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Modulo per la sottomissione abstract di ricerca CLINICA

Titolo (massimo 15 parole)

Factors associated with ischemic core and salvageable tissue on CT Perfusion in acute middle cerebral artery occlusive stroke

Autori (cognome e iniziali, es: Grassi L.)

Carlo W. Cereda, MD1,2, Stefania Nannoni, MD1, Gaia Sirimarco, MD PhD1, Dimitris Lambrou, PhD1, Ashraf Eskandari, RN1, Francesco Puccinelli, MD3, Vincent Dunet, MD, 3 Max Wintermark, MD4, Patrik Michel, MD1

Affiliazioni (ospedale o istituto, servizio o reparto, indirizzo, es: Ospedale Regionale di Lugano, Servizio di angiologia, Lugano)

1 Stroke Center, Neurology Service, Lausanne University Hospital, Lausanne, Switzerland, 2 Stroke Center, Neurology Service, Neurocenter of Southern Switzerland, Ospedale Civico di Lugano, Lugano, Switzerland, 3 Department of Diagnostic and Interventional Radiology, Lausanne University Hospital, Lausanne, Switzerland 4 Department of Radiology, Neuroradiology Division, Stanford University and Medical Center, Stanford, USA

Testo (massimo **250 parole**, preferibilmente in italiano (accettato anche in inglese), suddiviso in Introduzione, *Metodi, Risultati, Conclusioni* e *Finanziamento*

Aim – In acute ischemic stroke (AIS) with large vessel occlusion, the volume of the ischemic core (iC) and the proportion of salvageable tissue are both predictors of treatment response. We aimed to identify predictors of these two values in AIS with proximal middle cerebral artery (MCA) occlusion undergoing acute CT perfusion (CTP).

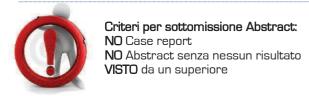
Methods – We identified all AIS with CTP performed <24hours from stroke onset and M1 (or proximal M2) MCA occlusion in the ASTRAL Registry from 2003 to 2015. We correlated iC volumes and Stroke Index (sI) on CTP with multiple demographic, clinical, metabolic and radiological variables in a multivariate regression analysis (MVA).

Results – 415 patients were included, median age was 69 years (IQR 21), admission NIHSS 16 (IQR 11) and 48% were females. Independent factors associated with larger iC volume were: NIHSS, decreased level of vigilance, neglect, admission creatinine, higher hemoglobin, hyperdense media sign, ipsilateral cervical internal carotid stenosis or occlusion, cardiac and unknown causes of stroke. Smaller iC volume was predicted by female sex, smoking, high ASPECT score and good collaterals. Larger proportion of sI was associated with female sex, previous antiplatelets regimen, acute cholesterol level, alcool abuse and good collaterals. Smaller sI was independently associated with previous antihypertensive treatment, NIHSS, low cardiac ejection fraction, higher admission blood pressure, higher hemoglobin.

Conclusion – In AIS with proximal MCA occlusions a favourable CTP profile (small iC or large sI) is strongly predicted by female sex, previous antiplatelets regimen, elevated admission cholesterol, ASPECT score and good collaterals.

Visto superiore (prego indicare Nome e Cognome del superiore)

Carlo Cereda



Invio Abstract