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**Letter Addressed to
Stroke Medicine
Physicians**



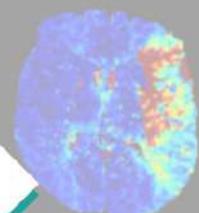
**Prof. Serhiy Moskovko,
National Coordinator of
Angels and RES-Q in Ukraine**



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**Training courses on
mechanical thrombectomy
thematic improvement**



Letter Addressed to Stroke Medicine Physicians



**Prof. Serhiy Moskovko,
National Coordinator of
Angels and RES-Q in Ukraine**

Dear Colleagues,

On behalf of the Angels Initiative team in Ukraine, we extend our respect and gratitude to you for your efforts in developing modern stroke care in the country during this challenging period of its history! Each of you truly belongs to the European and global community of stroke neurologists, which strives to implement the best standards of care for patients with acute cerebrovascular accidents, thereby increasing their chances of survival, recovery, and functional independence.

A profound understanding of the processes at play, awareness of the effectiveness of new treatment technologies in the acute period, early rehabilitation, and the early initiation of secondary prevention have led to a consensus on the importance of assessing the quality of stroke care. The time-sensitive nature of acute cerebrovascular events, treatment in the acute phase, and the intensive diagnostic process and decision-making within tight timeframes require the measurement of all subsequent actions of the expert team to evaluate the overall quality of care.

Indeed, this is how the idea of RES-Q (Registry of Stroke Care Quality) was born—a registry of stroke care cases in different hospitals of various countries. This registry not only allows for determining the completeness of procedures performed and their timing characteristics but also enables the comparison of the effectiveness of work in different medical institutions, the overall level of organization of care in individual countries, and tracking changes over time. There has even emerged the concept of "culture of assessing the quality of stroke care," which signifies the highest intellectual level of understanding the importance of quality control and awareness of the power of such a measurement tool for improving final outcomes.

For the past 6 years, Ukrainian stroke units in healthcare facilities have been part of the RES-Q project (European, and now global!), demonstrating not only their achievements and progress in the quality of care but also earning awards from the Angels Initiative—from "gold" to "diamond," which serve not only as elements of international recognition but also as prestige in the eyes of the medical community and the public.

We take pride in the achievements of our compatriots and the growing recognition of their successes on the international stage. However, it should be noted that the demonstration of these achievements within the RES-Q project is quite fragmented, inconsistent, and sporadic. At certain times, data is entered into RES-Q by 20–30 hospitals, while at others, it is only 2–3. There is also significant variability in the nature of the data entered: some teams provide information on all treated patients continuously over a specific period (quarter or year). Others, however, engage in "selective" data submission, artificially altering the structure of the treated cohort to increase the proportion of patients who underwent systemic thrombolysis, for example. This became particularly evident when assessing the results for the 4th quarter of 2023. Some teams "demonstrated" a thrombolytic activity level of over 30% (up to 53%), which appears highly questionable to those who understand the real state of affairs in stroke care in Ukraine...

We all greatly need accurate, reliable, and honest information about the quality of stroke care: it is impossible to create and reform a system without quality information about its functioning, and most importantly, about the final results of all efforts combined. We are referring to the assessment of functional outcome—the condition of patients on the 90th day of illness (modified Rankin scale, mRS). This is an international standard, and we must implement it into our daily practices!

Letter Addressed to Stroke Medicine Physicians (extension)



The RES-Q registry is dynamically evolving and is currently undergoing qualitative changes that enhance its analytical capacity. The data registration form for patients is changing, the interface is becoming more user-friendly, and the number of languages for communication has increased, including Ukrainian. The project leaders' main wish is for the completeness and accuracy of data entry, as well as a consistent methodological approach across different institutions. This will allow for transparent comparisons, assessment of the state of the field, trends in changes, and identification of key problem areas and ways to address them.

The Angels Initiative in Ukraine invites interested institutions (where specialized stroke care units have been established) to participate in the updated RES-Q project, which, in the absence of a national registry, is the only possible mechanism for public assessment of the state of care and determination of short-term and prospective directions for quality improvements.

The essence of the new stage of cooperation with RES-Q involves receiving regular "snapshots" of the work of specialized stroke structures—twice a year, over a period of 1-1.5 months. This is a sufficient tool for analyzing and understanding the state of affairs and dynamics of individual elements of care quality. These periods are defined for March and September. This means that during these months, all consecutive treated patients discharged from the respective department need to be entered (including patients with mRS 6 for this period). For assessment, at least 30 patients need to be entered, but more is preferable. Considering the varying capacities of institutions and structures, we recommend entering patients during the "extended period": from mid-February to the end of March.

The RES-Q registry is starting to operate on a new platform, and in order to enter data about your patients (absolutely securely in terms of confidentiality!), it is necessary to register your medical institution and appoint (select) a local coordinator responsible for the data entry procedure.

As the National Coordinator of RES-Q in Ukraine, I have access to all the data entered by our institutions and I can and must perform the final data analysis for each quarter of the current year. In this case, these are the I and III quarters (March and September). Hospitals are free to enter data on a continuous basis, which is highly encouraged! However, our request is to start entering data at least during the defined periods of the "control snapshot." This mode is chosen as the most acceptable in most countries around the world because it allows for objective comparisons of institutions based on their activities and achievements in terms of the quality of care provided. We hope that with your help, Ukraine will also be well represented!

