

Media Contact: Sandy Van
Telephone: 808.526.1708 or 800.880.2397
E-mail: sandy@prpacific.com

STROKE SPECIALISTS EXPECT COUNTY'S NEW EMERGENCY STROKE SYSTEM TO SAVE LIVES AND IMPROVE OUTCOMES THROUGH EARLIER INTERVENTIONS

Patients Benefit From Earlier Access to State-of-the-Art Medical and Minimally-invasive Tools

LOS ANGELES (Dec. 3, 2009) – Thanks to Los Angeles County's new Emergency Stroke System, individuals who experience a stroke may now be able to more quickly access some of the latest advances in stroke interventions. The Emergency Medical Services Agency announced that ambulances will begin transporting suspected stroke patients directly to Approved Stroke Centers in Los Angeles County. These are facilities that are specially stroke-prepared – medically and surgically – and have the mechanisms in place to quickly provide the right treatment.

Leaders of Cedars-Sinai Medical Center's Stroke Program – one of the approved centers – say the decision by the Emergency Medical Services Agency is the culmination of ongoing efforts by a group of area stroke experts, and it will undoubtedly have an immediate, positive impact on many lives throughout the county.

"Time is brain. We know that the sooner a patient suffering a stroke receives effective treatment, the higher the chance of having a good outcome," said Patrick D. Lyden, M.D., chairman of Cedars-Sinai's Department of Neurology. "Designated stroke centers are committed to being ready 24 hours a day, seven days a week, 365 days a year. The county is now saying that patients will be directed to those hospitals that are committed to being ready."

Lyden, a nationally recognized authority on strokes and stroke intervention, was among those who lobbied for years for a similar emergency stroke system – yet to be implemented – in San Diego County. Joining Cedars-Sinai July 1, Lyden previously served the Department of Neurosciences at the University of California, San Diego, as professor and vice chairman for Clinical Neurology, and served the UCSD Medical Center as clinical chief of Neurology and director of the Stroke Center.

In the past, patients who appeared to be suffering acute strokes would be taken to the closest hospital, which may or may not be staffed and equipped to provide immediate attention. As noted by the American Stroke Association in its support of Los Angeles County's new system, studies have shown that outcomes improve significantly when patients activate the Emergency Medical Services system early by calling 9-1-1. "However, while time to treatment is a critical factor, the type of treatment received for stroke is also a crucial element of treatment – which is why it is important to get patients to the nearest Joint Commission-certified Primary Stroke Center."

"Ambulance-directed care for patients suffering strokes is an initiative that has been gaining support locally and in other regions. Leaders of several area stroke programs have been working together with the American Stroke Association and Los Angeles County to try to increase awareness of stroke signs and symptoms and to implement a strategy to get patients to those hospitals that have the mechanisms in place to provide the right treatment," said David Palestrant, M.D., director of the Stroke Program and Neuro-Critical Care at Cedars-

Sinai.

In 2008, the Cedars-Sinai Stroke Program earned Primary Stroke Center Certification from The Joint Commission. Based on recommendations published by the Brain Attack Coalition and the American Stroke Association's statements and guidelines for stroke care, this designation recognizes a center's commitment to following national standards and guidelines that can significantly improve outcomes for stroke patients.

Cedars-Sinai's program also has received two consecutive Gold Awards from the American Stroke Association for success in using the "Get With The Guidelines – Stroke" program. This award is given to centers that have maintained high performance levels for two years or more.

A stroke, or "brain attack," occurs when an area of the brain is deprived of oxygen because an artery breaks or becomes blocked. The only proven treatment for a blockage is intravenous administration of tissue plasminogen activator (tPA). When given within three hours of stroke onset, outcomes improve by about 30 percent. Lyden was a leader of the key clinical trial on tPA that led to Food and Drug Administration approval of this "clot-busting" drug.

In its announcement, the county identified nine medical centers approved for direct transport of patients requiring emergency stroke intervention.

"The goal of all Approved Stroke Centers is to get patients from the front door to treatment very quickly. For a patient having a stroke, this designation means these hospitals share a commitment to be ready and able to take care of you," Lyden said. "In addition, Cedars-Sinai and UCLA offer more comprehensive care for complicated patients, critically ill patients, those with hemorrhagic strokes, and those who may be candidates for advanced technologies. There are many patients who need the services of a comprehensive stroke center, and we're all committed to working together to provide that support."

NOTE: "Primary Stroke Center" is a designation of the Joint Commission. "Approved Stroke Center" is a designation of the Los Angeles County Emergency Medical Services Agency.

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