

Stroke patients heading directly to endovascular centers could get treatment faster

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Stroke patients who go directly to an endovascular center could receive treatment 99 minutes earlier, according to a new study presented today at the Society of NeuroInterventional Surgery's (SNIS) 13th Annual Meeting.

Time is critical when it comes to ischemic [stroke](#) treatment: Patients need to receive certain treatments within six hours to maximize their chances of the best possible outcome. Systems of Care Efficiency and Interhospital Transfer Delays in the STRATIS Registry assessed the real world delivery to care, specific causes of treatment delays and time lost due to interhospital transfers. The study also calculated a hypothetical "bypass" scenario where stroke [patients](#) were taken to an endovascular center instead of the nearest hospital.

For patients that received IV tPA treatment before undergoing endovascular treatment, median alarm-to-treatment times between direct patients vs. transfer patients were 169 and 268 minutes, respectively.

"Our study found that [treatment](#) is delayed by about an hour and a half if patients must be transferred from one hospital to another. Based on earlier studies, that means that the chance of a good outcome for those patients is reduced by 30 to 40 percent," said Dr. Michael Froehler, lead author of the study and Director of the Cerebrovascular Program at Vanderbilt University Medical Center.

According to Dr. Froehler, the results also suggest that in some circumstances, patients might be better off taking a longer drive to a hospital if it means arriving at a neurointerventional-ready facility.

"We are committed to improving patient outcomes and organizing more effective systems of care across the country," said Donald Frei, president of SNIS. "This study shows us we have to improve our processes for getting patients to the right center directly. We need to implement this valuable insight so we can give patients the timely response they deserve for the best possible outcomes."

To implement the critical observations of studies similar to this one, SNIS earlier this year launched "Get Ahead of Stroke"—a campaign focused on organizing stronger stroke systems of care nationwide. The campaign seeks to enact legislative change in all 50 states requiring emergency medical services (EMS) to take ischemic [stroke patients](#) to neurointerventional-ready hospitals.

Nearly 130,000 people in the U.S. die from stroke each year. The vast majority of strokes—87 percent—are ischemic strokes, caused by a blocked artery in the brain. Rapid access to stroke surgery ([endovascular treatment](#)) for patients having an ischemic can reduce stroke mortality and serious disability by half.

Provided by Society of NeuroInterventional Surgery

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