WEBVTT

NOTE duration:"00:14:22"

NOTE recognizability:0.835

NOTE language:en-us

NOTE Confidence: 0.98674935

00:00:00.000 --> 00:00:00.470 It's.

NOTE Confidence: 0.761502594

00:00:05.670 --> 00:00:11.580 Yes, OK, perfect. Alright, uh.

NOTE Confidence: 0.761502594

00:00:11.580 --> 00:00:14.210 So I'm just gonna come.

NOTE Confidence: 0.761502594

00:00:14.210 --> 00:00:17.546 Present some investigator initiated

NOTE Confidence: 0.761502594

00:00:17.546 --> 00:00:21.130 studies here were myself and some

NOTE Confidence: 0.761502594

00:00:21.130 --> 00:00:24.214 of my colleagues are doing so.

NOTE Confidence: 0.761502594

00:00:24.214 --> 00:00:26.218 The first one I'm going to

NOTE Confidence: 0.761502594

00:00:26.220 --> 00:00:28.660 present this perfuse icast,

NOTE Confidence: 0.761502594

00:00:28.660 --> 00:00:31.418 which was submitted last year

NOTE Confidence: 0.761502594

00:00:31.418 --> 00:00:34.896 and we got some comments and we

NOTE Confidence: 0.761502594

00:00:34.896 --> 00:00:36.664 are resubmitting in November.

NOTE Confidence: 0.761502594

00:00:36.670 --> 00:00:38.970 So some background about entrepreneurial

NOTE Confidence: 0.761502594

00:00:38.970 --> 00:00:41.740 after Austero Sis as everyone knows,

NOTE Confidence: 0.761502594

1

00:00:41.740 --> 00:00:42.790 intracranial symptomatic

00:00:42.790 --> 00:00:44.890 large vessel after all.

00:00:44.890 --> 00:00:47.638 As a strong predictor of earlier

00:00:47.638 --> 00:00:49.470 occurrence and current treatment

00:00:49.546 --> 00:00:52.236 consists of aggressive medical treatment

00:00:52.236 --> 00:00:54.492 with anti thrombotic treatment,

00:00:54.492 --> 00:00:56.418 mainly dual antiplatelets

00:00:56.418 --> 00:00:58.344 high intensity statin,

00:00:58.350 --> 00:01:02.030 risk factor modification and lifestyle

00:01:02.030 --> 00:01:05.806 coaching and this was based on the

00:01:05.810 --> 00:01:09.770 sample's trial that samples and visit.

00:01:09.770 --> 00:01:12.662 They both tested standing and showed

00:01:12.662 --> 00:01:14.590 superiority of medical treatment.

00:01:14.590 --> 00:01:15.583 But you know.

00:01:15.583 --> 00:01:17.900 The question that comes is the best

00:01:17.968 --> 00:01:20.398 medical treatment work for everyone,

NOTE Confidence: 0.761502594

00:01:20.400 --> 00:01:24.636 and this is a nice study or figure here.

NOTE Confidence: 0.761502594

00:01:24.636 --> 00:01:28.140 Comparing samples to wested and you can see.

NOTE Confidence: 0.761502594

00:01:28.140 --> 00:01:31.228 So this is the medical arm of samples

NOTE Confidence: 0.761502594

00:01:31.228 --> 00:01:34.787 and this is what patients and you can see

NOTE Confidence: 0.761502594

00:01:34.787 --> 00:01:37.959 that the risk is significantly lower.

NOTE Confidence: 0.761502594

00:01:37.960 --> 00:01:39.313 Occurrence and Sampras,

NOTE Confidence: 0.761502594

00:01:39.313 --> 00:01:42.470 versus what sets or medical treatment over

NOTE Confidence: 0.761502594

00:01:42.540 --> 00:01:45.480 the past decade has significantly improved.

NOTE Confidence: 0.761502594

00:01:45.480 --> 00:01:49.464 But unfortunately the recurrence risk using

NOTE Confidence: 0.761502594

00:01:49.464 --> 00:01:52.945 real-world data is still relatively high,

NOTE Confidence: 0.761502594

00:01:52.945 --> 00:01:56.877 and this is a study from Northwestern

NOTE Confidence: 0.761502594

00:01:56.877 --> 00:02:00.866 University from Chicago showing that

NOTE Confidence: 0.761502594

00:02:00.866 --> 00:02:04.214 even in patients who were treated.

NOTE Confidence: 0.761502594

00:02:04.220 --> 00:02:08.948 Using the sample as a treatment regimen,

NOTE Confidence: 0.761502594

00:02:08.948 --> 00:02:10.970 aggressive medical treatment.

