LECTURE

Oxfordshire Community Stroke Project Classification

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Abstract

Aiming to group ischaemic stroke patients into practical subgroups, Bamford et al described, in 1991, four clinically identifiable subgroups of ischaemic stroke in a community-based study of 675 patients with first-ever stroke (Oxfordshire Community Stroke Project Classification of Stroke, OCSP): total anterior circulation infarcts (TACI), partial anterior circulation infarcts (PACI), posterior circulation infarcts (POCI) and lacunar infarcts (LACI). While relying exclusively on neurological exam findings, using OCSP classification accurately predicted the CT or MRI infarct appearance in relation to the clinical syndrome in about three-quarters of patients and showed good interobserver agreement. The frequency of deterioration also differed significantly among the OCSP subgroups, adding useful information about individual patient prognosis and hints on the aetiology of the cerebral infarct. These practical advantages enabled clinicians (especially those working in resource-constrained hospitals) not only to accurately estimate location and volume of ischaemia but also to guide treatment decisions and to assist in aetiology investigation and assessment of recurrence risk helping, in this way, to establish prognosis in a timely manner.

With almost 30 years of existence, OCSP classification remains solid. It is suitable for use by all clinicians in the emergency room setting and a useful tool to stratify patients in the hyperacute phase, when CT will almost always be normal.

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