

The lived experience of anxiety and depression after diagnosing a Transient Ischemic Attack (TIA)/minor stroke: A systematic review and meta-ethnography

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Background

- 60% of people report that they have been emotionally impacted by their TIA⁹, 1/3 reporting anxiety².
- Guidance is clear on how to support people with post-stroke anxiety and depression⁷, but not for TIA.
- Studies conflate experiences between TIA and strokes, and report limited first person accounts.

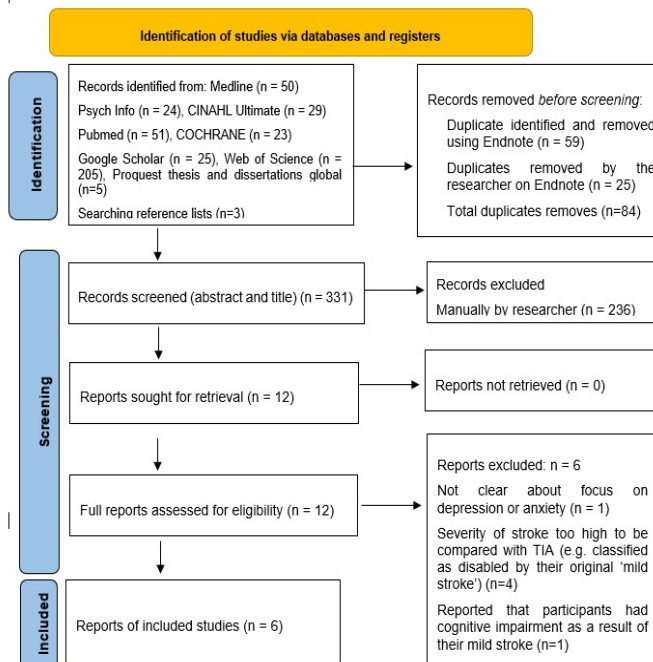
Aims

- To synthesise the lived experience of anxiety and depression post-TIA.
- To critically appraise the quality of the literature.
- To provide a third-level interpretation/line or argument synthesis to understand the experience of anxiety and depression from a first-person perspective.

Methods

- **Databases:** Medline, PsychINFO, CINAHL, Pubmed and Cochrane Library were searched August 2023.
- **Inclusion:** Adults with a diagnosis of TIA, where experiences of anxiety and depression were discussed. Qualitative studies mostly. Mixed methods included where there was evidence of qualitative data collection and analysis. Analysis must have included a secondary level interpretation.
- **Exclusion:** Studies focused on children or adults with pre-existing mental health conditions pre-TIA. Adults who had a diagnosed stroke before their TIA. Review articles, meta-analysis and quantitative only studies.
- Three reviewers supported **screening and data extraction**. Study characteristics and themes were identified. Meta-ethnography completed and two hypotheses were proposed.

Results



- **Six studies** were included in our review^{1,4,5,6,8,10}.
- Studies used thematic analysis^{1,4,6}, framework analysis¹⁰, and content analysis⁵. One study used a mixed methods repertory grid approach (with epistemology rooted in a personal construct theory)⁸.
- Studies described lived experience of anxiety and depression from **carer and relative perspectives only** rather than those diagnosed.
- No first person accounts of depression, it was **removed from synthesis** at Phase 5.
- Studies were conducted in the UK (n=3), Denmark (n=1), Germany (n=1), and USA (n=1).
- Some participants were not sure about their diagnosis⁴.

- Studies had **different focuses** e.g. shared personal constructs, experiences of barriers and recovery in African American men, long-term impacts (of a TIA), follow-up care, mastering health, coping and post-traumatic growth post-TIA.
- Reports of anxiety or depression were **not first-person accounts**.

Reciprocal synthesis formed the Line of Argument which we expressed at two hypotheses:

1. Negative appraisals of the consequences of a TIA increase anxiety and reduce health-promoting coping strategies post-diagnosis.
2. Negative appraisals of future stroke risk increase worry in people post-TIA diagnosis.

Conclusions

- Review found that anxiety is reportedly experienced up to, and over, two years after a diagnosis of TIA.
- Anxiety post-TIA may relate to illness appraisals around either context or content of their fear (e.g., consequences of a TIA or risk of a future stroke).
- Review found no first-person accounts of depression in people after they are diagnosed with a TIA.
- Future research should ask people with lived experience of a TIA (including a formal/confirmed diagnosis) directly about their experience of anxiety and depression.
- Future research should aim to explore common illness beliefs after a TIA diagnosis to investigate whether these relate to the development or maintenance of anxiety
- Review will inform the development of a mood pathway for people diagnosed with a TIA.

1. Blixen et al., (2014). Stroke Recovery and Prevention Barriers Among Young African-American Men: Potential Avenues to Reduce Health Disparities. *Topics in Stroke Rehabilitation*, 21(5), 432–442.

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4. Croot et al., (2014). Transient ischaemic attack: a qualitative study of the long term consequences for patients. *BMC Family Practice*, 15, 1–8.

5. Kindermann et al., (2023). Coping Strategies and Posttraumatic Growth Following Transient Ischemic Attack: A Qualitative Study. *Journal of Clinical Medicine*, 12(2), 575.

6. Liljehtut et al., (2022). Mastering Health Following Minor Stroke—A Qualitative Exploratory Study. *Journal of Stroke and Cerebrovascular Diseases*, 31(8), 106607.

7. National Institute for Health and Care Excellence. Stroke rehabilitation in adults. [Internet]. NICE. 2023 [cited 2024 June 30]. Available from: <https://www.nice.org.uk/guidance/ng236/chapter/Recommendations>

8. Spurgeon, et al., (2013). Subjective experiences of transient ischaemic attack: A repertory grid approach. *Disability and Rehabilitation*, 35(26), 2205–2212.

9. Stroke Association (2021). Emotional changes after a stroke. Available from: <https://www.stroke.org.uk/resources/emotional-changes-after-stroke>.

10. Turner et al., (2019). TIA and minor stroke: a qualitative study of long-term impact and experiences of follow-up care. *BMC Family Practice*, 20(1), 176.