NOTE Confidence: 0.761502594

00:02:10.970 --> 00:02:11.796 48 patients.

NOTE Confidence: 0.761502594

00:02:11.796 --> 00:02:15.520 The risk of recurrence at 30 days was 20%,

NOTE Confidence: 0.761502594

00:02:15.520 --> 00:02:19.652 so that's still significantly high and

NOTE Confidence: 0.761502594

00:02:19.652 --> 00:02:21.828 there's a lot of work that still needs

NOTE Confidence: 0.761502594

00:02:21.828 --> 00:02:24.070 to be done, and reducing the risks.

NOTE Confidence: 0.761502594

00:02:24.070 --> 00:02:26.200 So why those medical treatments fail?

NOTE Confidence: 0.761502594

00:02:26.200 --> 00:02:27.720 Of course you know medication,

NOTE Confidence: 0.761502594

00:02:27.720 --> 00:02:30.100 non compliance or risk factor

NOTE Confidence: 0.761502594

00:02:30.100 --> 00:02:32.480 control is a contributing factor.

NOTE Confidence: 0.761502594

00:02:32.480 --> 00:02:34.175 Plavix resistance as.

NOTE Confidence: 0.761502594

00:02:34.175 --> 00:02:37.565 Mentioned, uh earlier today by uh,

NOTE Confidence: 0.761502594

00:02:37.570 --> 00:02:40.790 you know, Doctor Rodrick had mentioned that,

NOTE Confidence: 0.761502594

00:02:40.790 --> 00:02:43.275 you know, traffics resistance may

NOTE Confidence: 0.761502594

00:02:43.275 --> 00:02:45.760 be a component and diagonal,

NOTE Confidence: 0.761502594

00:02:45.760 --> 00:02:47.710 or maybe a better option.

NOTE Confidence: 0.761502594

00:02:47.710 --> 00:02:48.439 But you know,

NOTE Confidence: 0.761502594

00:02:48.439 --> 00:02:50.490 there's not a lot of data on that,

NOTE Confidence: 0.761502594

00:02:50.490 --> 00:02:52.132 but definitely,

NOTE Confidence: 0.761502594

00:02:52.132 --> 00:02:56.237 that's one potential contributing factor,

NOTE Confidence: 0.761502594

00:02:56.240 --> 00:03:00.125 and another one is impaired distal perfusion.

NOTE Confidence: 0.761502594

00:03:00.130 --> 00:03:02.745 So if the perfusion across

NOTE Confidence: 0.761502594

00:03:02.745 --> 00:03:04.314 stenosis is impaired,

NOTE Confidence: 0.761502594

00:03:04.320 --> 00:03:06.416 medic optimal medical treatment.

NOTE Confidence: 0.761502594

00:03:06.416 --> 00:03:09.560 Is less likely than the improve

NOTE Confidence: 0.761502594

00:03:09.560 --> 00:03:11.900 acutely the perfusion across stenosis

NOTE Confidence: 0.761502594

00:03:11.900 --> 00:03:14.896 and reduce the risk of deterioration

NOTE Confidence: 0.761502594

00:03:14.896 --> 00:03:17.756 or recurrence and the setting.

NOTE Confidence: 0.761502594

00:03:17.760 --> 00:03:21.022 So what are mechanisms of stroke in

NOTE Confidence: 0.761502594

00:03:21.022 --> 00:03:23.860 patients with intracranial Atheros sclerosis?

NOTE Confidence: 0.761502594

00:03:23.860 --> 00:03:26.788 This is from a study that we published

NOTE Confidence: 0.761502594

00:03:26.788 --> 00:03:30.376 a couple years ago looking at.

NOTE Confidence: 0.761502594

00:03:30.380 --> 00:03:33.649 The MRI and the perfusion study on

NOTE Confidence: 0.761502594

00:03:33.649 --> 00:03:36.218 on patients who have symptomatic

NOTE Confidence: 0.761502594

00:03:36.218 --> 00:03:39.010 70 to 99% stenosis,

NOTE Confidence: 0.761502594

00:03:39.010 --> 00:03:40.618 so this is a patient here.

NOTE Confidence: 0.761502594

00:03:40.620 --> 00:03:42.804 As you can see they have borderzone

NOTE Confidence: 0.761502594

00:03:42.804 --> 00:03:45.220 infarction and they have a perfusion deficit.

NOTE Confidence: 0.761502594

00:03:45.220 --> 00:03:48.412 So these fires are likely related

NOTE Confidence: 0.761502594

00:03:48.412 --> 00:03:49.961 to low blood flow.

