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U.S.

Stroke Treatment Guidelines Encourage Broader Use of Clot-Removal Procedure

American Stroke Association extends recommended window for thrombectomy to 24 hours

By *Thomas M. Burton*

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The American Stroke Association issued new stroke-treatment guidelines Wednesday that will extend to up to 24 hours the time in which stroke patients can be treated with a clot-removal procedure that lessens disability.

Previous guidance was that the thrombectomy could be used up to six hours after a stroke. Researchers said the stroke association is changing its recommendations based on two studies, including one written by Stanford University and others that was presented Wednesday at an international stroke meeting in Los Angeles. The research was also published online by the New England Journal of Medicine to coincide with the presentation in Los Angeles.

In that most recent research, doctors found that carefully selected stroke patients can have significantly better outcomes if they get a procedure, within six to 16 hours after their stroke.

The 38-center study was sponsored by the National Institutes of Health.

In the thrombectomy procedure, a catheter is routed through a patient's artery to the brain, and then the clot is removed by a small mechanic device called a stent-retriever. Until the advent of the thrombectomy, stroke doctors had to rely principally on a clot-dissolving medicine called t-PA that had to be given within 4.5 hours after a stroke. The medicine is still used, but because of the time limit, it is used in a relatively small number of patients.

"These striking results will have an immediate impact and save people from lifelong disability or death," said Walter Koroshetz, director of the NIH's National Institute of Neurological Disorders and Stroke.

Gregory W. Albers, a stroke specialist at Stanford, and colleagues wrote that this procedure, "resulted in better functional outcomes than standard medical therapy alone" in certain patients whose brain tissue hadn't been destroyed by their stroke.

The research, known as DEFUSE 3, confirms the findings of another major study called DAWN that was reported on at an international stroke last year in Prague. It generally takes two studies to cause a major medical group to issue revised guidelines.

Until last year, stroke specialists had believed that the clot-grabbing procedure was useful for only about six hours after a stroke. But the DAWN study, headed by Drs. Tudor Jovin of the University of Pittsburgh and Raul Nogueira of Emory University, overturned that belief. The DAWN study showed that the clot-removal procedure lowered disability in many patients up to 24 hours after a stroke.

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