



Stroke Care 2006: Clinical Consensus and Opportunities

Stroke Care Guidelines and Neuroprotection Strategies

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Learning Objectives

- Discuss how published clinical guidelines can be utilized in order to improve the care of stroke patients through optimized local policies and procedures.
- Review the current state of neuroprotection strategies that limit the extent of secondary injury following acute ischemic stroke.

Background

Despite the fact that many clinical guidelines have been published that describe how patient care can be optimized in the acute setting, there still exists variability in the awareness of these clinical guidelines and their utilization in local hospital policies and procedures. As such, it is important to know what guidelines exist, what information is contained in them, and how this information can be used to assist the emergency physician in medical decision making. In reviewing these guidelines, it should be possible for emergency physicians to standardize their stroke patient care both within and across institutions.

Efforts to maximize neuroprotection in the care of patients with CNS illness and injury have yielded variable results. Although some stroke patient clinical guidelines address how secondary injury can be prevented, the development of direct neuroprotectants has remained elusive. This session will discuss how secondary brain injury can be avoided through the use of strategies such as glucose and blood pressure control, as well as airway and ICP management. Also to be discussed will be the development status of direct neuroprotectants that may be of value in the acute setting.

Key Clinical Questions

Which guidelines should be utilized in what manner in order to optimize stroke patient care?

What neuroprotection strategies are useful in preventing secondary brain injury following stroke?