

An Insight into Stroke Care during COVID-19

SSNAP Update

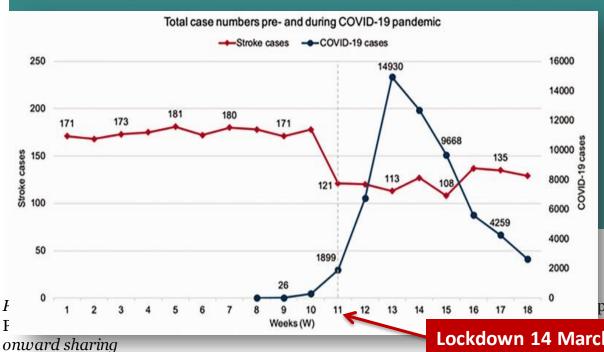


Prof Martin James, Consultant Stroke Physician, Royal Devon & Exeter Hospital Clinical Director, Stroke Programme, King's College London

What happened in Europe?

Stroke activity in Northern Spain, Jan-April 2020

- Regional Stroke Network with popn. 11.5M and approx. 9000 strokes/year
- Significant fall in stroke admissions from early March
- IVT (17%) and Thrombectomy (22%) maintained



In-hospital mortality rose (6.5% to 9.9%)

> Tejada Meza et al Int J Stroke June 26 online

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Stroke and COVID-19: four questions

- 1. What has happened to stroke admissions?
- 2. What has happened to reperfusion?
- 3. What has happened to clinical quality?
- 4. What has happened to mortality?



Stroke and COVID-19

What happened to stroke after lockdown?

- 'COVID period': UK lockdown (23 March) to end May
- 128 of 159 teams registered over 50% of expected admissions during this period, most using full dataset
- 23 Mar-April (6/52): 7090 admissions; 6028 discharges
 May (4/52): 5498 admissions; 4121 discharges (75%)
- 85% white; 6.2% non-white; 8.7% unknown
- NB: interim analysis of monthly data



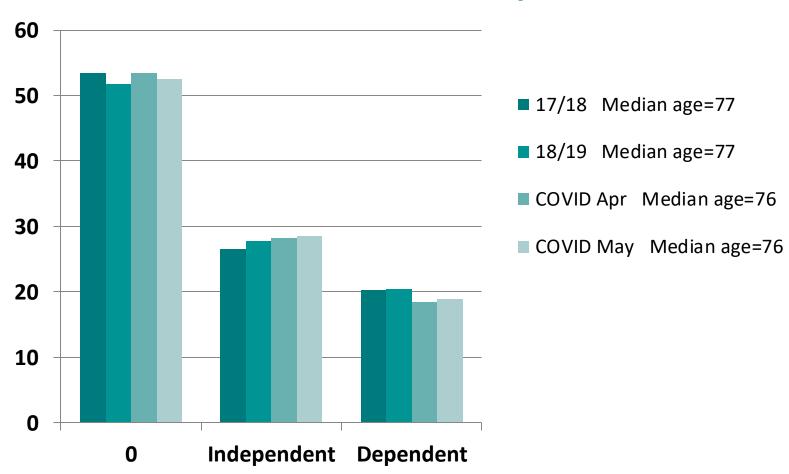
Stroke and COVID-19

COVID status

	Confirmed	Suspected	Negative	Unknown
n	261	439	2331	9198
23 March – 30 April	3%	4%	18%	75%
1 May -31 May	1%	3%	20%	76%

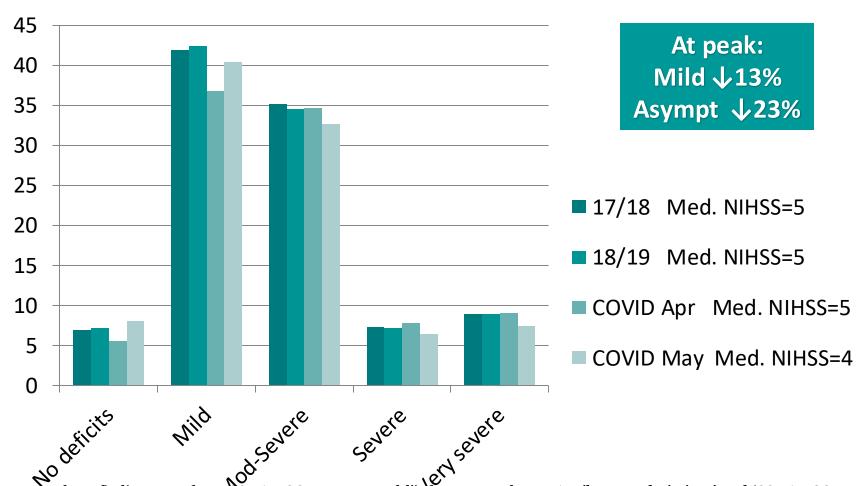


Pre-stroke disability





Stroke Severity (NIHSS categories)





