POSTER ABSTRACT

The stroke pathway: an integrated approach to health care of stroke patients.

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Introduction: Stroke remains the second leading cause of death around the globe, and the approach to stroke care has been deeply transformed in the last decades.

Practice change implemented: The Hospital Universitario de Basurto (Basque country, Spain) has developed an integrated stroke care evaluation unit, composed of First Responders, Primary Physicians, Emergency Room Physicians, Nurses, Social Workers, and Neurologists. The main goal is to provide an optimal and integrated approach to the care of patients that allows continuous analysis and improvement.

Aim: The effectiveness of such a large unit needs to be measured by evaluating several parameters to determine whether our patients are receiving the best possible care by compiling data as well as to determine the level of care at the level of the individual patient.

The following parameters are evaluated: prehospital delay (including stroke detection by Primary Physicians and transportation time), hospital delay (including door-to-neuroimaging time, door-to-needle reperfusion therapy -either thrombolysis, mechanical thrombectomy, or both) time), as well as stroke severity, percentage of patients getting timely therapy and predictors of mortality.

Timeline: The stroke unit meets 4 times a year, and final outcome evaluation takes place at one year.

Highlights (innovation, Impact and outcomes): The creation of an integrated stroke care unit provides a mean for evaluating the results in stroke patient care so that an optimal approach is delivered, and allows for a comprehensive review of all aspects, from stroke occurrence to hospital discharge, including associated problems (i.e., social aspects).

It allows for a continuous monitoring of times and results, which often require reevaluation and instauration of corrective measures.

Comments on sustainability: Such an approach results in optimal cost-effectiveness for a large-magnitude health problem such as stroke and thus makes its care more sustainable.
Comments on transferability: The Basurto stroke care unit can be transferable to other units, not just in our area but elsewhere. However, the methods of evaluation can vary depending on location and on specific circumstances.

Conclusions: The availability of an integrated stroke unit is essential to provide a comprehensive, optimal care to stroke patients, both from a clinical standpoint as well as from other less frequently considered perspectives, including socioeconomic aspects, all of them resulting in an optimal patient care and in helping to assure an equitable health assistance. It seems particularly well suited to public-based health care systems.

Keywords: stroke; stroke code; transportation; stroke treatment; optimal times