

FASTER TREATMENT FOR STROKE TO PREVENT DISABILITY

Montana Stroke Initiative improves technology capacity & availability of stroke protocols

Public Health Problem

- Stroke is a major cause of disability and death.
- Fast treatment can prevent disability caused by certain types of acute stroke but it must occur within 3 hours of symptom onset to preserve brain tissue.
- Ensuring timely care for stroke patients requires coordinated Emergency Medical Services and prompt Emergency Department responses using well-defined protocols.

Program

- An assessment of hospitals in Montana and northern Wyoming documented gaps in stroke services in rural and frontier counties.
- The Montana Stroke Initiative, a cooperative partnership between the Montana Cardiovascular Health Program and others working in the area of stroke care, conducted the survey and initiated a coordinated effort to address gaps. Several key hospitals in Montana obtained Primary Stroke Center certification from an organization which assures that specific stroke care processes are in place. Partners include Emergency Medical Services, the Montana Rural Healthcare Performance Improvement Network, stroke centers and stroke neurologists across the state.
- Educational opportunities and a special stroke Web site provide up-to-date information and sample stroke protocols which were also distributed to all Critical Access Hospitals in Montana.
- Public education campaigns were intended to increase awareness about stroke as an urgent, treatable medical problem.
- To assess progress, all hospitals in the region providing acute care to adults were surveyed after four years to assess availability of diagnostic, treatment and educational services. Report available at: www.dphhs.mt.gov/PHSD/cardiovascular/documents/StokeAssessment.pdf

Impact

Remarkable progress, particularly among Critical Access Hospitals, in improving capacity to prevent disability through better stroke care includes:

- Accessibility of computerized scanning technology in all hospitals, usually 24 hours a day
- Significant improvements in availability of stroke teams in hospitals and a stroke victim assessment tool for use by emergency medical services responders
- Greater availability of written protocols for acute ischemic stroke therapy in hospital emergency departments
- More stroke rehabilitation services in hospital and communities
- A telemedicine project initiated to increase resources for treating stroke

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