CRITICAL ASPECT OF TIA MANAGEMENT AND PERSPECTIVES FOR QUALITY AND EFFICIENCY IMPROVEMENT: DATA FROM THE TIA FAST-TRACK PROJECT - REGIONE LOMBARDIA (ITALY)

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Background and Purpose— The accuracy and economical efficiency of standard TIA care was evaluated as a basis for a Project aimed to validate the performance of an optimized Fast-Track-model for TIA-Management: data from n.557 consecutive confirmed cases (2014) have been collected for comparison with 2015-16 cases-series (Prospective Study) managed following the optimized Protocol.

Methods— The average cost of diagnosis and other variables related to the impact of TIAs on Health Care System have been analyzed (retrospective studies/info-system Regione Lombardia). A Data-base has then been developed to collect clinically relevant items, neurodiagnostic exams (performed as in-/out- patient) and other variables from a series of incident cases (n.557) in order to evaluate the effectiveness and efficiency of the optimized Fast-Track-Protocol (Prospective Series -ongoing) versus the standard care model. A specific training for ED Operators and Telemedicine facilities were also part of the Project (Regione Lombardia- grant n.9269/2012).

Results- In the standard model 63.7% of confirmed TIA cases were admitted to the Hospital with a mean length of stay = 6.5 days (\pm 3.5 SD). Triage codes (OR = 2.5 - 95% CI 1.7-3.7), duration of symptoms >1h (OR = 2.1, 95% CI 1.1-3.9) and ABCD2 scores \geq 4 (OR = 1.8; 1.2-2.8) significantly correlated with Hospital admission. TIA frequency clearly increased with age and was significantly associated with vascular comorbidities and RFs.

Conclusions—A TIA Fast-Track-Protocol based on early Neurological Triage and accurate Neuro/Cardio-vascular assessment is expected to reduce both Hospital stay and the risk of short-term major ischemic events.

References

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