

ahead of the curve

UHS OFFERS THE REGION'S FIRST AND ONLY COMPREHENSIVE STROKE CENTER

Time is of the essence when suffering a stroke. Every second after onset, 32,000 brain cells die and fast treatment means less risk of life-altering or deadly consequences. And where you seek treatment matters. As the American Stroke Association points out in *Stroke Connection* magazine, "When it comes to the treatment of acute stroke, all hospitals are not created equal."

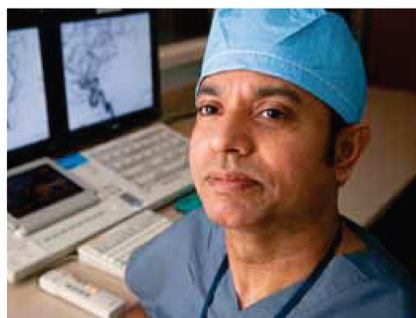
To provide patients with unparalleled diagnostic and therapeutic stroke care, UHS continually invests the time, talent and dollars for UHS Wilson Medical Center to be a comprehensive stroke center — the first and only center of its kind in the Southern Tier.

"We now have the physician specialists and cutting-edge medical technology and devices to diagnose and care for acute stroke patients in the most rapid and effective manner possible," says Yahia Lodi, MD, medical director for the comprehensive stroke program at UHS.

TEAMING UP FOR SUCCESS

Hospitals that meet the criteria to be called Comprehensive Stroke Centers offer patients the best chance for a return to normal life. At UHS, this starts with a multi-disciplinary and tightly united team of highly-skilled physician specialists. This includes 24/7 access to a vascular neurologist, a neuroendovascular specialist, a neuroradiologist and a vascular neurosurgeon.

Team collaboration begins in a matter of minutes after a potential stroke victim arrives at the Comprehensive Stroke Center at UHS Wilson Medical Center. First, a CT scan of the patient's brain is taken and within 10 minutes the resulting pictures are sent electronically to each member of the stroke team. "Even if the specialists aren't in the hospital, they can simultaneously review the images remotely," says Prakash Ramanathan, UHS special projects director. "Each physician contributes his own skill set and expertise to determine the best treatment for that patient."



EXCELLENCE AND EXPERTISE: Yahia Lodi, MD, leads a team of neuroscience subspecialists who are experts in treating strokes at UHS Wilson Medical Center.

The result, Dr. Lodi says, is a focused approach that puts the UHS stroke team ahead of the clock. "We have everything in place for quick action. Our pace is fast, and we waste no time."

BEATING THE CLOCK

In addition to the team, a comprehensive stroke center—by definition—must have access to the latest diagnostic and therapeutic advancements in the field.

UHS has invested in an advanced CT scanner that offers low-dose radiation exposure, mega-fast scanning capabilities

and sharply detailed pictures. The new scanner allows the collaborating physicians to swiftly identify what kind of stroke the patient is suffering:

- **an ischemic stroke**, the most common form of stroke, generally caused by a blood clot that blocks blood supply to the brain
- **a transient ischemic attack**, sometimes called a "mini stroke"
- **a hemorrhagic stroke**, which occurs when a weakened blood vessel ruptures

AROUND THE BEND

UHS also has invested in a biplane angiography imaging system, which provides state-of-the-art capabilities to diagnose and treat stroke, aneurysms and peripheral vascular disease. Pertinent to stroke, the system delivers high-resolution, 3D images of blood vessels in the brain. This allows a neurointerventionist to insert a very thin, flexible catheter into an artery, often in the groin area; follow the images like a map to guide the catheter into the blocked blood vessel; and perform the most effective treatment, including any one of several groundbreaking procedures, to stop ischemic stroke.

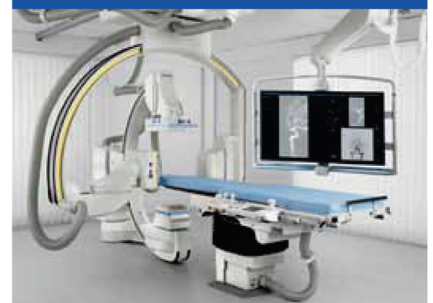
Until recently, the primary treatment for ischemic stroke was a drug called tissue plasminogen activator, or tPA. However, this clot-busting drug must be administered within three hours of symptom onset, and the majority of stroke victims reach the hospital after this window has closed.

Now, with the biplane's capabilities, a neurointerventionist can administer intra-arterial tPA, a sophisticated procedure that is effective up to six hours after stroke onset and involves guiding a catheter into the blocked blood vessel and administering tPA directly into the clot. A second minimally invasive procedure, which can be successful up to 24 hours after symptom onset, is called a mechanical thrombectomy. This treatment allows an interventional physician to guide a catheter into a blocked blood vessel and literally pull the clot out.

In all cases, once the procedure is complete, the patient is cared for in the Intensive Care Unit (ICU) and closely monitored by critical care physicians. "We are the only hospital in the region with an ICU that's staffed 24/7 by board-certified critical care medicine physicians," Mr. Ramanathan stresses.

"These procedures, the technology and our team — they give us precious time and capabilities that no other hospital in the area can offer," Dr. Lodi says. "It means we're saving lives."

RIGHT DOWN THE LINE: The new Artis Zee biplane imaging system produces high-resolution 3D images of blood vessels that allow physicians to remove stroke-causing clots through catheterization.



THINK FAST

KNOWING THE SIGNS OF STROKE SAVES LIVES

According to the National Stroke Association, it's an often-cited myth that strokes strike only the elderly. Not true! A stroke can happen to anyone regardless of age, and in every case, immediate medical attention is crucial.

One of the best ways to protect yourself as well as loved ones is to know the common stroke symptoms. If you suspect that a stroke is in progress, immediately call 911. Also note the time when symptoms began, as this may affect treatment options.

Here are the general stroke symptoms to know:

- Sudden numbness or weakness in the face, arm or leg — especially on one side of the body
- Sudden confusion or trouble speaking
- Sudden trouble seeing or blurred vision in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or decreased coordination
- Sudden severe headache
- Drowsiness, nausea or vomiting

To memorize the symptoms, remember FAST, an acronym that stands for the Face, Arm and Speech Test.

FACE Ask the person to smile. Does one side of the face droop?

ARM Ask the person to raise both arms. Does one arm drift downward?

SPEECH Ask the person to repeat a simple sentence. Is the speech slurred or the sentence jumbled?

TIME If you see any of these symptoms, call 911 immediately.

“We have everything in place for quick action. Our pace is fast, and we waste no time.”

—Yahia Lodi, MD

BE IN THE KNOW ... Reduce your risk factors for stroke and learn the warning signs with Stroke Signs Know and Go Cards. Learn what you can change today to prevent stroke. Stop by the UHS Stay Healthy Center at the Oakdale Mall or call 763-6060 or toll-free 1-800-295-8088 for your free copy.