NOTE Confidence: 0.761502594

00:03:49.961 --> 00:03:52.320 This one is a core infarct with

NOTE Confidence: 0.761502594

00:03:52.393 --> 00:03:53.899 no perfusion deficit,

NOTE Confidence: 0.761502594

00:03:53.900 --> 00:03:57.938 likely related artery and Bill Isation.

NOTE Confidence: 0.761502594

00:03:57.940 --> 00:04:00.388 This one is another patient who has a.

NOTE Confidence: 0.761502594

00:04:00.390 --> 00:04:03.594 Borderzone infarct so this is an

NOTE Confidence: 0.761502594

00:04:03.594 --> 00:04:05.730 internal borderzone cortical borderzone

NOTE Confidence: 0.761502594

00:04:05.805 --> 00:04:08.550 infarction with some perfusion delay,

NOTE Confidence: 0.761502594

00:04:08.550 --> 00:04:11.438 and this one is deep and far likely

NOTE Confidence: 0.761502594

00:04:11.438 --> 00:04:14.187 related to perforated perforated disease

NOTE Confidence: 0.761502594

00:04:14.187 --> 00:04:17.427 with no significant perfusion delay.

NOTE Confidence: 0.925504495

00:04:17.430 --> 00:04:19.910 So these are all different

NOTE Confidence: 0.925504495

00:04:19.910 --> 00:04:21.124 mechanisms of stroke.

NOTE Confidence: 0.925504495

00:04:21.124 --> 00:04:22.909 In patients with intracranial athero.

NOTE Confidence: 0.925504495

00:04:22.910 --> 00:04:25.592 So Arthur to artery embolization perforate

NOTE Confidence: 0.925504495

00:04:25.592 --> 00:04:28.649 are disease and impaired distal blood flow.

NOTE Confidence: 0.925504495

00:04:28.650 --> 00:04:31.326 So what are we looking at?

NOTE Confidence: 0.925504495

00:04:31.330 --> 00:04:34.018 Perfusion and perfused icast

NOTE Confidence: 0.925504495

00:04:34.018 --> 00:04:37.600 where our aims are two main aims.

NOTE Confidence: 0.925504495

00:04:37.600 --> 00:04:40.085 One to validate perfusion delay

NOTE Confidence: 0.925504495

00:04:40.085 --> 00:04:43.298 volume and border zone and function

NOTE Confidence: 0.925504495

00:04:43.298 --> 00:04:46.508 as biomarkers of increased recurrence

NOTE Confidence: 0.925504495

00:04:46.508 --> 00:04:49.076 in patients with symptomatic

NOTE Confidence: 0.925504495

00:04:49.169 --> 00:04:51.739 70 to 99 anterior circulation.

NOTE Confidence: 0.925504495

00:04:51.740 --> 00:04:55.610 I cast and the second one is to determine

NOTE Confidence: 0.925504495

00:04:55.610 --> 00:04:59.959 the 90 day recurrence rate in patients with.

NOTE Confidence: 0.925504495

00:04:59.960 --> 00:05:02.132 You know each of the biomarkers

NOTE Confidence: 0.925504495

00:05:02.132 --> 00:05:03.218 borderzone and fart,

NOTE Confidence: 0.925504495

00:05:03.220 --> 00:05:04.708 optimal perfusion, delay,

NOTE Confidence: 0.925504495

00:05:04.708 --> 00:05:06.196 threshold and volume,

NOTE Confidence: 0.925504495

00:05:06.200 --> 00:05:09.546 and the third one is when both

NOTE Confidence: 0.925504495

00:05:09.546 --> 00:05:10.980 are combined together.

NOTE Confidence: 0.925504495

00:05:10.980 --> 00:05:12.810 The outcomes so the primary

NOTE Confidence: 0.925504495

00:05:12.810 --> 00:05:14.274 outcome is recurrent stroke,

NOTE Confidence: 0.925504495

00:05:14.280 --> 00:05:16.470 or that at 90 days we

NOTE Confidence: 0.925504495

00:05:16.470 --> 00:05:17.565 have secondary outcomes.

NOTE Confidence: 0.925504495

00:05:17.570 --> 00:05:19.070 These patients are going to

NOTE Confidence: 0.925504495

00:05:19.070 --> 00:05:20.570 be followed for one year,

NOTE Confidence: 0.925504495

00:05:20.570 --> 00:05:22.820 so the secondary outcome is looking

NOTE Confidence: 0.925504495

00:05:22.820 --> 00:05:25.179 at the 12 month recurrent stroke

NOTE Confidence: 0.925504495

00:05:25.179 --> 00:05:27.909 or that and we're looking at also

NOTE Confidence: 0.925504495

00:05:27.909 --> 00:05:30.287 90 day modified Rankin scale.

