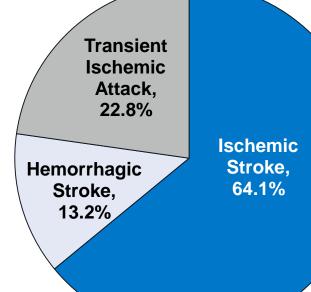


Endovascular Treatment in New York State: Before and After Updated AHA Guidelines

Introduction

The burden of stroke in New York State (NYS) is significant with stroke and transient ischemic attacks accounting for over 41,000 hospital discharges in 2014. A majority of these discharges are associated with acute ischemic stroke (IS).



Endovascular Treatment

Thrombolysis with recombinant tissue plasminogen activator (tPA) has been the primary treatment for IS with occlusion for the past 20 years. Mechanical thrombectomy devices, approved by the FDA in 2004, were not part of the standard treatment regimen for patients with IS until the 2015 release of updated guidelines recommending the use of endovascular interventions for the early management of acute IS within six hours of last known well for patients who meet specific criteria.¹

What was the Goal of this Study?

The goal of this study was to describe regional and state trends in endovascular treatments in NYS before and after the release of the updated guidelines.

Data Sources and Methodology

Data Source

The Statewide Planning and Research Cooperative System (SPARCS), an all-payer database with patient level data on demographics, diagnoses, treatments, services, and charges for every acute care hospital discharge in NYS.²

Years of Analysis

January 01, 2014 through December 31, 2014 (Q1 through Q4) January 01, 2015 through September 30, 2015 (Q1 through Q3)

Methodology

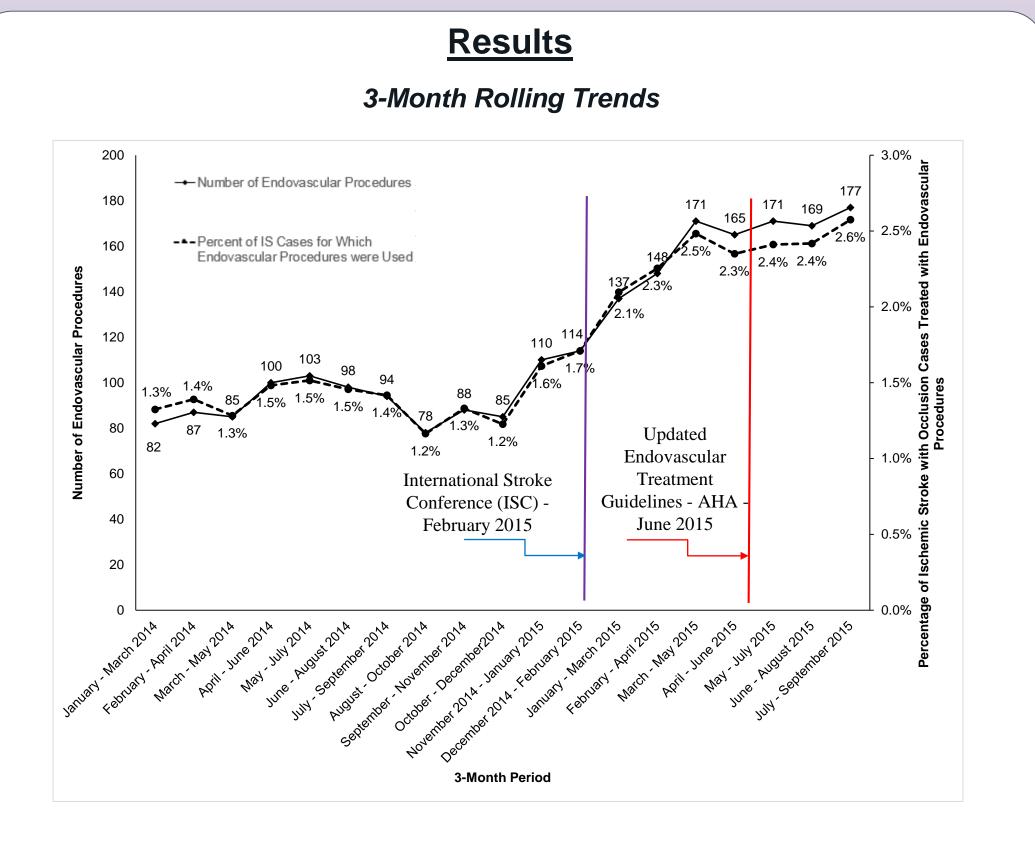
The SPARCS administrative-data was used to identify all discharges associated with acute IS with occlusion (ICD-9 Codes 433.x1 and 434.x1) and the in-hospital treatment(s) administered for IS.² Three-month rolling trends were calculated for the total number of endovascular procedures (39.7x) performed and the percentage of IS with occlusion cases treated using endovascular techniques. Stratified analyses were conducted to describe hospitals performing endovascular procedures by hospital location, teaching status, NYS stroke center designation status, comprehensive stroke center status, and Coverdell participation status.

NYS Hospitals Performing Endovascular Treatments by Number of Procedures

Endovascular	Q1 to C	3 2014	Q1 to Q3 2015		
Procedures (N)	Hospitals (N)	Hospitals (%)	Hospitals (N)	Hospitals (%)	
Less Than 5	9	33.3	4	13.8	
5 to 9	7	25.9	6	20.7	
10 to 14	6	22.2	7	24.1	
15 to 19	0	0.0	5	17.2	
20 to 24	2	7.4	3	10.3	
25 to 29	0	0.0	0	0.0	
30 to 34	2	7.4	2	6.9	
35 to 39	1	3.7	0	0.0	
40 to 44	0	0	0	0.0	
45 to 49	0	0	1	3.4	
50 or More	0	0	1	3.4	
Number of Hospitals	27	100.0	29	100.0	

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Endovascular Treatments in NYS by Region and Teaching & Stroke Center Status

	2014 (Q1 to Q3) Claims		2015 (Q1 to Q3) Claims		% Change
	N	%	N	%	
Total (Q1 through Q3)	276	100.0	479	100.0	73.6
HSA Region					
New York City	112	40.6	199	41.5	77.7
Western NY	48	17.4	89	18.6	85.4
Nassau/Suffolk	28	10.1	43	9.0	53.6
Central NY	30	10.9	42	8.8	40.0
Hudson Valley	11	4.0	35	7.3	218.2
Northeastern NY	11	4.0	32	6.7	190.9
Finger Lakes	14	5.1	24	5.0	71.4
NY/Penn	22	8.0	15	3.1	-31.8
Teaching Hospital Status					
Non-Teaching	0	0.0	19	4.0	
Teaching	276	100.0	460	96.0	66.7
NYS Stroke Center Status					
NYS Stroke Center	274	99.3	479	100.0	74.8
Not a NYS Stroke Center	2	0.7	0	0.0	-100.0
Comprehensive Stroke Ce	nter (CSC) S	Status*			
Not Comprehensive	177	64.1	343	71.6	93.8
Comprehensive*	99	35.9	136	28.4	37.4

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Endovascular Procedures	2014 (Q1 to Q3) Claims		2015 (Q1 to Q3) Claims		% Change
at NYS Stroke Ctrs	Ν	%	Ν	%	
Total (Q1 through Q3)	274	100.0	479	100.0	74.8
Coverdell Center	161	58.8	298	62.2	85.1
Non-Coverdell Center	113	41.2	181	37.8	60.2



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2. NYSDOH. Statewide Planning and Research Cooperative System (SPARCS). http://www.health.ny.gov/statistics/sparcs/