

Understanding cerebral amyloid angiopathy (CAA)

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Information for Patients

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What is CAA?

Cerebral amyloid angiopathy (CAA) happens when abnormal proteins called ‘amyloid’ build up in the walls of small blood vessels in the brain. This build-up can cause the vessels to become fragile, leading to large bleeding or smaller (micro) bleeds in the brain. CAA is found more often in older people and in those with memory problems.

Causes and risk factors

The exact cause of CAA is still unknown. Conditions like Alzheimer’s disease and high blood pressure can increase the risk. CAA is more common in older adults and in people of White ethnicity. CAA is not typically an inherited disease. But there are rare familial forms of CAA where there is a family history of CAA or early onset memory problems.

What are the symptoms?

Not everyone with CAA has symptoms. Symptoms depend on the extent of the damage to the blood vessels in the brain. Symptoms happen slowly with it suddenly getting worse if there is a brain bleed. Common symptoms include:

- sudden weakness or numbness on one side of the body
- speech or language difficulties
- loss of coordination or balance
- seizures, headaches, visual disturbances
- confusion or changes in personality
- progressive memory problems

Patients are often diagnosed following an admission to the hospital with a stroke.

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or call 111 for non-emergency medical advice**

Visit www.uhleicester.nhs.uk for maps and information about visiting Leicester’s Hospitals.
To give feedback about this information sheet, contact uhl-tr.informationforpatientsmailbox@nhs.net

How is CAA diagnosed?

CAA is diagnosed through a combination of physical examination, cognitive testing, and brain scans. The diagnosis is often based on clinical patterns and imaging findings. The only way to make a certain diagnosis is to do a brain biopsy. A biopsy involves taking a sample of the brain tissue. However a biopsy is usually not required, as clinical diagnosis is adequate for management.

Treatment for CAA

There is currently no specific treatment for CAA. We focus on management of the condition. We do this by reducing risk factors and preventing any further bleeding:

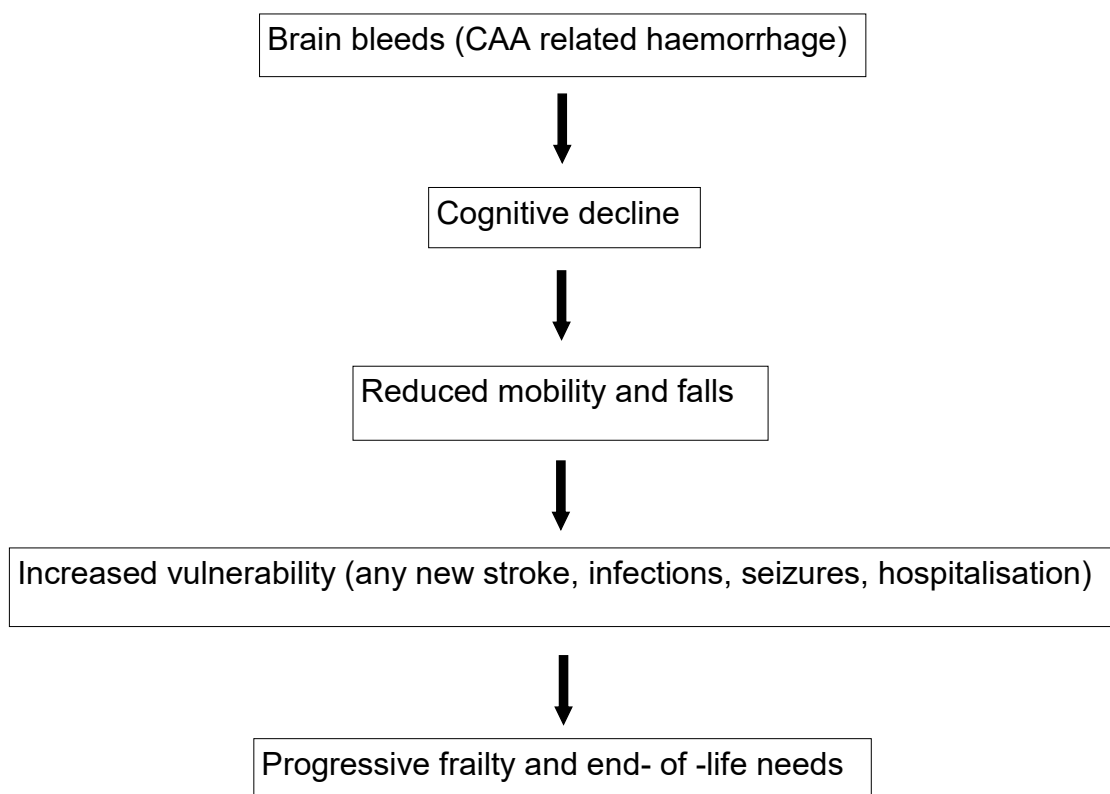
- Keep blood pressure controlled (below 130/80 mmHg if possible).
- Avoid blood thinning medications unless prescribed.
- For memory problems, cholinesterase inhibitors (memory medications) may help.

Living with CAA

Many people live for years with CAA. Small lifestyle changes can make a big difference. Try to:

- Reduce the risk of falls and head injury.
- Maintain healthy habits. Stay active, stop smoking, and limit alcohol.

Frailty cycle for CAA patients





In summary

- CAA is common.
- CAA causes bleeding and 'blockage' type strokes. This makes it difficult to manage.
- People with CAA are at risk of adverse effect of medication. Please ensure when medication is prescribed that the prescriber is aware of your condition.
- People with CAA are at increased risk of hospital admission because of the increased risk of recurrent stroke, cognitive impairment and medical complications.

Where can I get more information?

Stroke Association

stroke.org.uk/stroke/manage-risk

0303 3033 100

Different Strokes

www.differentstrokes.co.uk

0845 130 7172

Alzheimer's Society

www.alzheimers.org.uk

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
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