

Type of hospital doesn't impact thrombolysis outcomes in stroke

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(HealthDay)—For older adults with acute stroke, treatment with

intravenous thrombolysis (IVT) is associated with similar outcomes, irrespective of hospital characteristics, according to a study published online June 2 in the *Journal of the American Geriatrics Society*.

Francisco Purroy, M.D., Ph.D., from the Hospital Universitari Arnau de Vilanova de Lleida in Spain, and colleagues conducted a prospective registry study involving 3,231 individuals with stroke treated only with IVT (36.8 percent aged ≥ 80 years). At three months, the authors evaluated symptomatic intracranial hemorrhage, mortality, and favorable outcome according to hospital characteristics. Hospitals were classified as comprehensive stroke centers (CSCs), primary stroke centers (PSCs), and community hospitals operating a telestroke system (TS).

Among participants aged 80 years and older, the researchers found that 90-day mortality was 23.2 percent, and 38.7 percent had [favorable outcomes](#) at three months. Overall, 4.7 percent of subjects had symptomatic intracranial hemorrhage (SICH). There was no significant difference in risk factors between participants treated in different types of hospitals, nor was there any difference in basal stroke severity measured according to National Institute of Health Stroke Scale scores. Similar outcomes were achieved by the different types of hospitals, although the proportion of SICH was significantly higher at TS and PSC hospitals than at the CSC (6.3 and 6.3, respectively, versus 3.2 percent).

"Older adults with [acute stroke](#) treated with IVT had similar outcomes regardless of hospital characteristics," the authors write.

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