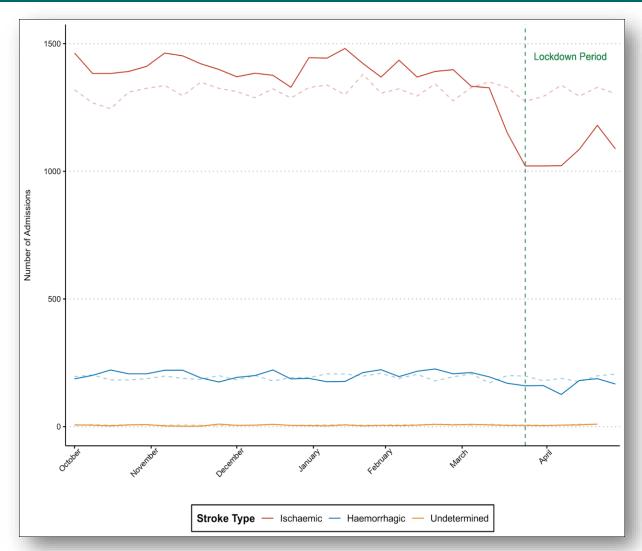
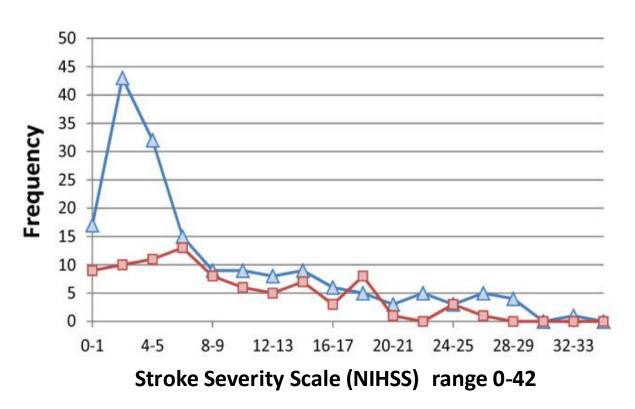




Fig. 1 London (UCL): Feb 2020 v April 2020

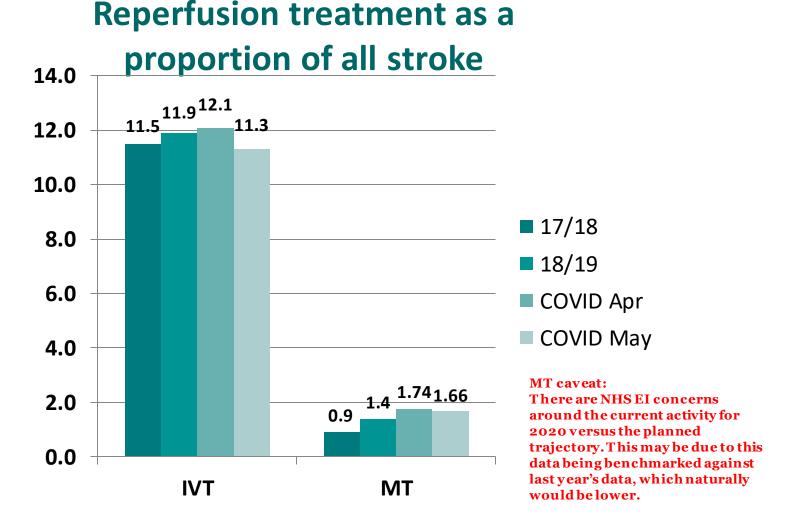


Distribution of National Institutes of Health Stroke Scale (NIHSS) for patients presenting in the 40 days from 1st February 2020 (blue triangles, total 175 patients) and for those presenting during the 40 days from 1st April (red circles, total 84 patients). The NIHSS is a score between 0 and 42 representing the degree of neurological impairment, higher scores representing more severe strokes. Bin width = 2



What happened to reperfusion?







What happened to Clinical Quality?

