STROKE

Keep up to date with latest improvements in stroke care

Thrombectomy can improve recovery after stroke, but accessing treatment requires understanding of symptoms and local care pathways

Brain imaging as a diagnostic tool for ischaemic or haemorrhagic stroke was developed in the 1960s, but recent years have seen huge improvements in stroke care in the UK. While thrombolysis, the clot-busting treatment, is now considered standard, a new kid on the block has arrived.

Thrombectomy, the mechanical removal of a blood clot by a guided wire, is the newest emergency stroke treatment. Its implementation across England is one of the biggest investments that NHS England has ever made. This investment is a consequence of analysis by Goyal et al (2016) of five research trials of thrombectomy in acute ischaemic stroke patients.

The first thrombectomy national data for England, Wales and Northern Ireland reported that the condition of 76.3% of patients improved after receiving the procedure (Sentinel Stroke National Audit Programme 2017).

Like thrombolysis, the inclusion criteria for thrombectomy means that not all stroke patients are eligible. They need to have a clinical diagnosis of ischaemic stroke, and it’s essential that a clot in an artery of the brain is visible with brain imaging and easily accessible. The premorbid level of disability and co-morbidities, not related to age, also need to be taken into consideration, as well as whether the risks of the procedure will outweigh the benefits. Thrombectomy should begin within five hours of symptom onset.

‘Thrombectomy is the mechanical removal of a blood clot by a guided wire’

All nurses, irrespective of their area of practice, need to know how to recognise stroke symptoms, using mnemonics such as FAST (Face Arm Speech Time), as well as using pathways in their hospital to alert the stroke team.

All stroke nurses and intervention neuroradiology nurses need to understand the thrombectomy process, and that possible complications are known; this will enable appropriate nursing care.

References
