

Minutes of MT2020 Regional Committee Launch Meeting held on Sept 12th (Virtual Meeting)

SVIN's Mission Thrombectomy 2020 (MT2020), which is a multiyear worldwide public health campaign to accelerate access to mechanical thrombectomy for ischemic stroke, conducted a global Regional Committees (RC) Launch meeting on Sept 12th, attended by ~100 physicians and key stroke care stakeholders from all across the world. The agenda of the meeting was to form Regional Committees which will accelerate the Stroke care in their regions and help reduce the global disparity in levels of thrombectomy.

Overview of MT2020 by Dr Dileep Yavagal

- MT2020's goal is to integrate the disparate knowledge of barriers to MT access worldwide
- Unifying multiple efforts by local and specialty societies to accelerate MT access globally
- Globally doubling the access to MT every 2 years

Keynote Speech - Dr Mitchell Elkind (President of AHA/ASA) on "Global challenges to Stroke Care during COVID-19"

- People suffering from cardiovascular or neurovascular diseases possess a higher risk of getting infected by COVID and vice versa
- Risk of stroke increases to seven-fold if a person is infected by COVID as opposed to flu virus
- Barriers to stroke treatment and diagnosis because of pandemic
 - Patients avoiding hospitals for treatment and diagnosis
 - Admissions having more severe strokes (Up to 25% less stroke admission but with severe strokes)

QnA with Dr Elkind

- Disparity in healthcare because of the pandemic: amplification of the pre-existing disparities in the system like high comorbidities in African Americans, further exemplified due to COVID
- Better communication through staff and use of tele medicine is required
- Having a family member helps/motivates the patients
- No change in outcomes of MT due to COVID because of proper precautions being taken during the intervention

Dr Violiza Inoa and Dr Dileep Yavagal presentation on "Need for Regional Committees":

- MT cost-benefit analysis: If invested in stroke health care facility now, it can help in saving up to \$602 million in next 5 years
- Global disparity in treatment and diagnostic centres for Ischemic strokes (5% cases treated by MT globally)
- Regional Committee formation and structure:

- 2 Co-Chairs (Vascular Chair and Interventional Chair)
- US liaison
- Other valuable stakeholders like stroke coordinator etc.
- Major Projects for RC
 - Roster completion
 - White Paper dissemination
 - Data collection
 - PHI (Public Health Intervention)

Orbees Medical demonstration on Trello:

Orbees Medical, who acts as the project managers for MT2020, demonstrated “Trello”, a project management tool, designed to keep track of all the RC’s activities.

All the attendees were divided into 8 breakout regions based on the part of the world they were from, where they discussed about the problems in their region. Each region was given a walkthrough of the Trello dashboard by an Orbees person during their respective break-out sessions.

Break-out session

Europe:

- White paper needs to be translated for better adoption by each RC
- In Romania, MT had very good initial adoption, but now it is **stagnant**. They are unable to push for higher numbers
- IV-tPA is used but it is **difficult to explain to the authorities the cost effectiveness of MT**.

APAC & Oceania:

- Regions are divided based upon types of geographical challenges and higher representation from each region is required for making the mission a success
- Many regions of APAC & Oceania are underdeveloped with very low penetration because of high cost of MT, **lack of infrastructure, political and cultural barriers** etc.

North America:

- Developing and executing Regional Public health interventions will help in accomplishing the goal of keeping track of performance while doing more procedures
- Challenges for North America includes **disparity in MT for rural stroke patients** – time windows severely limit the success of MT
- Physicians discussed about the importance of decreasing door to needle time

MENA:

- The region suffers from lack of data and needs generation of usable data from stakeholders through specialized surveys distributed between different levels of personnel (physicians, nursing, paramedics, policy makers, etc.)
- Need to be more inclusive of several countries which are currently missing
- **Regional diversity** based on religion, politics, etc. as a huge barrier for penetration in the MENA region

South Asia:

- In Pakistan,
 - Neurovascular space is quite underdeveloped
 - They **do not have an established stroke centre** till now. Currently, MT is being performed in some pilot centres that has **limited operating hours** (8 AM – 2 PM)
 - **No certifications available**
 - **Motivating and educating the public and the govt. should be the prime focus**
 - Patient have to pay out of pocket completely and protocols state that procedure doesn't start till payment is done – This leads to **time delays**
- India has similar problems like **high cost, no certifications and lack of awareness**
- Dr Yavagal, along with SVIN is planning to bring out **self-certifications** that will increase the access and penetration of MT
- In Bangladesh, they have a state owned 100 bed stroke centre where MT is performed; but **lacks private centres** because of less number of NI/INR/NS.
- Major suggestion from South Asia:
 - More data needs to be collected to know the real impact of AIS
 - To find regional issues and present the same to policy makers
 - Training of physicians by conducting collaborative interactive sessions with SVIN on improving MT penetration.

Post breakout session

- Dr Andrew Demchuk and Dr Dileep Yavagal discussed about North America
 - Challenge for North America – Disparity in MT for rural stroke patients
 - The two focus areas for North America would be
 - To decide on the number of RCs to be made
 - To develop public health interventions
- Dr Sheila Martins and Dr Santy Ortega discussed about LATAM and highlighted the differences between the countries and challenges they will be facing if they are grouped into one.
- Dr Ashutosh Jadhav and Dr Kaiz Asif emphasized on underrepresentation by Oceania and APAC region in terms of treatment procedures as well number of attendees
 - Suggested for engagement with local groups for better penetration
- Dr Ossama Mansour Yassin brought up the point of regional diversity based on religion, politics etc as a huge barrier for penetration in the MENA region.
- Dr Violiza Inoa discussed about Europe
 - Public health interventions for 2021 are needed and should be top focus
 - Response of European government being very positive towards the data and business strategies presented by physicians.
- Dr Nabeel Herial suggested improving data collection process to obtain a data in more transferrable form
- Dr P.N. Sylaja while discussing about South Asia brought up the topic of challenges faced by Pakistan in terms of
 - MT centres being restricted to only urban areas
 - Being owned majorly by government only and no private centers at all
 - Training of physicians by conducting collaborative sessions on improving MT penetration
- Dr Thomas Leung suggested to have a greater number of RCs because of large diversity in South-East region and thus difference in developmental stages of healthcare

Stroke coordinator session

Dr Anne Alexandrov and Dr Sushant Aroor presented developmental stages of stroke coordinator as a profession after 1995. They explained about the roles and duties of a stroke coordinator, and talked about the survey conducted in May 2020 by Mt2020 for better understanding the role of stroke coordinator in US as well as worldwide. The key takeaways were

- Absence of an official title of stroke coordinator (mainly in non-English speaking countries) although the tasks assigned were done (by nurses and physicians)
- Need for standardization as survey results also indicated interest in such activity by the respondents. Thus, an untapped opportunity present for developing clinical, diagnostic, and care procedural skills

For this MT 2020 will be taking initiatives in various forms like conducting webinars, having strategic planning, white paper collaboration with SNIS and WFITN (all these would be made available in regional translations in accordance to the requirement by the regional members)

Closing remarks by Dr Dileep Yavagal:

Developing a MT access score (on a scale of 1-10) region wise which helps in forming a baseline and helps in achieving MT2020 mission. Few Steps that are in pipeline:

- Innovative payment methods,
- Increasing supply of Neurologists/NI across the globe
- Twitter campaigns
- Connecting with WHO