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29.06.2023

НАУКОВО-ПРАКТИЧНА КОНФЕРЕНЦІЯ  
«НОВІ ГОРИЗОНТИ В ІНСУЛЬТОЛОГІЇ:  
ЛІКУЄМО ІНСУЛЬТ СУЧАСНО»



МІЖНАРОДНИЙ КОНГРЕС  
З ІНФУЗІЙНОЇ ТЕРАПІЇ

LAW OFFICES OF **OMP**  
Legal Consultants for Investment

## RESOLUTION

### of the scientific and practical conference «New Horizons in Studying Stroke: Treating Stroke in a Modern Way»

**June 29, 2023  
Kyiv, Ukraine**

About 2,000 health care specialists have registered to participate in «New Horizons in Studying Stroke: Treating Stroke in a Modern Way».

The program of the teleconference included the work of several thematic clusters of reports: brain stroke management, reperfusion injury prevention, legal aspect of the medical practice.

The event was registered at the Testing Board at the Ministry of Health of Ukraine. Event number: 5504154. All participants will receive a certificate, which gives the right to accrue 10 points BDP in accordance with the Order of the Ministry of Health of Ukraine from 22.02.2019 #446. The BDP provider's registration number is 1208.

As part of the event, the leading stroke experts of the country shared their practical experience. The interdisciplinary format of the teleconference was provided by speakers of various specialties: neurologists, neurosurgeons, lawyers.

4 reports were offered for the participants' review and they were dealing with the following issues:

- XaReTs: Justification and design. Expected results.
- Evaluation of patient and therapy efficiency using scales.
- Surgical treatment of ischemic stroke. Practical advice from a neurosurgeon on the treatment of acute ischemic stroke for neurologists.
- Discussion Club: Legal Aspects in Providing Medical Care to Patients with Acute Ischemic Stroke.

#### **Conclusions and decisions based on the discussion of reports:**

1. Stroke is a clinical syndrome of rapid development of signs of focal or global brain loss that last 24 hours or more or cause death in the absence of other (non-vascular) causes. The problem of brain stroke is one of the most important issues of modern medicine. Every year in Ukraine there are more than 110 thousand brain strokes. Stroke remains the main cause of disability in the country. Only 10-20% of patients after a stroke return to a full life.

2. According to the current Order of the Ministry of Health №602 as of 03.08.2012, treatment of patients with acute stroke includes basic therapy aimed at stabilizing the condition of severe patients, correcting those disorders, which may complicate the restoration of neurological functions and a specific (differentiated) drug. In particular, thrombolytic therapy, antithrombotic therapy, treatment of cerebral edema and HCD correction (drug therapy, surgical decompression).
3. Thrombolytic therapy and/or thromboectomy is accompanied by ischemic/reperfusion damage and is clinically manifested by deterioration of neurological status. The most frequent manifestation is the phenomenon of acute reperfusion of brain tissues, haemorrhagic transformation, as well as ineffective recanalization and reocclusion of the vessel, which leads to the formation of a persistent ischemic hearth, tissue necrosis with subsequent inflammation, etc.
4. In all these processes, the leading damaging role is performed by oxidative stress, excessive accumulation of active oxygen radicals with consequences in the form of progressive brain edema, violation of the blood-brain barrier with increased risk of vascular penetration, and in the clinical sense – the progression of neurological deficits, the reversal of recanalization results and heavy persistent residual phenomena.
5. Edaravone, an ischemic cascade blocker recommended as a drug for intravenous administration by patients with acute ischemic brain stroke. According to the Xavron® Drug Administration instructions, at the acute stage of an ischemic heart attack, Xavron® exhibits protective action by inhibiting the occurrence and development of ischemic cerebrovascular disorders such as:
  - swelling of the brain,
  - neurological symptoms,
  - slow death of neurons and
  - is indicated for use in alleviating neurological symptoms, disturbances in daily life, and functional disorders associated with acute ischemic stroke.
6. Register of XaReTs (Xavron in the recanalization treatment of stroke) – after marketing (randomized, case-control) open safety study, portability and effectiveness of Xavron's accompanying recanalization therapy for acute ischemic stroke in patients with large cerebral occlusion and perfusion visualization evidence of stored brain tissue within 0-24 hours of commencement stroke symptoms.
7. Previous results of studies of other foreign authors show the potential effectiveness of application against reperfusion interference granted. The purpose of this study is therefore to establish the advantages of such intervention (Xavron use) over traditional patient management. The effect of additional intervention in two groups of patients is investigated – with assistance in the form of systemic thrombolytic therapy and with the performance of mechanical thrombectomy. When the patient is discharged 3 months after the onset of the disease, the functional result will be evaluated using a modified Rankin scale (mRS 9QLogic).

