



Preliminary Analysis of Longitudinal Outcomes for Language, Swallowing and Cognition Post Endovascular Clot Retrieval

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Background

Morbidity associated with ischemic stroke has substantially improved due to endovascular clot retrieval (ECR). However, approximately 40% of patients demonstrate disability post-ECR [1]. To date, only one study has investigated a single domain of cognitive function post ECR [2]. Furthermore, no data describing the effects of ECR on swallowing exists [3], while case studies suggests language impairment persists post procedure [4].

Aims

To explore preliminary data from a longitudinal study investigating incidence and recovery of language, swallowing, cognition and Quality of Life (QOL) post ECR.

Methods

Longitudinal assessment of language, swallowing and cognition was completed at 3 time points (0-7 days; 30 days and 90 days). QOL was assessed at 90 days only.

Measures included:

- Functional Oral Intake Scale (FOIS);
- Repeatable Battery for the Assessment of Neuropsychological Status (RBANS);
- Western Aphasia battery (WAB-AQ);
- Stroke and Aphasia Quality of Life Scale (SAQOL-39)

Results

A subset of data for 9 patients is reported here. The graph below outlines the mean scores at each time point. Swallow function was intact, and all patients analysed to date were tolerating normal oral diet and fluids. Mean scores for language and cognition were below the cut off on initial assessment (< 7 days); however, had improved to above the normal cut-off by 90 days.

Patient reported QOL was high however scores for the psychosocial domain were low compared to physical and communication domains.

Table 1: Demographic Details

N=	9	
Age	75.22 yrs	(67-87)
Gender	Male	66% (6)
	Female	33% (3)
Location	Left	55% (5)
	Right	45% (4)
NIHSS on arrival	Median 14	(4-19)
Treatment	ECR only	45% (4)
	ECR + lysis	55% (5)
mTICI	3	55% (5)
	2C	33% (3)
	2B	12% (1)

Discussion

Further research is required to inform patients and health professions about expected outcomes post ECR. Improvement in the estimation of clinical outcomes may also result in new management pathways.

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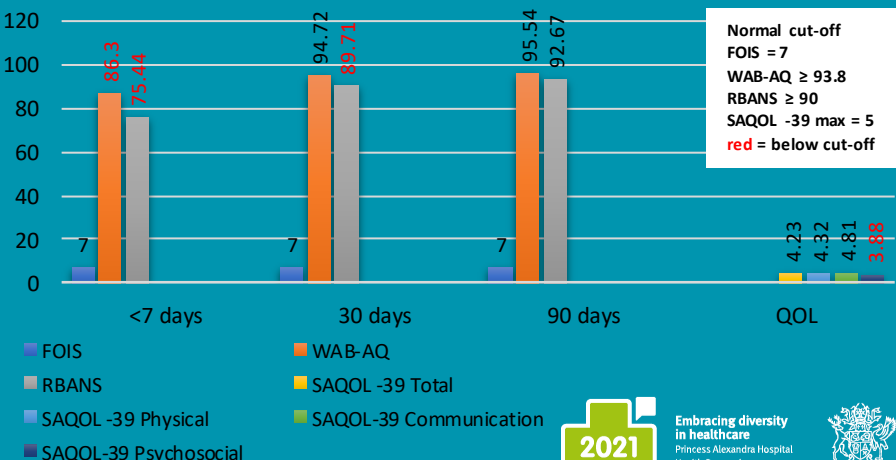
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Longitudinal Outcomes and Quality of Life



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