

Person—cerebral stroke due to vascular disease (history), code N

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Person—cerebral stroke due to vascular disease (history), code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Cerebral stroke due to vascular disease (history)
METEOR identifier:	270355
Registration status:	Health , Standard 01/03/2005
Definition:	Whether the individual has had a cerebral stroke due to vascular disease, as represented by a code.
Data Element Concept:	Person—cerebral stroke due to vascular disease
Value Domain:	Cerebral stroke due to vascular disease code N

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N	
Maximum character length:	1	
	Value	Meaning
Permissible values:	1	Cerebral stroke - occurred in the last 12 months
	2	Cerebral stroke - occurred prior to the last 12 months
	3	Cerebral stroke - occurred both in and prior to the last 12 months
	4	No history of cerebral stroke due to vascular disease
Supplementary values:	9	Not stated/inadequately described

Data element attributes


Collection and usage attributes

Collection methods:	Obtain this information from appropriate documentation or from the patient.
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Source and reference attributes

Submitting organisation:	National Diabetes Data Working Group
Origin:	National Diabetes Outcomes Quality Review Initiative (NDOQRIN) data dictionary

Relational attributes

Related metadata references:	Is re-engineered from  Cerebral stroke due to vascular disease - history, version 1, DE, NHDD, NHIMG, Superseded 01/03/2005.pdf (16.3 KB) <i>No registration status</i>
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DSS specific information:

Cerebral stroke is a medical emergency condition with a high mortality rate, which is often recognised as a vascular complication of diabetes mellitus.

The risk of stroke in patients with diabetes is at least twice that in non-diabetic patients according to Meigs et al. (Intern Med. 1998). Diabetes may increase actual stroke risk up to fivefold by increasing atheromatous deposits. Patients with diabetes who have a first stroke have 5-year survival rate reduced to 50% in comparison to non-diabetic stroke patients. The duration of diabetes clearly influences the severity of vascular disease. Atherosclerosis is more common and more severe earlier in the course of diabetes. In large arteries, plaque occurs from direct endothelial membrane injury, adverse balance of lipoproteins, and hyperinsulinemia (JAMA 1997). Small vessels are also affected more frequently than they are in non-diabetic stroke, resulting in an increased risk of lacunar stroke.

References:

Meigs J, Nathan D, Wilson P et al. Metabolic risk factors worsen continuously across the spectrum of non-diabetic glucose tolerance. Ann Intern Med. 1998; 128:524-533

Gorelick PB, Sacco RL, Smith DB, et al. Prevention of a first stroke: a review of guidelines and a multidisciplinary consensus statement from the National Stroke Association. JAMA 1999; 281:1112-1120

[Diabetes \(clinical\) NBPDS](#)
[Health](#), Standard 21/09/2005

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