8. Retrospective observational study using a national administrative database to assess the clinical effects of early Edaravone in patients with acute ischemic stroke who have undergone endovascular reperfusion therapy (a total of 11,508 patients), a total of 24,076 participants showed:
  - Greater functional independence on discharge from hospital; lower hospital mortality in the Edaravone group;
  - decrease in the number of intracranial bleeding after hospitalization;
  - The best results of therapy.
9. The conclusions of 28 multi-center randomized placebo-controlled double-blind studies and 2 meta-analyses, placed on one of the largest online collections of published scientific research «PubMed» Edaravone's therapeutic strategy is effective for treating acute ischemic stroke, improving prognosis for these patients and demonstrates a higher degree of functional independence.
10. Analysis of CXST (Concomitant Xavron Stroke Therapy), which gives grounds to talk about the expediency of using Xavron as an additional therapy of the acute period of ischemic stroke. Its effectiveness is confirmed by the indicators of the disease – faster clinical stabilization of patients, faster recovery of unconsciousness, which leads to earlier activation and beginning of rehabilitation.
11. It is essential that all physicians involved in the management of stroke patients (neurologists, neurosurgeons) have the necessary practical skills to assess patients on standard stroke assessment scales and impact assessment scales, functional condition of the patient (at the time of discharge from the hospital and on the 90th day from the beginning of the disease).
12. According to the provisions of the Methodology of development and implementation of medical standards of medical care on the basis of evidence-based medicine, approved by the Order of the Ministry of Health of Ukraine as of 28.09.2012 №751 (hereinafter - Methodology) Ukrainian physicians may rely in their daily practice on the clinical facility sources given in Annex 4, in particular the Cochrane Systematic Review Database. The evaluation of the efficacy and safety of Edaravone in acute ischemic stroke is described in the Cochrane Reviews, which are the source of clinical settings and are allowed for use by physicians during their medical practice. The results of this assessment in the Edaravone group showed an increase in the proportion of participants with significant neurological improvement over the control group, with a significant difference. Edaravone therapy scores twice as good as basic therapy.
13. The legislation of Ukraine allows a physician, when carrying out professional activities, to be guided by the standards of medical care (medical standards) and the patient's clinical routes, as well as to use evidence-based medicine and registered medicines.
14. According to art. 12 of The European Charter of Patients' Rights, everyone has the right to diagnostic or therapeutic procedures adapted to his/her personal needs, that is, every patient has the right to an individual approach to treatment.

15. A promising joint decision-making strategy (sharing decision making) that is evolving and spreading around the world. This is a special model of communication, highlighting the incredible advantages and risks of using a tool, which promotes consensus decision and legitimizes the possibility of building on existing recommendations, protocols, policies in individual cases.
  
16. The National Health Service of Ukraine, as an executive body, is obliged to act only on the basis, within the limits of its powers and in the manner prescribed by the Constitution and the laws of Ukraine. It is not the task of the NHS to monitor and control the administration of medicines not covered by the Programme of Health Guarantees, therefore the purpose of the monitoring carried out by the NHS, where appropriate, is only the control of the use of budget funds and the quality of the provision of health services within the framework of the program of health guarantees.

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Номер провайдера 1208  
Реєстраційний номер заходу БПР 5504154

