AuSCR Research Task Group approved projects

Title	**Understanding the prevention and long-term management of stroke by general practitioners**
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Submission date	28 May 2020
AuSCR role	Data provision
Approved	17 August 2020
Status	In progress
Summary	Survivors of stroke often have a range of impairments and are at an increased risk of subsequent vascular events. Many survivors have pre-existing comorbidities which impact their health. In Australia, there are clinical guidelines for the prevention and long-term management of stroke, and general practices are well placed to provide the care recommended in these guidelines. However, it remains unclear whether the current treatment provided by general practitioners (GPs) is optimal for the prevention and management of stroke in the community. For the first time in Australia, we will undertake person-level linkages between the Australian Stroke Clinical Registry (AuSCR) and the Population Level Analysis and Reporting (POLAR) general practice datasets. The AuSCR collects data on demographics, aspects of evidence-based acute care provided in hospital, provision of medications and care plan at discharge, and living situation and health status at 90-180 days post-stroke. On the other hand, the POLAR dataset includes detailed patient-specific information before and after stroke, including data on risk factors and related testing such as biometrics (body mass index, blood pressure, lipid levels and glucose levels), comorbidities, pathology and imaging reports, medication prescribing, and processes of care provided. These new data linkages and merged records will provide robust opportunity to unearth novel insights on evidence-practice gaps in managing risk factors and comorbidities for the primary prevention of stroke. We will also provide detailed and essential new evidence about the care provided by GPs to patients with stroke. Findings from this study could help inform strategies for the general practices to: better individualise care for the prevention of stroke; develop processes of care indicators for monitoring the quality of care after stroke; inform the development of interventions for improving care management and patient recovery after stroke; and ultimately inform policy on effective prevention and long-term management of stroke in the community.