

New studies show more stroke patients can benefit from thrombectomy

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Access to thrombectomy should be expanded to include more patients who have experienced large vessel occlusion stroke, offering them a better chance of regaining essential cognitive and physical functions, according to a commentary recently published online in the *Journal of NeuroInterventional Surgery (JNIS)*.



"Large Core Stroke Thrombectomy: Paradigm Shift of Futile Exercise?" cited the results of three randomized <u>clinical trials</u> that show <u>mechanical thrombectomy</u> significantly improved the functional outcomes and likelihood of independence in patients who presented to a hospital with larger amounts of irreversible damage (infarct core) prior to the procedure. In these recent trials, patients were up to three times more likely to have a positive outcome with <u>thrombectomy</u> than those without.

Earlier trials of thrombectomy had shown dramatic benefit in those patients with small and medium sized infarct cores, but possible benefit of thrombectomy on larger core patients was unknown. However, the three latest trials (RESCUE Japan LIMIT, SELECT2 and ANGEL-ASPECT) evaluated individuals with a sizeable amount of core damage and randomized them to either thrombectomy or medical management. Results show there is a clear benefit of thrombectomy for these patients, who likely would have been bedridden without the treatment.

J Mocco, MD, MS, SNIS President and the Kalmon D. Post Professor of Neurosurgery at the Icahn School of Medicine and Director of the Cerebrovascular Center at Mount Sinai, believes that the results of these publications will lead to more thrombectomy transfers, simpler imaging for identifying candidates, and most importantly, a cumulative reduction in the degree of stroke disability and burden to patients and their loved ones.

"One of the biggest concerns patients and their families have about stroke is that they will be bedridden and fully dependent on others for care. Now we have an opportunity to improve functional independence for even the most severe stroke <u>patients</u>," said Dr. Mocco. "These findings further support the notion that every patient should be triaged to the most appropriate care so they are given a chance to survive and thrive."



More information: Michael Chen et al, Large core stroke thrombectomy: paradigm shift or futile exercise?, *Journal of NeuroInterventional Surgery* (2023). DOI: 10.1136/jnis-2023-020219

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