

POSTER

Young stroke—endovascular thrombectomy and outcomes in a single centre

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From the Lisbon Stroke Summit, Lisbon, Portugal. 6–7 April 2018.

Abstract

Background/Objectives: Acute ischemic stroke in young patients has an enormous social impact, leaving victims incapacitate during their most productive years. One fourth of all strokes occur under the age of 65 and 1/10 are younger than 50. It is known that endovascular thrombectomy (EVT) improves the outcome of certain patients, however few studies focus on young adults. The aim of this study was to analyse the clinical, imaging, procedural characteristics and outcomes after EVT in adults aged<=50.

Methods: In 2016/2017, 220 stroke patients were admitted for EVT in our department. From these, 29 young strokes were collected. Clinical, imaging, procedural data and outcome (modified Rankin Scale –mRS-at 90 days) were retrospectively reviewed.

Results: There were 15 females and 14 males, with a median age of 42. More than 80% of the patients had at least one vascular risk factors, 34.5% being smokers.

Twenty-six were anterior and 3 posterior-circulation occlusions, 76% achieving recanalization TICl=2b-3. After 3 months, 16 (55.17%) had a good (mRS 0-2) and 13 (44.83%) a poor outcome (mRS 3-6), 2 deaths.

Baseline National Institutes of Health Stroke Scale (NIHSS) score, Alberta stroke programme early CT score (ASPECTS), use of intravenous thrombolysis, recanalization grades, devices and symptomatic intracerebral haemorrhage are presented for the good and poor outcome groups and possible correlations discussed.

Conclusion: Stroke in young adults should be viewed as a different entity. Our analysis showed that although more than half of the patients had a good outcome there was an important rate of disability. There is a lack of specific guidelines for stroke management in young adults and further research is needed for better prevention and reduction of morbi-mortality.

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Citation: Proença et al. Young stroke—endovascular thrombectomy and outcomes in a single centre. International Journal of Clinical Neurosciences and Mental Health 2018; 5(Suppl. 1):P14

Published: 06 April 2018



Open Access Publication Available at http://ijcnmh.arc-publishing.org

