

Ultra-early neurological deterioration common in stroke

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(HealthDay)—Ultra-early neurological deterioration (U-END) occurs in

one in eight ambulance-transported patients with acute cerebrovascular disease and is associated with significantly worse outcomes, according to a study published online July 23 in *JAMA Neurology*.

Kristina Shkirkova, from the University of California in Los Angeles, and colleagues performed an exploratory analysis of the prehospital, randomized Field Administration of Stroke Therapy-Magnesium Trial involving 315 ambulances and 60 hospitals receiving [stroke](#) patients. The authors assessed neurological deterioration among 1,690 consecutively enrolled patients with suspected [acute stroke](#) who were transported by ambulance within two hours of stroke onset.

The researchers found that a final diagnosis of acute cerebral ischemia occurred in 73.2 percent of patients, intracranial hemorrhage in 22.8 percent of patients, and neurovascular mimic in 4 percent of patients. From prehospital to early post-arrival, U-END occurred in 11.8 percent of [patients](#), more often among those with [intracranial hemorrhage](#) than those with acute cerebral ischemia (30.8 versus 6.1 percent). U-END patterns include: prehospital U-END without early recovery (3.1 percent), stable prehospital course but early emergency department deterioration (5.1 percent), and continuous deterioration in both prehospital and early emergency department phases (2.8 percent). U-END was associated with worse three-month outcomes.

"Averting U-END may be a target for future prehospital therapeutics," the authors write.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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