TPA for Ischemic Stroke

Clot Buster Medicine:
Tissue Plasminogen Activator

Ischemic stroke occurs when you have a blood clot that stops blood flow to part of your brain. It is the most common type of stroke. Brain cells start to die, so improving blood flow as soon as possible will decrease the chance of major problems.

About TPA
A clot buster medicine, TPA, also known as alteplase or Activase, is a treatment for ischemic stroke. The medicine is given through an IV to break up the clot to restore blood flow and reverse or reduce stroke effects. This medicine should be started within 4 1/2 hours of the start of stroke signs. The sooner the medicine is started, the more likely the chance for improvement.

Benefits and risks of TPA
Chances of a good recovery are increased with TPA, but not guaranteed.

- 39 out of 100 people treated with TPA had little or no disability after 3 months, compared to 26 out of 100 people who were not treated.
- 32 out of 100 people treated with TPA in the first 3 hours after stroke had better outcomes and 3 out of the 100 had a worse outcome, compared to no treatment.
- **Bleeding** into the brain is the most common risk of this treatment. For every 100 people treated with TPA, 6 people may have bleeding to cause more injury, compared to 1 person out of 100 having bleeding who did not have TPA.
- Less common risks include: bleeding in other parts of the body and an allergic reaction to TPA.

TPA is not right for all
Based on each person’s medical history, lab results, and exam, the doctor will determine if TPA is a possible treatment for stroke.

- Your doctor will talk to you about other risks you may have because of your age or other health conditions.
- If you had another type of stroke, called a hemorrhagic stroke, TPA is not used as a treatment.