



Large Artery Atherosclerosis

If **50-99% stenosis** aspirin 325 daily (no warfarin): *WASID trial*

If **70-99% stenosis** aspirin 325 daily + 90 days clopidogrel: *SAMMPRIS trial*

Cardioembolic

Afib or flutter use direct oral anticoagulants: *SPAF trial*

Mechanical valve use aspirin + warfarin: *GELIA study*

LV Thrombus use warfarin for ~ 3 months

Secondary Stroke Prevention

Anticoagulation and anti platelet recommendations

Lifestyle Modifications

Reduce or cease **smoking, IV drug use, and alcohol use** >2 drinks/day (men) or >1 drinks/day women

Engage in **aerobic physical activity** for at least 10 mins 4x a week or 20 mins 2 x a week: *SAMMPRIS trial*

Other Non-cardioembolic (not receiving acute thrombolysis)

In **general**, antiplatelet is preferred to anticoagulation to prevent stroke while minimizing risk of bleeding: *WARRS study*

If **NIH <3 OR ABCD >4**, 21-90 days aspirin + clopidogrel (DAPT) followed by single anti-platelet therapy (SAPT): *CHANCE and POINTS trials*

If **NIH >3 OR ABCD <4**, single anti-platelet therapy is appropriate with either clopidogrel, aspirin, or aspirin- dipyridamole: *PROFESS, ESPRIT, CAPRIE trials*

Target BP of <130/80, LDL-C <70mg/dL, and HbA1c <7%: *PAST-BP, TST, and DCCT trials*