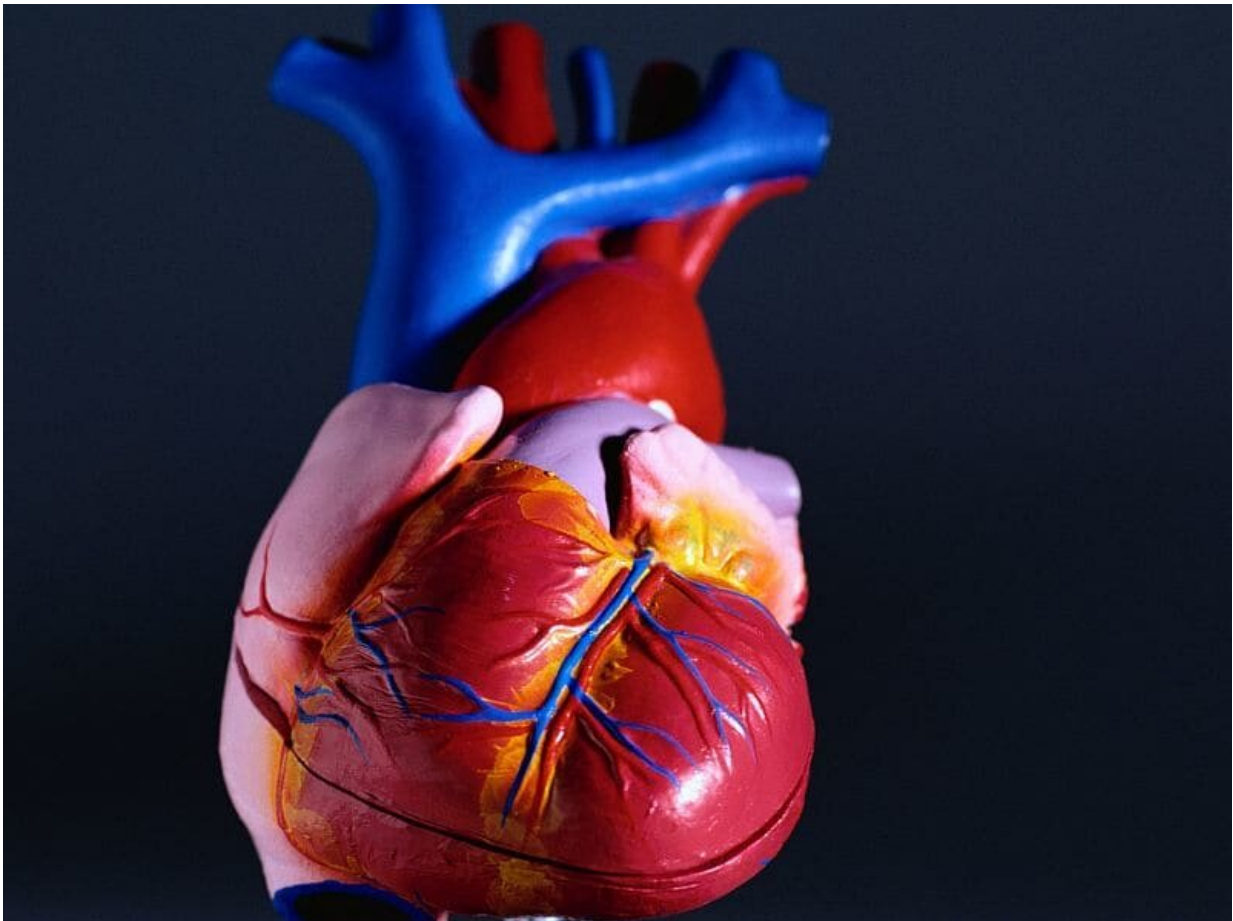


Guidelines address PFO closure for secondary stroke prevention

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(HealthDay)—In a Society for Cardiovascular Angiography and

Interventions expert consensus statement published online March 21 in *Catheterization and Cardiovascular Interventions*, recommendations are presented for patent foramen ovale (PFO) closure for the secondary prevention of recurrent stroke.

Eric Horlick, M.D., from the University Health Network in Toronto, and colleagues noted that randomized controlled trials have demonstrated the superiority of PFO device closure over medical therapy. With this in mind, the authors developed guidelines for PFO closure for secondary prevention of paradoxical embolic stroke.

The authors note that training of new proceduralists needs to be conducted in a controlled, systematic fashion to ensure optimal results in terms of safety and efficacy as the use of PFO closure increases. Physicians performing PFO closure should understand the etiologies of ischemic stroke, clinical syndromes that mimic stroke, [stroke](#) classification systems, and indications and contraindications for PFO [closure](#). The technical skill set required for proceduralists should include use of various imaging modalities; manipulation of intracardiac catheters, wire and sheaths, and balloons; techniques for vascular access management; use of endovascular retrieval devices; and the ability to recognize and treat complications. Institutional requirements; multidisciplinary collaboration, including assessment by both a cardiologist and a neurologist; and quality assessment measures are also addressed.

"The resulting document is pragmatic and aims to inform and assist clinicians and institutions in maintaining an evidence-based, patient-centered approach to the care of this patient population with a focus on quality and safety," Horlick said in a statement.

More information: [Abstract/Full Text](#)

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