Finally, my role as National Coordinator is not limited to observation alone. In addition to approving Angels awards (which, for example, the "diamond" award grants participation in the next ESO congress with expense coverage...), I plan to publicly highlight the results of the work of the participating institutions in the form of analytical publications in Ukraine and international journals. Local RES-Q coordinators automatically become co-authors of these publications. This is their personal reward for the work they have done!

Therefore, join this important and noble collaboration for the benefit of our patients and progress in building truly effective stroke care!

With respect,
On behalf of the Initiative team,
National Coordinator of Angels and RES-Q,
Prof. Serhiy Moskovko



The annual Winter School of Stroke Medicine, held in Bern, is aimed at the interdisciplinary integration of neuroradiologists and stroke medicine physicians. This year, the 11th school had the opportunity to be visited by four participants from Ukraine.



STROKE
WINTERSCHOOL

The rapid progress in diagnostic and therapeutic approaches to stroke patients opens up new possibilities, but at the same time presents us with new challenges and questions. Undoubtedly, along with advancements, there is an increasing demand for specialists, and one of the key aspects is the coordination of teamwork.

Therefore, the three-day program of the school is designed for neuroradiologists and neurologists to address current issues from the perspective of both specialties and provide an opportunity for experts to best understand each other in search of solutions. This year, four specialists from Ukraine visited the school in Bern: Margarita Kholodova, Dmytro Hrynykha, Ruslan Salnikov, and Artem Matsko.



The three-day training program included discussions on current trends in stroke medicine, sections on issues related to thrombolytic therapy, discussions on thrombectomy from the perspectives of radiologists and neurologists, and occlusion of large vessels. Additionally, specific topics on pediatric stroke, spinal stroke, occlusion of the central retinal artery, and dissection of neck vessels were highlighted.



Part of the program was conducted separately for both specialties. Specifically, the practical session for neurologists involved the analysis of complex cases of neurovisualization, explaining the physical characteristics of various MRI modes, which allows for a better understanding of visualizing hypoperfusion areas, identifying the core area, and detecting thrombus even on non-contrast MRI studies.



"I would like to separately mention the organization of the joint dinner, the venues were chosen in the best locations of Bern, with incredibly beautiful views, but the main highlight was the opportunity for informal communication with colleagues from other countries and the school's speakers."



Dmytro Hrynykha shared his impressions with us: "An incredible event that gathered neurologists and interventional neuroradiologists from around the world. In addition to the excellent organization and rich program of the school, we had the opportunity to discuss the most complex and debatable issues with speakers who are leading experts in the field, their names among the authors of most important research."



Dmytro also mentions that for interventionalists, there was an opportunity to discuss potential difficulties and complications at various stages of mechanical thrombectomy with René Chapot. They also had the chance to perform mechanical thrombectomy in the Animal Lab and conduct endovascular interventions on the Mentice simulator (which is very interesting and can be used in the training of neuroradiologists). An interesting fact is that in most European countries, endovascular interventions are performed by interventional radiologists specializing in interventional neuroradiology. In some countries, neurologists also perform these procedures after completing a special training program for interventional neuroradiologists. To a lesser extent, neurosurgeons and vascular surgeons also perform these procedures but must undergo the same specialized training program. Almost every country faces a shortage of interventional neuroradiologists, and training such specialists takes a lot of time.

Summing up, Dmytro notes: the level of organization, scientific content, and communication are at the highest level. So it is definitely worth applying to similar events, as it allows you to broaden your perspective, meet colleagues from other countries, exchange experiences, and understand where we are now and where we should be heading. In particular, Dmytro shares his thoughts that our country is moving in the right direction, with more and more young professionals each year interested in stroke medicine, thinking about how to change things locally, and improving stroke care overall in Ukraine. So stay tuned for news and events, and try your hand. Let's create stroke care together!





Training courses on mechanical thrombectomy thematic improvement

From February 6th to 20th, the first thematic improvement courses on mechanical thrombectomy for this year took place regularly at the Sklifosovsky Poltava Regional Clinical Hospital under the guidance of Mykhailo Tonchev and Andriy Nos. The continuous interest in our educational projects each time proves that the audience of motivated and progressive specialists is steadily growing. The course program traditionally included lecture materials and practical skills.

During the educational process, participants studied materials on various topics, such as diagnostic methods using neurointerventions for patients with acute ischemic stroke, Ukrainian regulatory documents related to stroke treatment, X-ray anatomy of cerebral arteries, strategies and treatment routes for patients with acute stroke, criteria for selecting patients for thrombectomy, methods of revascularization and preventive measures, management of patients during chosen therapy, pharmacotherapy, criteria for early intubation, tracheostomy, and gastrostomy. Tools for endovascular procedures, their advantages and disadvantages, were also discussed, along with the presentation of complex clinical cases focusing on neurovisualization data.

A section dedicated to working with flow models in the X-ray operating room and studying methods of endovascular thrombectomy always sparks special interest among participants.

Throughout the course, active discussions of the material, clinical cases from personal experience, and those involving participants during the training were held.

Stay tuned for announcements on our social media pages and website to timely learn about the opening of registrations for the upcoming courses.

