

TIA (TRANSIENT ISCHEMIC ATTACK)

What is a TIA?

A TIA is a "Mini-Stroke" of brief duration that produces no lasting damage. It is considered to be a warning sign that a full blown stroke may occur in the future unless it is prevented.

Anyone who has had one or more TIA's is much more likely in future to have a stroke than someone who hasn't, and that is the reason that a TIA is so scary from an underwriting point of view.



By Donald V. Victorson, CLU

What causes a TIA?

A blood clot clogs an artery, then dissolves, consequently the brain temporarily fails to receive the blood it needs. Unlike a stroke, when the TIA is over there is no permanent damage to the brain due to the brief duration of the TIA which typically lasts less than five minutes.

TIA can also be caused by:

- Atrial fibrillation. (Irregular heart beat)
- Blood disorders.
- Blood vessel problems.
- Inflammation of the arteries.
- Spasm of the small arteries in the brain.

What are the Symptoms of a TIA?

- Sudden numbness or weakness of the face, arm, or leg, usually on only one side of the body.
- Sudden confusion, difficulty speaking or comprehending.
- Sudden vision problems in one or both eyes.
- Sudden dizziness, loss of balance, or difficulty walking.
- Sudden severe headache with no likely cause.

The short duration of symptoms and lack of permanent brain injury is the main difference between a TIA and a Stroke.

In order to evaluate the prospect's insurability it is necessary for you to ask the following important questions:

Has the client had more than one TIA?

A single TIA is much less serious than multiple TIA's. Multiple TIA's indicate a much higher likelihood of a subsequent stroke.

When was the last TIA?

Generally, most underwriters feel they must wait at least 6 to 12 months following a TIA before they can consider making an offer. The exact date of the last event is the starting point for risk evaluation.

Does the client smoke or have any history of diabetes, hypertension, or hypercholesterolemia?

The major risk factors for TIA are a history of Smoking, Diabetes (whether insulin dependent or not), hypertension, and

CORRECTION

It has come to our attention that there was a typographical error in the May issue of "The Bulletin". Specifically, a word was omitted from the first line of the third paragraph on page 21 of the magazine under the heading "Here's the problem".

The corrected version is provided below. Please accept our apologies.

"Not enough licensed producers (and field managers) who are making a living in this wonderful profession (with a client base) support their own advocacy organization with their membership dollars and membership numbers. We are one of the only trade associations in this industry (or in any other profession for that matter) that does not have the automatic, inherent and robust support of its own natural constituents."

elevated cholesterol. It is important to know if these risk factors are present. Poorly controlled diabetes, hypertension, and cholesterol combined with smoking in clients who have experienced a TIA generally means that the client is severely sub-standard if not uninsurable.

Is there a history of Cardiac Arrhythmia, Atrial Fibrillation, or Heart Valve Disease?

Irregular Heart Beat, or Disease of the Heart Valves can create clotting events that lead to TIA and strokes. It is important to know if these risk factors are present in the client's medical history.

What current medications is the client taking?

Anti-Coagulants such as Aspirin, Persantine, or Coumadin are usually prescribed following a TIA in order to reduce clotting.

Underwriting Prognosis

Clients who have suffered a single episode of TIA are generally found to be insurable on a moderately sub-standard basis following proper medical care and a reasonable period of recovery.

Those who have experienced multiple TIA's, or who are still occasionally experiencing a TIA will frequently be uninsurable on any basis.

Guaranteed Issue Life Insurance may be the only option in these cases. ❖

He Ain't HEAVY...

...He's Our Standard!



How do you know if your policy prospect will be a standard risk? Simply consult the "Standard Build" chart below right. For example, someone 5 feet tall, weighing 179 would be standard (provided there are no other impediments).

At Victorson Associates, just because your client is overweight doesn't mean he's sub-standard.

Victorson Associates is a leader in the Impaired Risk Market because of our expertise in underwriting difficult cases and our selection of Term, Universal and Whole Life from competitive carriers. Our Sub-Standard Underwriting capability adds up to make us The Brokerage Agency you should look into.

Standard Builds (ages 15 & Up)

Height	Mod. Weight	Male/Female	Height	Mod. Weight	Male/Female
4'8"	180		5'10"	264	
4'9"	193		5'11"	271	
4'10"	197		6'0"	279	
4'11"	200		6'1"	287	
5'0"	205		6'2"	295	
5'1"	210		6'3"	303	
5'2"	214		6'4"	311	
5'3"	219		6'5"	319	
5'4"	225		6'6"	328	
5'5"	231		6'7"	334	
5'6"	237		6'8"	342	
5'7"	243		6'9"	350	
5'8"	250		6'10"	358	
5'9"	257		6'11"	366	

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VICTORSON ASSOCIATES, INC

321 Middle Country Road
P.O. Box 863
Smithtown, NY 11787
631-265-7456 • Fax: 631-265-7054
www.victorson.com

Victorson Associates specializes in underwriting Sub-Standard difficult cases.

We do not walk on water, but we can usually turn rejections into commissions.

Donald V Victorson CLU, Chairman
Victorson Associates, Inc.
Established 1961
321 Middle Country Road
Smithtown, NY 11787
516 265-7456