NOTE Confidence: 0.925504495

00:05:30.290 --> 00:05:32.526 There's an outcome adjudication

NOTE Confidence: 0.925504495

00:05:32.526 --> 00:05:35.880 committee that will be adjudicating all

NOTE Confidence: 0.925504495

00:05:35.962 --> 00:05:39.268 outcomes in our study inclusion exclusion,

NOTE Confidence: 0.925504495

00:05:39.270 --> 00:05:41.937 so ischemic stroke in the setting of.

NOTE Confidence: 0.925504495

00:05:41.940 --> 00:05:44.478 70% or more stenosis of UM,

NOTE Confidence: 0.925504495

00:05:44.480 --> 00:05:47.240 the M1 segment or the intracranial

NOTE Confidence: 0.925504495

00:05:47.240 --> 00:05:49.980 ICA less than three days from

NOTE Confidence: 0.925504495

00:05:49.980 --> 00:05:52.829 last known normal NIH zero to 10.

NOTE Confidence: 0.925504495

00:05:52.830 --> 00:05:54.298 Three more with MRSA.

NOTE Confidence: 0.925504495

00:05:54.298 --> 00:05:55.898 Zero to three exclusion.

NOTE Confidence: 0.925504495

00:05:55.898 --> 00:05:58.388 Other competing mechanisms or unable

NOTE Confidence: 0.925504495

00:05:58.388 --> 00:06:01.859 to obtain MRI or perfusion imaging.

NOTE Confidence: 0.925504495

00:06:01.860 --> 00:06:04.810 Patients will be managed medically.

NOTE Confidence: 0.925504495

00:06:04.810 --> 00:06:07.888 Dual antiplatelets for 90 days, then single.

NOTE Confidence: 0.925504495

00:06:07.888 --> 00:06:10.258 Agent high intensity statin therapy

NOTE Confidence: 0.925504495

00:06:10.258 --> 00:06:12.670 were also planning each patient.

NOTE Confidence: 0.925504495

00:06:12.670 --> 00:06:16.240 With a lifestyle coach using the same

NOTE Confidence: 0.925504495

00:06:16.240 --> 00:06:19.744 company that was used in the sample's trial,

NOTE Confidence: 0.925504495

00:06:19.744 --> 00:06:22.216 it's also being used in Captiva

NOTE Confidence: 0.925504495

00:06:22.216 --> 00:06:25.346 and an increased intervent so you

NOTE Confidence: 0.925504495

00:06:25.346 --> 00:06:28.450 know the study is going to pay for

NOTE Confidence: 0.925504495

00:06:28.549 --> 00:06:31.769 a lifestyle coach to try to ensure

NOTE Confidence: 0.925504495

00:06:31.770 --> 00:06:34.155 that lifestyle modifications are done

NOTE Confidence: 0.925504495

00:06:34.155 --> 00:06:37.566 risk factor control as well as an

NOTE Confidence: 0.925504495

00:06:37.566 --> 00:06:39.926 important aspect of medical management.

NOTE Confidence: 0.925504495

00:06:39.930 --> 00:06:43.129 So this is a biomarker validation study.

NOTE Confidence: 0.925504495

00:06:43.130 --> 00:06:45.054 That has a go.

NOTE Confidence: 0.925504495

00:06:45.054 --> 00:06:49.110 No go criteria to move forward for

NOTE Confidence: 0.925504495

00:06:49.110 --> 00:06:51.755 potential interventional study testing,

NOTE Confidence: 0.925504495

00:06:51.755 --> 00:06:53.325 potentially angioplasty,

NOTE Confidence: 0.925504495

00:06:53.325 --> 00:06:57.955 plus or minus standing in the high

NOTE Confidence: 0.925504495

00:06:57.955 --> 00:07:00.925 risk patients who have impaired distal

NOTE Confidence: 0.925504495

00:07:00.925 --> 00:07:03.488 perfusion based on the biomarkers.

NOTE Confidence: 0.925504495

00:07:03.490 --> 00:07:06.479 So this study would move forward an

NOTE Confidence: 0.925504495

00:07:06.479 --> 00:07:09.115 interventional study if the 90 day

NOTE Confidence: 0.925504495

00:07:09.115 --> 00:07:11.250 recurrence risk and the validated

NOTE Confidence: 0.925504495

00:07:11.250 --> 00:07:13.118 biomarkers was more than 15.

