Response to Letter by Gonzalez-Hernandez et al

To the Editor:

We thank Gonzalez-Hernandez et al for their interest in our article.1 Firstly, we acknowledge that treatments similar to FASTER/EXPRESS were initiated quickly in this population, which may have contributed to the low incidence of recurrence in the first few days. Given that these strategies are frequently implemented acutely this study highlights the growing importance of persistent vessel occlusion with ongoing infarction of penumbral tissue3 as the critical “untreated” cause for stroke progression. We agree that if all proven secondary prevention treatments are used4 then the mechanism behind worsening in many cases is from progression of the presenting event, rather than a distinct recurrent event. We also agree that the classic definition of TIA (made at 24 hours) has little use in centers that can assess patients very early into their symptoms. Our work highlights the unstable nature of these patients very early in their disease process. We also found that the presence of minor neurological deficits may further identify patients who are unstable. Further studies are required in larger populations to confirm our findings. Mechanistic information that can be urgently acquired using MRI or CT/CTA is needed in future trials in these patients. This way we can assess which subset of patients benefit from individual treatments and eventually will be able to tailor treatments on an individual patient basis.

Disclosures

None.

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