

Heart doctors call for permission to provide therapy to stroke patients

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Heart doctors from the European Society of Cardiology (ESC) Council on Stroke are calling on national health authorities for permission to provide stroke patients with mechanical thrombectomy, a life-saving treatment for acute ischaemic stroke, in regions where there is a lack of trained specialists. Details of the proposal are presented today at EuroPCR 2018.

"We have evidence that after a short period of training on the procedure, interventional cardiologists treating acute ischaemic stroke achieve the same results as traditional interventional neuroradiologists," said Professor Petr Widimsky, Chair of the ESC Council on Stroke.

Acute ischaemic stroke is a severe form of the condition where a blood vessel to the brain becomes blocked. It accounts for up to four in five strokes, or over one million cases in Europe each year.

Without treatment most patients die or are severely disabled and permanently bedridden. Even with clot-busting drugs, 75% of patients die or are severely disabled. With [mechanical thrombectomy](#), a procedure to physically remove the clot and restore blood flow to the brain, about half of patients survive and function normally. If performed within two to three hours of symptom onset, the rate of survival with normal neurological function rises to more than 70% of patients.

In Europe, mechanical thrombectomy is currently provided by interventional neuroradiologists, but there is a severe shortage of these

specialists. Even countries with the most specialists, such as Germany, the Netherlands and the Czech Republic, only have sufficient numbers to treat around one-third of acute ischaemic stroke patients. In some other countries, less than 1% of acute ischaemic [stroke patients](#) can be treated.

Professor Widimsky said: "There are interventional cardiology units in all countries in Europe and the Americas, and in most other continents. The equipment for mechanical thrombectomy is available; it's the trained specialists to perform the procedure that are lacking. This situation could be solved by training cardiologists to perform mechanical thrombectomy."

The ESC Council on Stroke is proposing that interventional cardiologists receive three months of training on how to do mechanical thrombectomy, rather than the typical two years required for other physicians. "Many interventional cardiologists routinely perform stenting of the carotid arteries so three months of training is sufficient to learn intracranial mechanical thrombectomy," said Professor Widimsky. "It is up to health authorities in each country to decide if they will allow this."

The proposals are being put forward by the ESC Council on Stroke and the European Association of Percutaneous Cardiovascular Interventions, a branch of the ESC.

Provided by European Society of Cardiology

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