Standardised stroke risk assessment for patients with migrainous symptoms reviewed as suspected TIA (transient ischemic attack)

Submission date	Recruitment status	[X] Prospectively registered
20/10/2024	Recruiting	☐ Protocol
Registration date	Overall study status	Statistical analysis plan
13/11/2024	Ongoing	Results
Last Edited	Condition category	Individual participant data
12/11/2025	Nervous System Diseases	[X] Record updated in last year

Plain English summary of protocol

Background and study aims

Transient ischemic attack (TIA), also known as a mini-stroke, is a common event during which people briefly experience stroke symptoms including loss of movement, sensation, speech and vision. There is a risk of permanent stroke during the next 90 days which can be reduced by urgent medical treatment. However, being certain of the diagnosis is challenging because other conditions can produce identical symptoms. The commonest condition which can produce the same symptoms is migraine, and people suffering migraine are not at high risk of stroke. Tests have a limited role in differentiation between TIA and migraine and uncertainty about the correct diagnosis can lead to missed opportunities to prevent stroke if TIA is not recognised, and overtreatment of people with migraine.

This research study aims to develop an assessment which will help clinicians predict the risk of stroke when reviewing patients presenting with symptoms which could be caused by both TIA and migraine.

Who can participate?

Adults (aged 40 years and over) who present with symptoms which could be caused by both TIA and migraine.

What does the study involve?

Clinical information will be collected from people who agree to take part. This will include presenting symptoms, investigations and treatments, and what happens to health over the next 90 days. This information will be analysed mathematically to develop the stroke risk assessment.

What are the possible benefits and risks of participating?

There are no direct benefits to individuals who take part in the study, but it is hoped that care for future patients will be improved as a result of this research.

Where is the study run from? Newcastle University (UK)

When is the study starting and how long is it expected to run for? August 2024 to July 2027

Who is funding the study?
NIHR Research for Patient Benefit Programme (UK)

Who is the main contact?

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Contact information

Type(s)

Public, Scientific

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Additional identifiers

Integrated Research Application System (IRAS) 318870

Central Portfolio Management System (CPMS) 53619

Study information

Scientific Title

Standardised stroke risk assessment for patients with MigrAinous symptoms Reviewed as suspected TIA

Acronym

SMART

Study objectives

The aim of the study is to define the risk of stroke for people with migrainous symptoms reviewed as suspected transient ischemic attack (TIA) and develop a stroke risk assessment tool that could promote standardisation of care.

Ethics approval required

Ethics approval required

Ethics approval(s)

approved 11/09/2024, London - Stanmore Research Ethics Committee (2nd Floor, 2 Redman Place, Stratford, London, E20 1JQ, United Kingdom; +44 207 1048258; stanmore.rec@hra.nhs.uk), ref: 24/PR/0977

Study design

Observational cohort study

Primary study design

Observational

Study type(s)

Other

Health condition(s) or problem(s) studied

Suspected TIA or migraine.

Interventions

This research project is an observational cohort study involving patients with symptoms which could be caused by both TIA and migraine. At study entry, data will be collected about presenting symptoms, investigations and treatments. After 90 days, data will be collected about further episodes of migraine or TIA, and whether a stroke has occurred.

Intervention Type

Other

Primary outcome(s)

Stroke occurrence determined from medical record information and independent adjudication at 90 days

Key secondary outcome(s))

Clinical features, investigations and treatments determined from medical record information at baseline

Completion date

Eligibility

Key inclusion criteria

- 1. Adults with migrainous symptoms reviewed as suspected TIA by a TIA/stroke service
- 2. Initial review conducted within 1 week of last symptoms
- 3. Following initial review, a specialist clinician symptom-based diagnosis is either possible migraine or possible TIA with migrainous symptoms
- 4. At least 40 years old
- 5. Able to provide informed research consent

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Mixed

Lower age limit

40 years

Upper age limit

99 years

Sex

All

Total final enrolment

0

Key exclusion criteria

- 1. Suspected/confirmed TIA without any migrainous features
- 2. Clear alternative diagnoses after initial review (e.g., seizures)
- 3. Previous stroke
- 4. Referral already made or planned for surgical intervention to prevent stroke (e.g., carotid endarterectomy or atrial septal defect closure)
- 5. Currently under secondary care review for the same neurological symptoms
- 6. Cognitive difficulties preventing consent and/or description of subjective symptoms
- 7. Life expectancy < 90 days
- 8. Study day 90 follow-up is not possible (e.g., resident outside of the service boundary)

Date of first enrolment

18/11/2024

Date of final enrolment

30/11/2026

Locations

Countries of recruitment

United Kingdom

England

Study participating centre Northumbria Healthcare NHS Foundation Trust

North Tyneside General Hospital Rake Lane North Shields Newcastle upon Tyne England NE29 8NH

Sponsor information

Organisation

Northumbria Healthcare NHS Foundation Trust

ROR

https://ror.org/01gfeyd95

Funder(s)

Funder type

Government

Funder Name

Research for Patient Benefit Programme

Alternative Name(s)

NIHR Research for Patient Benefit Programme, Research for Patient Benefit (RfPB), The NIHR Research for Patient Benefit (RfPB), RfPB

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are available from the corresponding author on reasonable request.

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IPD sharing plan summary

Available on request

Study outputs

Output type Details Date created Date added Peer reviewed? Patient-facing?

Participant information sheet Participant information sheet 11/11/2025 11/11/2025 No Yes