Annals of General Psychiatry



Poster presentation

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Intravenous thrombolysis for acute ischaemic stroke - results from 25 patients treated in a Greek tertiary care hospital

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from International Society on Brain and Behaviour: 3rd International Congress on Brain and Behaviour Thessaloniki, Greece. 28 November -2 December 2007

Published: 17 April 2008

Annals of General Psychiatry 2008, 7(Suppl 1):S178 doi:10.1186/1744-859X-7-S1-S178

This abstract is available from: http://www.annals-general-psychiatry.com/content/7/S1/S178 © 2008 Rudolf et al.; licensee BioMed Central Ltd.

Background

In 2003, the EMEA approved the use of intravenous thrombolysis with rt-PA (Actilyse®) for therapy of acute ischaemic stroke within three hours from system onset, under the condition that these patients are treated according to the SITS-MOST protocol (Safe Implementation of Thrombolysis for Stroke - MOnitoring STudy - http://www.acutestroke.org) and referred to the SITS-MOST registry. Since then, thrombolytic treatment is offered to stroke patients in Greece in a limited number of centers.

Materials and methods

After opening a fully equipped Stroke Unit at the Department of Neurology of Papageorgiou General Hospital in Thessaloniki (Greece), 25 patients (15 male, 10 female, median age 58 yrs) were treated with rt-PA for acute ischaemic stroke, according to the SITS-MOST protocol.

Results

Median baseline NIHSS (National Institute of Health Stroke Scale) score was 9. 14 patients had large vessel disease, 3 suffered from cardiogenic embolic stroke, and 8 patients had a lacunar stroke. 18 of the 25 patients experienced quick and lasting amelioration of their deficits, 4 patients remained in unaltered neurological condition, and two patients died from space-occupying extended ischaemic stroke. One patient suffered a symptomatic (fatal) parenchymal haemorrhage. Three months after the stroke, 19 out of 22 surviving patients were functionally

independent, with a score of 0 - 2 on the modified Rankin Scale.

Conclusions

These results are strikingly similar to those reported from the SITS-MOST study [1]. They document that intravenous thrombolysis for acute ischaemic stroke is feasible also under the conditions of the Greek National Health System. As in most other studies, the prognosis of stroke after thrombolytic treatment depends on stroke severity (and cerebral infarct size) rather than treatment complications.

References

 Wahlgren N, Ahmed N, Dávalos A, Ford GA, Grond M, Hacke W, Hennerici MG, Kaste M, Kuelkens S, Larrue V, Lees KR, Roine RO, Soinne L, Toni D, Vanhooren G: Thrombolysis with alteplase for acute ischaemic stroke in the Safe Implementation of Thrombolysis in Stroke-Monitoring Study (SITS-MOST): an observational study. Lancet 2007, 369:275-282.

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