Alcohol and stroke

This guide explains how alcohol can increase your risk of stroke, and why you should think about cutting down.

How can drinking alcohol increase my risk of stroke?

Drinking large amounts of alcohol can greatly increase your risk of having a stroke. This is because alcohol contributes to a number of medical conditions that are risk factors for stroke.

**High blood pressure** is the most important risk factor for stroke, contributing to over 50% of all strokes in the UK. Drinking too much alcohol raises your blood pressure.

**Diabetes** almost doubles your risk of stroke. Drinking alcohol can change the way your body responds to insulin – a hormone that controls the sugar levels in your blood. This can lead to type 2 diabetes.

**Being overweight** increases your risk of having a stroke. Alcoholic drinks tend to be very high in calories, so regularly drinking lots of alcohol can make it more difficult to maintain a healthy weight.

**Atrial fibrillation** is affected by alcohol. Drinking excessive amounts of alcohol can trigger atrial fibrillation – a type of irregular heartbeat. Atrial fibrillation increases your risk of stroke by five times, because it can cause blood clots to form in the heart. If these clots move up into the brain, it can lead to stroke.

**Liver damage** due to too much alcohol can stop the liver from making substances that help your blood to clot. This can increase your risk of having a stroke caused by bleeding in your brain.

Can I drink alcohol after a stroke?

As well as increasing your risk of having another stroke, there are other ways alcohol can have an impact.

Drinking alcohol when you’re taking medication can have harmful effects. Too much alcohol can be particularly harmful if you are on blood-thinning medication, such as warfarin. So if you’ve been prescribed medication following your stroke, make sure you ask your GP or pharmacist whether you can drink while taking it.

If you’ve had a stroke, you may be more vulnerable to the negative effects that alcohol can have. If you’re sleeping badly, have poor balance or speech problems, alcohol could make these problems worse.

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Alcohol can also worsen mood swings and depression, which are common after stroke. It can also affect your memory and thinking.

Alcohol makes you dehydrated, so if you’re suffering from headaches, drinking alcohol could make them worse.

If your stroke was caused by bleeding on the brain (a subarachnoid haemorrhage), you may be given a drug called Nimodipine to help avoid complications. Drinking alcohol while taking Nimodipine can lead to headaches and dizziness.

Alcohol guidelines

The UK’s Chief Medical Officers’ guideline for both men and women is that:

• you are safest not to regularly drink more than 14 units per week. This is to keep health risks from drinking alcohol to a low level

• if you do drink as much as 14 units per week, it is best to spread this evenly across the week.

One-off drinking

When it comes to single drinking occasions, you can keep the short-term health risks at a low level by sticking to a few simple rules:

• limit the total amount of alcohol you drink on any occasion

• drink more slowly and alternate each alcoholic drink with water

• eat food with an alcoholic drink.

How much is 14 units of alcohol?

One unit is 10ml of pure alcohol. Because alcoholic drinks come in different strengths and sizes, units are a good way of telling how strong your drink is. It’s not as simple as one drink, one unit.

The weekly recommendation of 14 units is equivalent to:

• six pints of average strength beer or

• six 175ml glasses of average strength wine.

It can be difficult to know how many units are in one alcoholic drink. Here’s a guide to the number of units in some common drinks:

• a standard glass (175ml) of wine is 2.1 units

• a large glass (250ml) of wine is 3 units

• a pint of lower strength lager, beer or cider is 2 units

• a pint of higher strength lager, beer or cider is 3 units

• a single shot (25ml) of gin, rum or vodka is 1 unit.

How can I cut down?

First you need to work out how many units you’re drinking. You can find out by keeping a ‘drinks diary’. For a couple of weeks, at the end of each day, make a note of what you drank and count up the units. If you find that you are regularly drinking more than the recommended limit, some of the following tips may help you cut down. Ask your GP for
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advice, and look for organisations, websites and phone apps that can help you do this. See Other sources of help and information for details.

**Tips for cutting down**

**Set yourself a daily alcohol limit and stick to it.** Work out when you do most of your drinking and see if there are obvious times when you can cut back.

**Ask for support.** Tell your family and friends that you’re cutting down – they can help you reach your goals.

**Don’t drink on an empty stomach.** Drinking with food slows down the rate that alcohol is absorbed into your bloodstream.

**Have regular alcohol-free days to avoid becoming dependent on alcohol.** Alternate each alcoholic drink with a glass of water or a soft drink. This can help you cut down on the amount of alcohol you’re drinking, and avoid becoming dehydrated.

**Avoid buying rounds if you’re drinking in a group,** as this can encourage you to drink more. Try alternatives to alcohol and experiment with flavours. Try using slices of fruit to add extra zing or try non-alcoholic versions of your usual drinks. Look for fruit drinks and alcohol-free wines and beers.

**Go for smaller sizes** – so have a bottle of beer instead of a pint, or a small glass of wine instead of a large. And when you drink at home, try to pour smaller drinks than you would get in a pub or restaurant.

**Keep a range of non-alcoholic drinks that you like at home,** or try making smoothies or non-alcoholic cocktails. Or you could serve drinks that are lower in alcohol, like spritzers, cocktails or fruit punches.

**Depression is common after a stroke, and is often a reason why people drink.** If you’re feeling low or depressed, then talk to someone about it. Your doctor will be able to tell you about help and support that is available.

Many people like to drink because it helps them relax. So try to find other things that will help you do this such as exercising, relaxation sessions or complementary therapies.

**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 helpline@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.

Our Enquiry Line can support you with using My Stroke Guide: call 0300 222 5707 or email mystrokeguide@stroke.org.uk.

For more information visit stroke.org.uk
Other sources of help and information

**Alcoholics Anonymous (AA)**
Website: www.alcoholics-anonymous.org.uk  
Helpline: 0800 9177 650  
Help if you are worried about your drinking.

**Al-Anon**
Website: www.al-anonuk.org.uk  
Helpline: 020 7403 0888  
Offers advice for concerned family and friends.

**Alcohol Concern (England and Wales)**
Website: www.alcoholconcern.org.uk  
Drinkline: 0300 123 1110  
Information about alcohol-related problems.

**Alcohol Focus Scotland**
Website: www.alcohol-focus-scotland.org.uk  
Drinkline Scotland: 0800 7314 314  
Information and advice in Scotland.

**DAN 24/7 (Wales Drug and Alcohol Helpline/Cyffur iau ac Alcohol Cymru)**
Website: www.dan247.org.uk  
Helpline: 0808 808 2234  
A free, bilingual 24-hour helpline in Wales.

**Drinkaware**
Website: www.drinkaware.co.uk  
Information and tools for cutting down.

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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