

MARTIN DENIS

### *Feeding after stroke*

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Many patients admitted to hospital with an acute stroke are under nourished. Many have swallowing problems and this, with other post stroke impairments, contributes to worsening of nutritional status in a significant minority. Poor nutrition is associated with worse survival and functional outcomes. Policies for identifying under-nutrition, swallowing difficulties and feeding patients can contribute to improving patient outcomes. Prof Martin Dennis will discuss these issues, focusing particularly on the evidence from large randomized controlled trials.

NILS WAHLGREN

### *Safe Implementation of thrombolysis in stroke – European perspective*

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SITS (Safe Implementation of Treatments in Stroke) is a unique collaboration involving about 700 clinical centres in 35 countries. The aim of the SITS collaboration is to support implementation and quality development of evidence based stroke treatments, to serve as a general stroke register and to perform clinical trials and other research studies in stroke.

SITS was commissioned by the European Union Commission to monitor implementation into clinical routine of intravenous thrombolysis within the setting of the SITS Monitoring study (SITS-MOST) and by the European Union Public Health Executive Authority (PHEA) to support evidence based stroke treatments in new EU member countries within the SITS-EAST project. Moreover, SITS will form the clinical trial platform within the new EUSTROKE consortium, which received the 'Combatting stroke' research grant within the European Union Research Framework 7.

The SITS-EAST project is now in its initiation phase, during which guidelines will be agreed upon, centres will be classified according to the level of stroke services and new centres will be recruited. The next phase will include how to work with the guidelines and establish evaluation criteria.

The establishment of intravenous thrombolysis and other evidence based stroke treatments is now in fast development and this implies an obvious need for quality development and benchmarking. The SITS EAST project may become the leading instrument for this process in Europe.

#### *Title*

SITS-ISTR ('Safe Implementation of Thrombolysis in Stroke' (SITS)-International Stroke Thrombolysis Register' (ISTR), is a prospective, international, internet-based monitoring registry for safe implementation of thrombolysis in acute stroke. A pilot version of SITS-ISTR was launched on 1 January 2001, the actual version was launched on 1 January 2003.

#### *Background and purpose*

SITS was initiated by a group of ECASS investigators following the publications of the NINDS1 and ECASS trials2. The aims were to facilitate safe and broad implementation of thrombolysis and to amplify the benefit, e.g., by shortening stroke onset to treatment time, an important prognostic factor. There was concern that safety and efficacy of the treatment might differ between RCTs and the real-life situation, during implementation into clinical routine. This could occur if treatment criteria were less strictly followed and the treatment was new to many centres. A professional network involving experienced investigators could support rt-PA implementation by educational initiatives and by providing an interactive database over a secure internet connection, the SITS-ISTR. Daily updated local statistical reports benchmarked to national and international outcomes were considered important feed-back.

The main purposes of SITS-ISTR are:

1. To support the process of broad implementation of thrombolysis in stroke so that the treatment may reach all patients who may benefit.
2. To support amplification of the treatment effect, e.g., by shortening of onset to treatment time.