Where do you live? The importance of the geographic location in the effectiveness of stroke management

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Abstract

Background: For ischemic stroke time is brain and earlier recanalization is associated with better outcome. In 2016 the Lisbon Metropolitan emergency service for stroke was organized. In specific days, each of the 4 integrating hospitals is designated to receive patients and to perform endovascular thrombectomy (EVT) from the south of Portugal.

Objectives: To evaluate in our center the different stroke management time-points for patients living far from Lisbon and its evolution in a four-year period.

Methods: Between 2016-beginning of 2019 492 EVT were performed. 59 being far from Lisbon. This group was subdivided by years (2016-17 and 2018-19) and distance (70-100km, 100-200km and 200-300km). Demographic characteristics, geographic location, stroke territory, type of transportation and the different time points regarding stroke management (symptom onset, first and second hospital admissions and recanalization time) were analysed.

Results: From 59 EVT selected patients 24 were female, medium age 67 years, the majority (88%) with anterior circulation strokes. One quarter of the patients was in the 70-100km, 28% in the 100-200km and 47% in the 200-300km distance group, 9 transported by helicopter. In the farthest group the symptom onset-first admission time was always the worst. Regarding first admission-second admission there was a mild improvement in the 100-200 and 200-300Km groups, the opposite with the nearest hospitals.

Conclusion: EVT in ischemic stroke must be performed as soon as possible. Regarding our center the different stroke management time points for patients far away from Lisbon are not optimal, although the slight improvement seen in 2018-2019 must be reinforced in order to ameliorate stroke management and outcome.

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