Alteplase for acute ischaemic stroke

This document is about when alteplase should be used to treat people who have had an acute ischaemic stroke in the NHS in England and Wales. It explains guidance (advice) from NICE (the National Institute for Health and Clinical Excellence). It is written for people who have had an acute ischaemic stroke but it may also be useful for their families or carers or for anyone with an interest in the condition.

It does not describe acute ischaemic stroke or the treatments in detail – a member of your healthcare team should discuss these with you. You can get more information from the organisations listed on page 4.
What has NICE said?
NICE recommends alteplase as a possible treatment for people who have had an acute ischaemic stroke.

Who can have alteplase?
You should be able to have alteplase if you have had a brain scan that shows that you do not have bleeding within your brain. Your treatment should start as soon as possible and not more than 4½ hours after your stroke symptoms began.

Why has NICE said this?
NICE looks at how well treatments work, and also at how well they work in relation to how much they cost the NHS. NICE recommended alteplase because it works well and is good value for money.

Acute ischaemic stroke
A stroke is when the normal blood supply to part of your brain is cut off. This starves the cells of oxygen in the area affected, causing them to become damaged or die.

An ischaemic stroke is a stroke caused by a blood clot blocking an artery in the brain. ‘Acute’ means that the stroke started suddenly.

Alteplase
Alteplase is a drug that dissolves blood clots. It can help remove the clot that is stopping blood reaching the part of the brain affected by an acute ischaemic stroke. The sooner it is given the better the result, and it must be given within 4½ hours of the stroke symptoms starting.
It is extremely important that alteplase is not used in strokes when there is bleeding in the brain. It needs to be given in hospitals with brain-scanning facilities, so that this can be ruled out before a person has alteplase.

**What does this mean for me?**

When NICE recommends a treatment, the NHS must make sure it is available to those people it could help, normally within 3 months of the guidance being issued.

So, if you have had an acute ischaemic stroke, and your doctors think that alteplase is the right treatment for you (see ‘What has NICE said?’ on page 2), you should be able to have the treatment on the NHS.
More information
The organisations below can provide more information and support for people who have had a stroke. NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

- AntiCoagulation Europe, 020 8289 6875  
  [www.anticoagulationeurope.org](http://www.anticoagulationeurope.org)
- Different Strokes, 0845 130 7172 or 01908 317618  
  [www.differentstrokes.co.uk](http://www.differentstrokes.co.uk)
- South Asian Health Foundation, 020 3313 0677  
  [www.sahf.org.uk](http://www.sahf.org.uk)
- Stroke Association, 0303 303 3100  
  [www.stroke.org.uk](http://www.stroke.org.uk)

NHS Choices ([www.nhs.uk](http://www.nhs.uk)) may be a good place to find out more. Your local patient advice and liaison service (usually known as ‘PALS’) may be able to give you more information and support. If you live in Wales you should speak to NHS Direct Wales for information on who to contact.
About NICE

NICE produces guidance (advice) for the NHS about preventing, diagnosing and treating medical conditions. The guidance is written by independent experts, including healthcare professionals and people representing patients and carers. They consider the evidence on the disease and treatments, the views of patients and carers and the experiences of doctors, nurses and other healthcare professionals, and consider the costs involved. Staff working in the NHS are expected to follow this guidance.

To find out more about NICE, its work and how it reaches decisions, see www.nice.org.uk/aboutguidance

This document and other versions of the guidance aimed at healthcare professionals are available at www.nice.org.uk/guidance/TA264

The NICE website has a screen reader service called Browsealoud, which allows you to listen to our guidance. Click on the Browsealoud logo on the NICE website to use this service.

We encourage NHS and voluntary organisations to use text from this document in their own information about acute ischaemic stroke.

---

National Institute for Health and Clinical Excellence
Level 1A, City Tower, Piccadilly Plaza, Manchester M1 4BT; www.nice.org.uk

SEP 12