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**Courses of thematic improvement in acute stroke management**



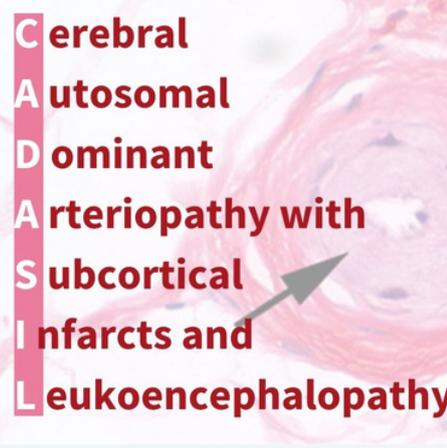
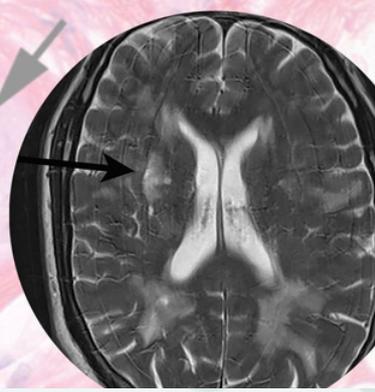

EUROPEAN STROKE ORGANISATION



**BLOG:**  
Cerebrovascular Aspects of Fibromuscular Dysplasia



**Cerebral Autosomal Dominant Arteriopathy with Subcortical Infarcts and Leukoencephalopathy**



## Courses of thematic improvement in acute stroke management

From March 5 to 19, the first thematic improvement courses on acute stroke management were held this year at the Poltava Regional Clinical Hospital named after Sklifosovsky.

Despite the regular conduct of this cycle, a significant number of specialists always fill out applications to participate: the courses are relevant for all physicians involved in the multidisciplinary stroke service team.

The training is aimed at highlighting key issues and topics faced by those providing assistance to stroke patients: from organizational issues regarding the patient's route within the settlement and directly to the institution, normative legal documentation in accordance with current updates, to the basic algorithms of neurovisualization diagnostics, treatment tactics, patient management. Discussion of specific cases and problems from practical experience is always lively, participants have the opportunity to hear the opinions of colleagues on this matter and express their own, analyze alternative approaches.

Within the framework of this course, three more cycles are planned for 2024.

The announcement of the opening of the application process for participation will be traditionally posted on our pages on social networks Facebook, Telegram, Instagram, and on the website with access to the links. More information about the courses can be found on our website in the section on learning opportunities for physicians.



EUROPEAN STROKE  
ORGANISATION



## BLOG:

### Cerebrovascular Aspects of Fibromuscular Dysplasia



**Fibromuscular Dysplasia (FMD) is a non-atherosclerotic disease affecting medium/small-caliber arteries of non-inflammatory etiology, resulting from primary stenosis. Specifically, this condition most commonly affects extracranial arteries of the neck and renal arteries, although other arterial vessels may also be affected by FMD. The majority of patients with this condition are women, however, men tend to experience a more aggressive course, including the development of aneurysms and dissections associated with FMD.**

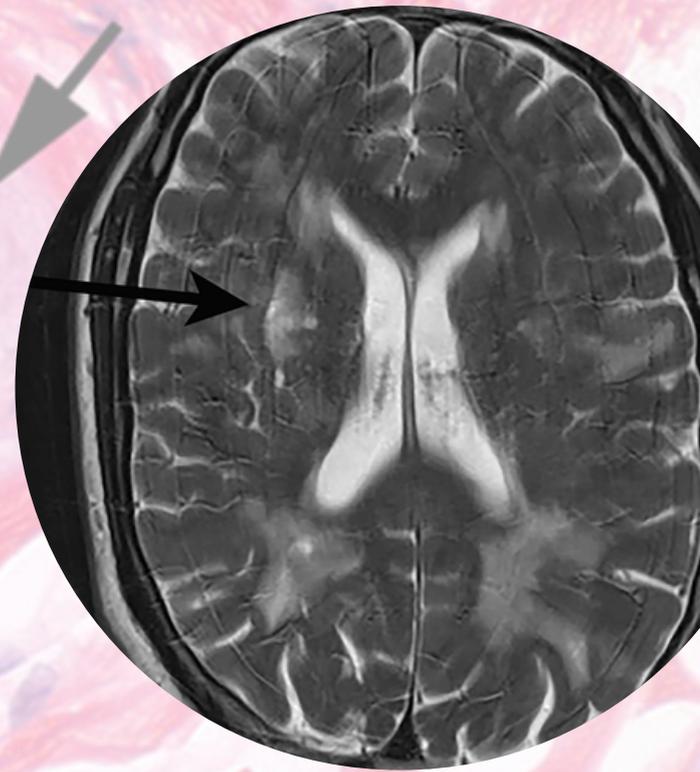
**When identifying correspondences of vascular changes in a certain group to the criteria of focal or multifocal variants of FMD, it should be noted that typically, other vascular territories are also involved in these patients.**

**For clinicians in stroke medicine, patients with cervical artery dissections should be considered as potential FMD patients: according to observations, up to 25% of FMD patients suffer from arterial dissections. The possibility of a genetic predisposition to this variant of FMD is being investigated.**

**Additionally, an unruptured intracranial aneurysm is a typical presentation for FMD of intracranial vessels. Patients diagnosed with FMD should undergo CTA or MRA screening for intracranial aneurysms, as the prevalence of this condition among such patients is significantly higher compared to the general population. Studies are ongoing to determine whether FMD itself increases the risk of aneurysm rupture.**

**Regarding the condition of reversible cerebral vasoconstriction syndrome (RCVS), there is evidence that a specific subtype of FMD may increase the risk of developing RCVS.**

# Cerebral Autosomal Dominant Arteriopathy with Subcortical Infarcts and Leukoencephalopathy



The most common genetically determined syndrome leading to the development of small vessel disease, with neurological and psychiatric clinical manifestations. The average age of clinical symptom onset is around 45-50 years.

According to data, 89.4% of patients with this syndrome experience ischemic strokes, and within this cohort of patients, 27.7% also have a history of transient ischemic attacks. Additionally, 6.2% had hemorrhagic strokes. In 71% of patients, the stroke occurred before the age of 65.

It is worth noting separately that patients with a stroke occurring against the background of the syndrome have a more pronounced neurological deficit, which is determined by the clinical manifestations of the syndrome itself.

On March 19, another webinar was held by ESO, dedicated to this topic. Genetic variants of the syndrome were discussed, with significant attention given to CADASIL-type NOTCH3, which is strongly correlated with small vessel disease. The webinar also highlighted aspects of risk factor management and therapeutic approaches for such patients, with clinical cases being discussed. The webinar recording will be available on the ESTEP educational platform.