NOTE Confidence: 0.925504495

00:07:13.120 --> 00:07:13.652 Percent,

NOTE Confidence: 0.925504495

00:07:13.652 --> 00:07:17.020 that is the the 95% confidence

NOTE Confidence: 0.925504495

00:07:17.020 --> 00:07:19.706 interval lies above 15%.

NOTE Confidence: 0.925504495

00:07:19.706 --> 00:07:24.368 The sample size calculation was 250

NOTE Confidence: 0.925504495

00:07:24.368 --> 00:07:26.854 patients that accounted for 15%

NOTE Confidence: 0.925504495

00:07:26.854 --> 00:07:29.472 loss to follow up and that gives

NOTE Confidence: 0.925504495

00:07:29.472 --> 00:07:31.688 super adequate power for all aims.

NOTE Confidence: 0.925504495

00:07:31.690 --> 00:07:35.827 The projected study is over 4 1/2

NOTE Confidence: 0.925504495

00:07:35.827 --> 00:07:39.288 years with recruitment over 33 months.

NOTE Confidence: 0.925504495

00:07:39.290 --> 00:07:41.354 So that's the first study we

NOTE Confidence: 0.925504495

00:07:41.354 --> 00:07:42.730 re submitting in November,

NOTE Confidence: 0.925504495

00:07:42.730 --> 00:07:45.649 so fingers crossed.

NOTE Confidence: 0.925504495

00:07:45.650 --> 00:07:49.416 The second study that was proposed Genentech.

NOTE Confidence: 0.925504495

00:07:49.420 --> 00:07:52.036 It's looking at the safety of

NOTE Confidence: 0.925504495

00:07:52.036 --> 00:07:54.339 alteplase and patients on direct

NOTE Confidence: 0.925504495

00:07:54.339 --> 00:07:56.719 oral anticoagulants and this is

NOTE Confidence: 0.925504495

00:07:56.719 --> 00:07:59.761 called that by myself and Kristaps

NOTE Confidence: 0.925504495

00:07:59.761 --> 00:08:03.090 threats from here from Brown so

NOTE Confidence: 0.925504495

00:08:03.090 --> 00:08:05.778 we know that patients with a third

NOTE Confidence: 0.925504495

00:08:05.778 --> 00:08:07.614 face heightened risk of ischemic

NOTE Confidence: 0.925504495

00:08:07.614 --> 00:08:10.932 stroke and this risk is reduced by

NOTE Confidence: 0.925504495

00:08:10.932 --> 00:08:12.564 oral anticoagulation and recent

NOTE Confidence: 0.925504495

00:08:12.564 --> 00:08:14.616 studies have shown that in patients

NOTE Confidence: 0.925504495

00:08:14.616 --> 00:08:15.300 with history

NOTE Confidence: 0.816155769230769

00:08:15.362 --> 00:08:15.998 of a field.

NOTE Confidence: 0.816155769230769

00:08:16.000 --> 00:08:18.760 Or hospitalized for ischemic stroke.

NOTE Confidence: 0.816155769230769

00:08:18.760 --> 00:08:21.298 Nearly 40% of them were using

NOTE Confidence: 0.816155769230769

00:08:21.298 --> 00:08:24.039 anticoagulation at the time of the event,

NOTE Confidence: 0.816155769230769

00:08:24.040 --> 00:08:26.273 and 50% of which war were on

NOTE Confidence: 0.816155769230769

00:08:26.273 --> 00:08:28.370 a direct oral anticoagulant.

NOTE Confidence: 0.816155769230769

00:08:28.370 --> 00:08:30.820 So these patients are typically

NOTE Confidence: 0.816155769230769

00:08:30.820 --> 00:08:32.780 excluded from from alteplase.

NOTE Confidence: 0.816155769230769

00:08:32.780 --> 00:08:36.964 And actually we looked at data from two

NOTE Confidence: 0.816155769230769

00:08:36.964 --> 00:08:39.440 large comprehensive stroke centers,

NOTE Confidence: 0.816155769230769

00:08:39.440 --> 00:08:43.496 where in 130% of the exclusion

NOTE Confidence: 0.816155769230769

00:08:43.496 --> 00:08:46.810 of patients excluded from TPA.

NOTE Confidence: 0.816155769230769

00:08:46.810 --> 00:08:49.570 Who would be otherwise eligible were

NOTE Confidence: 0.816155769230769

00:08:49.570 --> 00:08:52.782 excluded only because they were on a

NOTE Confidence: 0.816155769230769

00:08:52.782 --> 00:08:55.362 direct oral anticoagulants within 48 hours,

NOTE Confidence: 0.816155769230769

00:08:55.370 --> 00:08:58.640 and another study 194 patients

NOTE Confidence: 0.816155769230769

00:08:58.640 --> 00:09:00.665 were excluded only because they

NOTE Confidence: 0.816155769230769

00:09:00.665 --> 00:09:03.235 were on a direct oral anticoagulant

NOTE Confidence: 0.816155769230769

00:09:03.235 --> 00:09:05.785 over a 2 1/2 year period.

