

More stroke patients could experience benefits from thrombectomy, studies show

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New research presented today at the Society of NeuroInterventional Surgery's (SNIS) 19th Annual Meeting shows that thrombectomy, a minimally invasive procedure typically reserved for treating a severe type of stroke known as large vessel occlusions (LVO), achieves positive outcomes for individuals experiencing other types of strokes. Expanding

eligibility for this lifesaving treatment will give more patients a better opportunity for a successful recovery and rehabilitation after stroke.

In the first study, "Technical and Clinical Outcomes in Distal Occlusion Thrombectomy by Frontline Technique—A Multicenter Study," researchers analyzed outcomes in nearly 7,500 patients undergoing thrombectomy for different types of stroke at 32 centers across the United States. They found that clinical outcomes for distal vessel occlusions (DVO) are comparable to those experiencing LVO. DVOs are clots located in [small arteries](#) higher up in the brain and are not typically treated using thrombectomy.

"Thrombectomy has changed the way [medical professionals](#) care for patients with stroke," said Ali Alawieh, MD, Ph.D., lead author on the study and neurosurgery resident at Emory School of Medicine. "If more stroke patients can experience this lifesaving treatment, we want to ensure that happens."

In the second study, "Real-world Outcomes of Endovascular Thrombectomy for Treatment of Acute Basilar Artery Occlusion in the United States: Results of the BARONIS Study" nearly 4,000 patients experiencing an acute basilar artery occlusion—which occurs when the basilar artery is blocked—were treated with thrombectomy. This artery is the main artery at the back portion of the brain. It carries oxygen to the blood in the brainstem, cerebellum and occipital lobes. There has been little research about the effectiveness of thrombectomy when it comes to this type of stroke, but the results showed patients who underwent this procedure achieved more favorable outcomes.

"Patients who receive a thrombectomy increase their life expectancy by five years compared to patients who do not. For every 10 minutes saved in getting a thrombectomy, patients experience an additional month of life free from disability. Furthermore, basilar artery occlusion stroke is

associated with 40% mortality and of the survivors, 80% have severe deficits," said lead author Fawaz Al-Mufti, MD, interventional neurologist at Westchester Medical Center and assistant dean for GME Research at New York Medical College. "This is especially true for basilar artery occlusion [stroke patients](#) with high NIHSS, where endovascular thrombectomy portends a mortality and disability benefit."

More information: Conference: www.snisonline.org/snis2022/

Provided by Society of NeuroInterventional Surgery

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