

Study finds Hispanic people receive lowerquality thrombectomies than white people

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Erica Jones, M.D., M.P.H., Assistant Professor of Neurology. Credit: UT Southwestern Medical Center

A study involving UT Southwestern neurology researchers found lowerquality outcomes for Hispanic ischemic stroke patients who receive



endovascular thrombectomies than for comparable white and Black patients.

Outcomes were similar between Black and white ischemic <u>stroke</u> patients who receive endovascular thrombectomies, the researchers determined. Ischemic strokes block or narrow an artery leading to the brain.

The findings, published in the *Journal of Stroke and Cerebrovascular Diseases*, add to the body of knowledge on improving stroke treatment in underserved groups. Previous studies have identified racial disparities in stroke treatments. This study involving more than 660 patients in the Houston area focused on thrombectomies, the surgical procedure to remove blood clots from arteries and veins.

Ischemic stroke is the fifth leading cause of death in the United States. Of all strokes 87% are ischemic. A 2017 study found that thrombectomy treatment within 24 hours after an acute stroke can result in a 73% lower risk of disability.

"This new study identifies populations that we should focus on in future research to gain a better understanding of the root causes of these disparities. With understanding, targeted interventions can be developed to improve access to the best outcomes for all stroke patients," said the study's lead author, Erica Jones, M.D., M.P.H., Assistant Professor of Neurology.

The American Heart Association and the American Stroke Association certified the UT Southwestern is an Advanced Comprehensive Stroke Center, which is part of the Peter O'Donnell Jr. Brain Institute. UT Southwestern has earned High Performing recognition for treatment of strokes from *U.S. News & World Report*, placing it among the best hospitals for stroke care in the U.S.



Dr. Jones is a member of the *Stroke* Editor Training Program as well as the American Academy of Neurology, the American Heart Association, and the Society of Vascular and Interventional Neurology.

Her <u>study</u> builds on research Dr. Jones <u>published</u> in 2020, which found that among stroke patients under age 50, there was a higher prevalence of modifiable risk factors among Black and Hispanic patients as well as a decreased likelihood to have good early functional outcomes after ischemic stroke. The modifiable risk factors included diabetes, hypertension, and heart failure.

More information: Erica Jones et al, Racial and Ethnic Disparities in Functional Outcome after Thrombectomy: A Cohort Study of an Integrated Stroke Network, *Journal of Stroke and Cerebrovascular Diseases* (2021). DOI: 10.1016/j.jstrokecerebrovasdis.2021.106131

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