NOTE Confidence: 0.816155769230769

00:09:05.790 --> 00:09:08.590 So that's like 7 patients per month

NOTE Confidence: 0.816155769230769

00:09:08.590 --> 00:09:10.684 excluded only because they were

NOTE Confidence: 0.816155769230769

00:09:10.684 --> 00:09:12.739 on a direct oral anticoagulant.

NOTE Confidence: 0.816155769230769

00:09:12.740 --> 00:09:13.631 So you know,

NOTE Confidence: 0.816155769230769

00:09:13.631 --> 00:09:16.390 it's all to play safe and these patients.

NOTE Confidence: 0.816155769230769

00:09:16.390 --> 00:09:18.390 Why should we? I think that it's safe.

NOTE Confidence: 0.816155769230769

00:09:18.390 --> 00:09:21.118 UM, one, you know. There are many reasons.

NOTE Confidence: 0.816155769230769

00:09:21.120 --> 00:09:23.814 One doax have improved safety profile

NOTE Confidence: 0.816155769230769

00:09:23.814 --> 00:09:26.478 and lower risk of intracranial

NOTE Confidence: 0.816155769230769

00:09:26.478 --> 00:09:28.809 hemorrhage than warfarin.

NOTE Confidence: 0.816155769230769

00:09:28.810 --> 00:09:31.170 And another important reason is

NOTE Confidence: 0.816155769230769

00:09:31.170 --> 00:09:34.587 that dogs have a short half life

NOTE Confidence: 0.816155769230769

00:09:34.587 --> 00:09:37.954 and as you see here from some

NOTE Confidence: 0.816155769230769

00:09:37.954 --> 00:09:42.150 pharmacokinetic data and this is on 10A.

NOTE Confidence: 0.816155769230769

00:09:42.150 --> 00:09:45.078 Anti 10A treatments and you can

NOTE Confidence: 0.816155769230769

00:09:45.078 --> 00:09:47.909 see that apixaban within 12 hours.

NOTE Confidence: 0.816155769230769

00:09:47.910 --> 00:09:50.878 The level is pretty low rivaroxaban

NOTE Confidence: 0.816155769230769

00:09:50.878 --> 00:09:54.084 at 24 hours the level is lower

NOTE Confidence: 0.816155769230769

00:09:54.084 --> 00:09:57.263 edoxaban at 12 hours and there's

NOTE Confidence: 0.816155769230769

00:09:57.263 --> 00:09:59.978 similar pharmacokinetic data for the

NOTE Confidence: 0.816155769230769

00:09:59.978 --> 00:10:02.638 bigger Tran showing that you know

NOTE Confidence: 0.816155769230769

00:10:02.638 --> 00:10:05.790 the drug level at about 12 hours.

NOTE Confidence: 0.816155769230769

00:10:05.790 --> 00:10:06.930 Is this law as well?

NOTE Confidence: 0.816155769230769

00:10:06.930 --> 00:10:10.010 So alteplase may be safe if you're

NOTE Confidence: 0.816155769230769

00:10:10.010 --> 00:10:12.562 giving it beyond 12 hours from

NOTE Confidence: 0.816155769230769

00:10:12.562 --> 00:10:14.090 the last dose of.

NOTE Confidence: 0.816155769230769

00:10:14.090 --> 00:10:16.845 Doac and also several studies

00:10:16.845 --> 00:10:19.049 including recent meta analysis,

00:10:19.050 --> 00:10:22.340 shows that treatment alteplase treatment

00:10:22.340 --> 00:10:26.520 and patients on doac is likely safe.

00:10:26.520 --> 00:10:28.745 But these are observation ull

00:10:28.745 --> 00:10:31.269 studies with some selection bias,

00:10:31.270 --> 00:10:33.614 so it's hard to make a firm conclusion.

00:10:33.620 --> 00:10:36.068 So the aim of the study is to

00:10:36.068 --> 00:10:38.355 determine the risk of symptomatic

00:10:38.355 --> 00:10:39.957 intracranial hemorrhage with

00:10:39.957 --> 00:10:42.615 alteplase in patients with acute

00:10:42.615 --> 00:10:44.870 ischemic stroke on doac therapy.