Mar-April 2020: Comparison with equivalent period 2017-19

	unadjRR	adjRR*	p (adj)
Brain scan <1 hr	1.09 [1.07,1.12]	1.07 [1.05,1.10]	<0.001
Intravenous thrombolysis	1.05 [0.97,1.12]	1 [0.93,1.07]	0.97
Direct admission to SU <4 hrs	1.16 [1.14,1.18]	1.15 [1.13,1.17]	<0.001
Swallow screen <4 hrs	1.04 [1.03,1.06]	1.03 [1.02,1.05]	<0.001
Stroke specialist assessment <24 hrs	1.07 [1.06,1.08]	1.06 [1.05,1.07]	<0.001
Stroke nurse assessment <24 hrs	1.02 [1.02,1.03]	1.02 [1.01,1.03]	<0.001
Physiotherapy assessment <72 hrs	1.02 [1.01,1.02]	1.01 [1.01,1.02]	<0.001
OT assessment <72 hrs	1.03 [1.02,1.04]	1.03 [1.02,1.03]	<0.001
Swallow assessment <72 hrs	1.04 [1.03,1.05]	1.03 [1.02,1.04]	<0.001
Communication assessment <72 hrs	1.04 [1.03,1.06]	1.04 [1.03,1.05]	<0.001
At least 90% stay in stroke unit	1 [0.98,1.02]	1 [0.98,1.02]	0.97
*Adjusted for Age and NIHSS at Arrival			



What happened to early mortality?

SSNAP Mortality rates by COVID status

	Confirmed	Suspected	Negative	Unknown	р
n	199	351	1878	7043	
7-day in-hospital mortality	22.1%	21.4%	14.1%	6.0%	<0.001
Mortality by discharge*	54.8%	45.6%	21.0%	10.4%	<0.001

^{*}Underestimated by early analysis

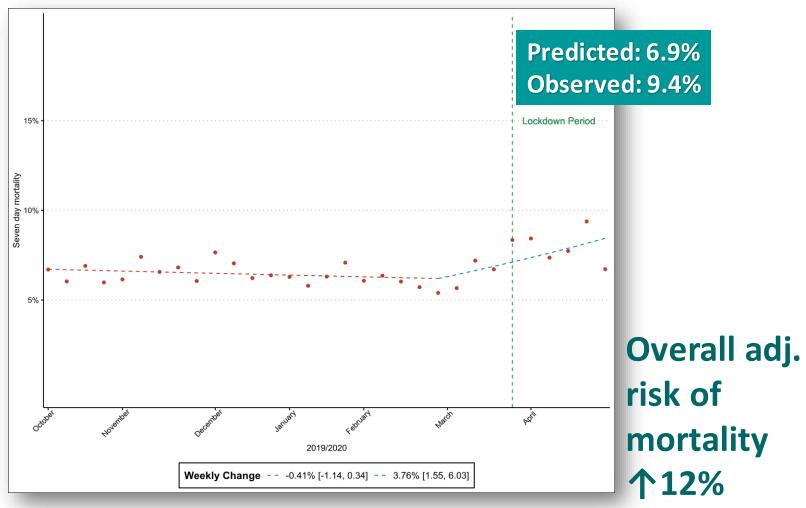
For March-April admissions	unadjRR	adjRR*	p (adj)
7-day in-hospital mortality	2.58 [2.10, 3.17]	1.41 [1.11, 1.80]	0.006
In-hospital mortality	3.62 [3.22, 4.07]	2.15 [1.84, 2.51]	<0.001

^{*}Adjusted for age and stroke severity
Please note these findings are from 'SSNAP COVID-19 Portfolio for 23 March - 30 April 2020 admissions' and 'SSNAP COVID-19
Portfolio for May 2020 admissions' that has not yet published and therefore these results may be subject to change and are not for onward sharing



What happened to Mortality?

SSNAP 7-day crude mortality rate





Stroke and COVID-19: four answers

- 1. What has happened to stroke admissions?
 - fell overall by about 13%; fewer milder strokes
- 2. What has happened to reperfusion?
 - seemed to hold up pretty well
- 3. What has happened to clinical quality?
 - improved thanks to fewer admissions and more beds
- 4. What has happened to mortality?
 - increased significantly, and dramatically so if your patient had stroke + COVID-19



QUESTIONS AND ANSWERS

Please remember to keep yourself muted during the Q&A session.

If you would like to ask any questions, please use the chat function (you can find it at the bottom of your screen).





Thank you for attending An Insight into Stroke Care during COVID-19

If you would like to send us any comments remember you can do it by email to ssnap@kcl.ac.uk

Remember you can find SSNAP Helphotes and guidance going to https://ssnap.zendesk.com/



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