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Safety and efficacy of the "SOFITAIRE" approach in the endovascular treatment of Acute Ischemic Stroke

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Purpose: Prompt recanalization of occluded brain arteries in patients with stroke requires the use of multiple strategies. We report a retrospectively collected clinical experience in Medellin – Colombia using a combination of a direct first pass technique with Sofia 6 Plus (Micro Vention-Terumo, Inc., Tustin, CA) Reperfusion Catheter in combination with Solitaire™ FR (SFR) (ev3 Inc, Irvine, California, USA) in the treatment of AIS

Materials and Methods: Between March 2016 and Nov 2017 data from 32 patients treated with "SOFITAIRE" approach within 8 h of AIS symptom onset were selected. Procedural data including TICI score, Timing, adverse events and outcome were analyzed

Results: "SOFITAIRE" approach was successful in achieving complete recanalization in 24 patients (75%) with a final score of 3 according to the TICI. A partial recanalization (TICI 1 -2a) was obtained in four patients

(12.5%). Treatment failure was observed in four cases. 80.6% of strokes were in anterior circulation. Five cases presented with tandem lesions involving cervical ICA. Median time from groin puncture to revascularization was 39 minutes. None adverse events were recorded. Two patient, not re-vascularized died during the hospitalization due to massive MCA infarction. Marked improvement of National Institutes of Health Stroke Scale from baseline to 24 h after recanalization was obtained in all survivals.

Conclusion: "SOFITAIRE" approach was effective and fast in achieving a high rate of complete artery recanalization with a low rate of complications. The combined use of reperfusion catheters with retrievers may be considered a promising tool for endovascular revascularization.

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