00:10:44.870 --> 00:10:48.086 With the last doors of 12 to 48

00:10:48.086 --> 00:10:50.516 hours or apixaban and Dabigatran

00:10:50.516 --> 00:10:54.797 and 24 to 48 hours for over oxygen,

00:10:54.800 --> 00:10:58.232 and the hypothesis is that the risk of

NOTE Confidence: 0.816155769230769

00:10:58.232 --> 00:10:59.535 symptomatic intracranial hemorrhage

NOTE Confidence: 0.816155769230769

00:10:59.535 --> 00:11:02.090 is less than 10% in these patients

NOTE Confidence: 0.816155769230769

00:11:02.090 --> 00:11:04.610 we have some secondary aims as well,

NOTE Confidence: 0.816155769230769

00:11:04.610 --> 00:11:06.633 which you know I can skip for

NOTE Confidence: 0.816155769230769

00:11:06.633 --> 00:11:07.900 the purpose of time,

NOTE Confidence: 0.816155769230769

00:11:07.900 --> 00:11:10.800 so the inclusion exclusion criteria,

NOTE Confidence: 0.816155769230769

00:11:10.800 --> 00:11:13.352 any ischemic stroke eligible

NOTE Confidence: 0.816155769230769

00:11:13.352 --> 00:11:15.266 patient for alteplase.

NOTE Confidence: 0.816155769230769

00:11:15.270 --> 00:11:17.307 With the exception of being on Doac,

NOTE Confidence: 0.816155769230769

00:11:17.310 --> 00:11:18.562 and as I said,

NOTE Confidence: 0.816155769230769

00:11:18.562 --> 00:11:21.388 the last dose should be 12 to 48

NOTE Confidence: 0.816155769230769

00:11:21.388 --> 00:11:23.568 hours for apixaban and dabigatran,

NOTE Confidence: 0.816155769230769

00:11:23.570 --> 00:11:25.747 24 to 48 for the proxy ban.

NOTE Confidence: 0.816155769230769

00:11:25.750 --> 00:11:28.179 There are some exclusion criteria as well.

NOTE Confidence: 0.816155769230769

00:11:28.180 --> 00:11:31.276 We did some power calculation and

NOTE Confidence: 0.816155769230769

00:11:31.276 --> 00:11:34.180 sample size of 144 patients would

NOTE Confidence: 0.816155769230769

00:11:34.180 --> 00:11:37.330 be needed to achieve our goal and

NOTE Confidence: 0.816155769230769

00:11:37.422 --> 00:11:39.810 this would be using six centers

NOTE Confidence: 0.816155769230769

00:11:39.810 --> 00:11:42.494 and a 33 month enrollment period

NOTE Confidence: 0.816155769230769

00:11:42.494 --> 00:11:45.994 with three months of follow up so.

NOTE Confidence: 0.816155769230769

00:11:46.000 --> 00:11:48.424 I think this will be a very good

NOTE Confidence: 0.816155769230769

00:11:48.424 --> 00:11:49.980 study for our network,

NOTE Confidence: 0.816155769230769

00:11:49.980 --> 00:11:52.392 so hoping that after this conference

NOTE Confidence: 0.816155769230769

00:11:52.392 --> 00:11:55.323 we can touch base and see if any

NOTE Confidence: 0.816155769230769

00:11:55.323 --> 00:11:57.195 of the sites are not within

NOTE Confidence: 0.861982623636364

00:11:57.277 --> 00:11:59.811 our network, is is interested.

NOTE Confidence: 0.861982623636364

00:11:59.811 --> 00:12:03.672 Finally, just like 2 minutes on this.

NOTE Confidence: 0.861982623636364

00:12:03.672 --> 00:12:06.477 So this is another investigator

NOTE Confidence: 0.861982623636364

00:12:06.477 --> 00:12:09.401 initiated study that you know we're

NOTE Confidence: 0.861982623636364

00:12:09.401 --> 00:12:12.689 very fortunate to have a lot of sites,

NOTE Confidence: 0.861982623636364

00:12:12.690 --> 00:12:16.925 including sites from our own RCC contribute.

NOTE Confidence: 0.861982623636364

00:12:16.930 --> 00:12:20.188 So this is a large retrospective,

NOTE Confidence: 0.861982623636364

00:12:20.190 --> 00:12:23.376 multicenter study comparing doax warfarin for

NOTE Confidence: 0.861982623636364

00:12:23.376 --> 00:12:26.889 the treatment of venous sinus thrombosis.

NOTE Confidence: 0.861982623636364

00:12:26.890 --> 00:12:30.537 So we know that the recent randomized

NOTE Confidence: 0.861982623636364

00:12:30.537 --> 00:12:32.650 trial suggested that the bigger trend

NOTE Confidence: 0.861982623636364

00:12:32.650 --> 00:12:34.830 may be as effective as warfarin,

NOTE Confidence: 0.861982623636364

00:12:34.830 --> 00:12:37.310 and the treatment of CVD.

