PP4: Pattern of young stroke in a tertiary care centre in Northern Sri Lanka A Arasalingam¹, T Kumanan², K Kamalakkannan¹, M Visvakumar¹, RMMP Wimalawardhana¹, V Thillainathan³, D Vijeyaratnam³

Objectives: To describe the pattern of young strokes in a tertiary care hospital in Northern Sri Lanka.

Methods: Prospective descriptive study. 401 consecutive stroke patients admitted to 8 medical wards of the Teaching Hospital Jaffna from 01/12/2014 to 31/08/2015 were studied. Stroke was diagnosed according to the WHO definition. A patient below 45 years with a stroke was defined as a young stroke.

Results: 23/396 (5.8%) were young strokes. 14/23 (60.9%) males, 9/23 (39.1%) females. 15/23 (65.2%) were infarcts and 6/23(26.1%) were haemorrhages. Frequencies of occurrence of risk factors: Past stroke 4/23 (17.4%); Family history 2/23 (8.7%), hypertension 9/23 (39.1%), diabetes 3/23 (13.0%), IHD 0/23 (0%), dyslipidaemia 2/23 (8.7%), other heart diseases 2/23 (8.7%), smoking 5/23 (21.7%), alcohol 2/23 (8.7%). Comparison between young stroke vs old were as follows: gender males 60.9% vs 50.9% (p= 0.356); stroke subtypes infarct 65.2% vs 83.1% and haemorrhage 26.1% vs 15.3% (P=0.666); Frequencies of occurrence of cardiovascular risk factors in young vs old are past history of stroke 17.4% vs 22% (p=0.542); family history of stroke 8.7% vs 11.5% (p=0.387); hypertension 39.1% vs 55.5% (p=0.123); diabetes 13.0% vs 28.7% (p=0.105); dyslipidaemia 8.7% vs 17.7% (p=0.266); ischaemic heart disease 0% vs 11.8% (p=0.080); non-ischaemic cardiac disease 8.7% vs 4.8% (p=0.416); smoking 21.7% vs 32.7% (p=0.320); alcohol 8.7% vs 23.6 % (p=0.096).

Conclusion: In the studied population there was no significant difference in stroke subtypes or risk factors between the two groups. This may be attributed to the small number of young strokes studied. Further large studies on young strokes are needed.

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