Letter by Hsieh and Lin Regarding Article, “Acute Reperfusion Therapy and Stroke Care in Asia After Successful Endovascular Trials”

To the Editor:

We agree with Toyoda et al to reconsider the different responses of Asian patients with stroke to reperfusion and other acute treatments in the era after successful endovascular trials. With the improvement of infrastructure, Asian strokologists nowadays are more capable of conducting international randomized, double-blinded, placebo-controlled trials to develop new regimens. For example, the Chinese Medicine NeuroAiD Efficacy on Stroke Recovery-Extension Study (CHIMES-E), which examined the effects of the initial 3-month treatment with MLC601 (NeuroAid, a Chinese herbal product) on long-term outcome for ≤2 years, shows positive results, although the primary efficacy end point is not reached statistically. An ongoing phase III stroke trial conducted in Taiwan is to test the neuroprotective efficacy of BNG-1, another Chinese herbal product. Concerning the unique features of Asian patients with stroke, strokologists in Asia are endeavoring to apply the scientific methods of Western medicine to explore solutions more suitable for their patients from the ancient local wisdom.

Disclosures

We are investigators of the Efficacy of BNG-1 to Treat Acute Ischemic Stroke Trial (Clinical Trial Registration—URL: http://www.clinicaltrials.gov. Unique identifier: NCT01675115).

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