Organizational Update

World Stroke Organization

Stephen Davis, MD, FRACP; Bo Norrving, MD, PhD, FESC

World Stroke Day (WSD) on October 29 is an annual highlight of our global advocacy campaign. The President attended WSD events in Hanoi and Ho Chi Minh City in 2013. Vietnam has a population of close to 90,000,000 people with an estimated 200,000 new stroke cases each year. There are currently only 17 stroke units in the country, mainly in Hanoi and Ho Chi Minh City. In Hanoi, >600 doctors attended the WSD activities, and another 500 doctors attended the program in Ho Chi Minh City. There was extensive mass media coverage of both events and attendance by Vice Ministers of Health. They indicated a commitment to formation of stroke units in rural areas, as well as increasing the numbers in urban settings.

In Myanmar, with a population of 55 million, there are no stroke units, only 25 neurologists in the entire country and the challenges are enormous. Michael Brainin and the President attended WSD activities in the capital, Yangon. The World Stroke Organization (WSO) has signed a letter of agreement with the Health Ministry in Myanmar to conduct the Cardinal Principles of Stroke Management program, involving collaboration with stroke experts in Myanmar and with a rollout over >3 years in the major cities.

The WSO has a competition for the best WSD activities conducted each year. We received >90 submissions for the 2013 awards, the campaign theme being “Because I Care.” In 2013, the top prize was awarded to the Swedish Association of Local authorities and Regions. Their superb campaign focused on public information about the importance of recognizing stroke symptoms and immediately calling the emergency hotline, an initiative adopted by all county councils and regions in Sweden. This was not only shown to have led to vastly improved public and professional awareness of stroke but also demonstrated to be cost saving and resulted in a substantial increase in the proportion of patients receiving tissue-type plasminogen activator. The American Stroke Association was awarded second prize based on a vibrant media and consumer outreach campaign, with a special emphasis on family caregivers about the warning signs of stroke. There was innovative use of social media, and their campaign had a huge effect. Third prize went to the Grupo Stroke del Peru. They conducted a campaign in provinces throughout Peru, including street marches and football matches, focusing on modification of risk factors, improving lifestyles, and the necessity of seeking urgent treatment after the onset of stroke.

We invite you to join us at the World Stroke Congress in Istanbul October 22 to 25, 2014 (http://www.kenes.com/wsc2014). This will be an exciting meeting with a global perspective. It will involve teaching courses, cutting-edge symposia, and free communications sessions, allowing dissemination of the most up-to-date and important information in the stroke field. Underlying our partnership approach, there will be joint sessions between the WSO, the World Health Organization, the World Federation of Neurology, the European Stroke Organization, the American Stroke Association, the Asian Pacific Stroke Organization, and the World Hypertension League. Several sessions have been developed by nurses, allied health professionals, and those involved in Stroke Support Organizations. The 2016 World Stroke Congress will be held in Hyderabad, India, known for both its historical interest and for being one of the high-tech cities of India.

The membership of WSO continues to expand, with >1600 members, an increase of one third from 2012. More than 60% of the individual members are from the Asian and Oceanian region. The WSO aims to partner with major regional stroke organizations with joint memberships. The Canadian Stroke Consortium, the Korean Stroke Society, and the Taiwan Stroke Society have recently agreed to form formal partnerships with the WSO with an opt-out arrangement, already in place with the Stroke Society of Australasia and the European Stroke Organization.

Organized through Michael Brainin and his committee, our educational programs are a major activity. Peter Sandercock represented the WSO at a sub-Saharan regional teaching course for young neurologists in Dakar, Senegal in 2013, involving 53 participants from 23 African countries and a collaboration with the World Federation of Neurology, European Neurological Society, and European Federation of Neurological Societies. We will be involved in a similar program in 2014 in Zambia. We have collaborated with the World Federation of Neurology to fund an international maternal newborn stroke registry and an African stroke project jointly, enhancing the capacity for stroke recognition, documentation, care, and prevention in Nigeria. The WSO is conducting a stroke teaching program in Changsha, China, in March 2014.

A WSO committee, led by Erin Lalor, is producing a Bill of Rights and prepared by patients and carers. The Bill of Rights will be launched at the World Stroke Congress in Istanbul. After the launch, we plan to invite lay supporters to join us as affiliate members, without cost, but suggesting a donation. This will be an important document of global significance and used by patients and caregivers around the World to ensure that they receive best practice management for stroke prevention, acute therapy, and long-term care.

Disclosures

None.

Key Words: organizations  stroke  world health

From the Melbourne Brain Centre at The Royal Melbourne Hospital, Parkville, Australia; and Division of Neurology, Department of Clinical Sciences, Lund University, Lund, Sweden.

Correspondence to Stephen Davis, MD, President World Stroke Organization, Melbourne Brain Centre at the Royal Melbourne Hospital and the University of Melbourne, Grattan St, Parkville, Victoria 3050, Australia. E-mail stephen.davis@mh.org.au

(Stroke. 2014;45:e84.)

© 2014 American Heart Association, Inc.

Stroke is available at http://stroke.ahajournals.org
DOI: 10.1161/STROKEAHA.114.004935

e84
Organizational Update: World Stroke Organization
Stephen Davis and Bo Norrving

*Stroke*. 2014;45:e84; originally published online April 8, 2014;
doi: 10.1161/STRKEAHA.114.004935

*Stroke* is published by the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231
Copyright © 2014 American Heart Association, Inc. All rights reserved.
Print ISSN: 0039-2499. Online ISSN: 1524-4628

The online version of this article, along with updated information and services, is located on the
World Wide Web at:
http://stroke.ahajournals.org/content/45/5/e84

Permissions: Requests for permissions to reproduce figures, tables, or portions of articles originally published in *Stroke* can be obtained via RightsLink, a service of the Copyright Clearance Center, not the Editorial Office. Once the online version of the published article for which permission is being requested is located, click Request Permissions in the middle column of the Web page under Services. Further information about this process is available in the Permissions and Rights Question and Answer document.

Reprints: Information about reprints can be found online at:
http://www.lww.com/reprints

Subscriptions: Information about subscribing to *Stroke* is online at:
http://stroke.ahajournals.org//subscriptions/