

# Preliminary Agenda

## Stroke Prevention and Management

Clinical practice guidelines and associated implementation strategies are essential to promote optimal, evidence-based practices in stroke prevention and management.

While current practice guidelines are generally in agreement, specific recommendations may differ, reflecting diverging interpretations of the available evidence or the lack of sufficient data to make evidence-based recommendations. In addition, a number of questions arise as a result of a rapidly changing clinical

landscape and attempts at addressing unmet clinical needs.

The Guideline Forum on Stroke Prevention and Management aims to gather a multidisciplinary panel of leading academic international experts and industry representatives involved in basic and clinical research to discuss the latest evidence, ongoing research and controversial issues that have implications for clinical practice.

### Draft Agenda

- Welcome and introduction
- Methodological issues in clinical practice guideline development
  - » Selection of working group members
  - » Systematic literature review and evidence tables
  - » The process from evidence to recommendations
  - » Levels of evidence and strengths of recommendations
  - » Managing conflicts of interest

### Early Management of Patients with Acute Ischaemic Stroke

- Emergency imaging in patients with acute ischaemic stroke
  - » Information needed before any specific treatment is initiated: current recommendations
  - » Wake-up stroke
  - » What do we expect from additional imaging paradigms (CT perfusion and CTA, MRI perfusion or diffusion imaging)?
- Endovascular treatment of acute ischemic stroke: stent retrievers and other thrombectomy/aspiration devices
  - » Eligibility criteria and prehospital patient selection
  - » Timing
- Medical treatment in the early management of acute ischemic stroke: thrombolysis
  - » Debated criteria for treatment: timing (3 h, 4.5 h, 6h?), age (<80 years?), the diabetic patient, antithrombotic treatment and antidotes
- Stroke care: organizational aspects to reduce time to treatment
  - » Reducing pre-hospital and in-hospital delays: can we make evidence-based recommendations?

### Prevention of Stroke in Patients with Large Artery Atherosclerosis

- Cryptogenic stroke and embolic stroke of undetermined source (ESUS)
  - » Unknown causes of cerebral infarcts: diagnostic approaches and therapeutic options
  - » Detection of occult atrial fibrillation
- Prevention of early recurrent stroke after TIA or minor stroke: medical and organizational aspects
- Role of new antiplatelet agents for stroke prevention in patients with non-cardioembolic stroke
  - » Can we expect a net clinical improvement due to a more potent effect in comparison with established antiplatelet agents?
- Oral anticoagulants versus antiplatelet agents for prevention of stroke/TIA in patients with large artery atherosclerosis
  - » Extracranial and intracranial stenosis
  - » Are NOACs a game changer?
- Interventional approaches: where do we stand?
  - » Carotid endarterectomy (CEA) versus carotid angioplasty and stenting (CAS)
  - » Extracranial-intracranial bypass

### Stroke Prevention in Patients with Nonvalvular Atrial Fibrillation

- Evaluation of stroke and bleeding risks in patients with AF – where do we stand?
- Stroke risk stratification and indications for anticoagulant treatment
  - » Is there a consensus on the CHA2DS2-VASc score?
  - » Identifying AF patients at low risk of stroke in whom oral anticoagulation is not recommended
- Bleeding risk assessment
  - » Risk scores, role of selected biomarkers
  - » Appropriate clinical use of bleeding risk scores
- Which anticoagulant treatment to prevent stroke in AF?
  - » VKAs vs NOACs
  - » Which NOAC for which patient?
  - » Real-world evidence vs clinical trials
  - » Advances in the development of reversal agents
- » Nonpharmacological options for stroke prevention in AF
  - » LAA occlusion
  - » LAA occlusion or excision concomitant to cardiac surgery
  - » Patient selection: lack of clear consensus
- Patients with AF and clinically apparent CAD undergoing PCI with stenting
  - » What are currently the optimal antithrombotic strategies (which combination, which duration)?
  - » PIONEER AF-PCI and ongoing trials

### CO-CHAIRS

#### Prof. Hans-Christoph Diener

MD, PhD, FAHA, FAAN  
Senior Professor for Clinical Neurosciences - Department of Neurology University Duisburg-Essen, Germany



#### Prof. Stuart J. Connolly

MD, FRCP(C)  
Professor of Medicine at McMaster University and a Cardiac Electrophysiologist at Hamilton Health Sciences Canada

