthy protein
Meat and fish, beans, peas and lentils are all good sources of protein and you should aim to have two portions of protein every day.

Fatty cuts of red meat are high in saturated fat, which can raise your cholesterol, so limit the amount you eat. You could try adding beans or lentils to your stews and curries to replace some of the meat you use.

It's a good idea to eat two portions of fish every week, especially oily fish like mackerel, sardines or salmon. Vegetarian or vegan sources of protein include tofu, mycoprotein such as Quorn, textured vegetable protein and tempeh.

Milk and other dairy products can also provide a good source of protein but try to use low-fat options.

- Cut down on fat
We all need small amounts of healthy fat in our diets, but too much can lead to weight problems.

Palm and coconut oils are very high in saturated fat, which increases the amount of cholesterol in your blood. Instead, use small amounts of vegetable oil, nut and olive oils, as these are higher in unsaturated fats which can help to reduce cholesterol.

Red meats, full-fat cheese and manufactured cakes and biscuits often contain a lot of saturated fat, so try to limit the amount of these in your diet.

- **Reduce sugar**
Having too much sugar can make you gain weight, so you should aim for no more than 7 sugar cubes worth of sugar a day (about 30g). Try to avoid foods with hidden sugar like readymade pasta sauces, sweetened breakfast cereals, and fizzy drinks like cola. Sweets, treats and drinks contain a lot of sugar, so try not to have them every day.
- **Try new ways of cooking**
How you prepare your food is just as important as what you eat. Steaming, boiling and grilling are all healthier than frying, which adds extra fat. Fried foods should be enjoyed as occasional treats, rather than as a regular part of your diet.
- **Keep salt low**
Too much salt can increase your blood pressure. We all need a small amount of salt in our diets but the most we should have in a day is 6g (or a teaspoon) of salt.

Much of the salt we eat is hidden in processed foods such as ready meals, crisps, nuts and biscuits, as well as processed meats. Keep these as an occasional treat and avoid adding salt to food when you're cooking or at the table.

Using spices and lemon juice can add flavour to replace the taste of salt. Pre-mixed flavourings such as jerk seasoning or curry powders can also be high in salt. Try using fresh ginger, lemon juice and chillies or dried herbs and spices to flavour food instead.

Take more exercise

Regular exercise can reduce your risk of having a stroke by lowering blood pressure and helping you to maintain a healthy weight. If you have diabetes it can help to control your blood sugar, and it can improve blood cholesterol levels. On top of that, it can also help to reduce stress and depression.

Regular, moderate exercise can reduce your risk of stroke. You should aim to do at least 30 minutes of moderate physical activity five or more times a week. You don't have to do all 30 minutes at once, it can be broken up into smaller blocks of time throughout the day.

You can choose any form of exercise as long as the activity increases your heart rate and makes you feel warm and a little out of breath. So you could try yoga or dancing or simply make small changes to the things you do every day – walking to the shops not driving, gardening or using the stairs instead of a lift can all count towards your daily total.

If you haven't been active for some time, and especially if you're over 40 or have a medical condition, make sure you speak to your doctor before you start doing lots of physical activity.

Spotting the signs of a stroke

FAST test



Face

Can the person smile? Has their face fallen on one side?



Arms

Can the person raise both arms and keep them there?



Speech

Can the person speak clearly and understand what you say? Is their speech slurred?



Time

If you see any of these three signs, it's time to call 999.

The FAST test helps to spot the three most common symptoms of stroke. But there are other signs that you should always take seriously. These include:

- sudden weakness or numbness on one side of the body, including legs, hands or feet
- difficulty finding words or speaking in clear sentences
- sudden blurred vision or loss of sight in one or both eyes
- sudden memory loss or confusion, and dizziness or a sudden fall.
- a sudden, severe headache.

Stroke can happen to anyone, at any age. Every second counts. If you spot any of these signs of a stroke, don't wait. Call 999 straight away.

A TIA (transient ischaemic attack or mini-stroke) is the same as a stroke except the symptoms last for a short amount of time. In a TIA, a blood vessel in the brain gets blocked, but the blockage clears by itself. A TIA is a major warning sign of a stroke. So it's essential to call 999 if you have any stroke symptoms.

Where to get help and information

From the Stroke Association

Talk to us

Our Stroke Helpline is for anyone affected by a stroke, including family, friends and carers. The Helpline can give you information and support on any aspect of stroke.

Call us on 0303 3033 100, from a textphone 18001 0303 3033 100 or email info@stroke.org.uk.

Read our publications

We publish detailed information about a wide range of stroke topics including reducing your risk of a stroke and rehabilitation. Read online at stroke.org.uk or call the Helpline to ask for printed copies.

My Stroke Guide

My Stroke Guide is the stroke support tool and online community from the Stroke Association. Log on at mystrokeguide.com.

Other sources of help and information

Blood Pressure UK: Take Control Website:

www.bloodpressureuk.org/AfricanCaribbean
Tel: 020 7882 6218

Provides information for people in African and Caribbean communities.

British Heart Foundation

Website: www.bhf.org.uk

Heart Helpline: 0300 330 3311

Advice and information on heart conditions and blood pressure.

Diabetes UK

Website: www.diabetes.org.uk

Careline: 0845 123 2399

Offers support for people with diabetes.

NHS Smokefree

Website: www.nhs.uk/smokefree

Information about stopping smoking.

Sickle Cell and Young Stroke Survivors

Website: www.scyss.org

Tel: 0800 0842 809

Provides information, emotional support and monthly meetings for young people affected by stroke and sickle cell disease.

Sickle Cell Society

Website: www.sicklecellsociety.org

Tel: 0208 961 7795

Offers information about sickle cell conditions for individuals, families and teachers.

About our information

We want to provide the best information for people affected by stroke. That's why we ask stroke survivors and their families, as well as medical experts, to help us put our publications together.

How did we do?

To tell us what you think of this guide, or to request a list of the sources we used to create it, email us at feedback@stroke.org.uk.

Accessible formats

Visit our website if you need this information in audio, large print or braille.

Always get individual advice

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We rely on your support to fund life-saving research and vital services for people affected by stroke. Join the fight against stroke now at stroke.org.uk/fundraising. Together we can conquer stroke.

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