NOTE Confidence: 0.861982623636364

00:12:37.310 --> 00:12:39.740 Our aim was to compare direct

NOTE Confidence: 0.861982623636364

00:12:39.740 --> 00:12:40.550 oral anticoagulants.

NOTE Confidence: 0.861982623636364

00:12:40.550 --> 00:12:43.190 Warfarin and a real world

NOTE Confidence: 0.861982623636364

00:12:43.190 --> 00:12:45.351 international cohort. So we had.

NOTE Confidence: 0.861982623636364

00:12:45.351 --> 00:12:46.819 This is a retrospective.

NOTE Confidence: 0.861982623636364

00:12:46.820 --> 00:12:49.118 Study that had sites from EU.

NOTE Confidence: 0.861982623636364

00:12:49.120 --> 00:12:51.478 S. Europe New Zealand over six

NOTE Confidence: 0.861982623636364

00:12:51.478 --> 00:12:54.399 years and all of these patients.

NOTE Confidence: 0.861982623636364

19

00:12:54.400 --> 00:12:56.974 We included them if they received

NOTE Confidence: 0.861982623636364

00:12:56.974 --> 00:12:58.690 oral anticoagulation and had

NOTE Confidence: 0.861982623636364

00:12:58.760 --> 00:13:01.320 confirmed cerebral venous thrombosis.

NOTE Confidence: 0.861982623636364

00:13:01.320 --> 00:13:03.756 We used inverse probability of treatment.

NOTE Confidence: 0.861982623636364

00:13:03.760 --> 00:13:07.460 Weighted Cox regression models.

NOTE Confidence: 0.861982623636364

00:13:07.460 --> 00:13:09.452 Outcomes were recurrence cerebral

NOTE Confidence: 0.861982623636364

00:13:09.452 --> 00:13:11.288 or systemic, venous thrombosis,

NOTE Confidence: 0.861982623636364

00:13:11.288 --> 00:13:13.802 death and we looked at recanalization

NOTE Confidence: 0.861982623636364

00:13:13.802 --> 00:13:16.555 rates and major hemorrhage and patients

NOTE Confidence: 0.861982623636364

00:13:16.555 --> 00:13:20.050 treated with warfarin versus doac's.

NOTE Confidence: 0.861982623636364

00:13:20.050 --> 00:13:24.816 So the results we had 1029 CVD

NOTE Confidence: 0.861982623636364

00:13:24.816 --> 00:13:27.848 patients across 27 centers.

NOTE Confidence: 0.861982623636364

00:13:27.850 --> 00:13:30.280 847 met our inclusion criteria and

NOTE Confidence: 0.861982623636364

00:13:30.280 --> 00:13:33.026 these are the study sites and EU,

NOTE Confidence: 0.861982623636364

00:13:33.026 --> 00:13:36.034 S and Europe and we had a site

NOTE Confidence: 0.861982623636364

00:13:36.034 --> 00:13:38.548 in New Zealand as well,

NOTE Confidence: 0.861982623636364

00:13:38.550 --> 00:13:41.655 so the paper is now under review and stroke

NOTE Confidence: 0.861982623636364

00:13:41.655 --> 00:13:44.727 and to be presented at the upcoming ISC.

NOTE Confidence: 0.861982623636364

00:13:44.730 --> 00:13:47.862 So stay tuned and I will stop here and

NOTE Confidence: 0.861982623636364

00:13:47.862 --> 00:13:50.815 thank you for your attention and I'll.

NOTE Confidence: 0.861982623636364

00:13:50.820 --> 00:13:52.008 Take any questions.

NOTE Confidence: 0.70443533

00:13:59.780 --> 00:14:03.808 Charlie, this is the great presentation

NOTE Confidence: 0.70443533

00:14:03.808 --> 00:14:06.556 for the DOAX study with Alteplase,

NOTE Confidence: 0.70443533

00:14:06.556 --> 00:14:09.733 there's going to be an exclusion if they're

NOTE Confidence: 0.70443533

00:14:09.733 --> 00:14:12.055 also on antiplatelet therapy or not,

NOTE Confidence: 0.70443533

00:14:12.060 --> 00:14:16.029 I don't think so, but you know

NOTE Confidence: 0.70443533

00:14:16.029 --> 00:14:18.829 something to consider for sure.

NOTE Confidence: 0.70443533

00:14:18.830 --> 00:14:22.000 Thank you, thank you. OK, so.