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EDITORIAL

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## **Need for Establishing a Joint-Stroke Centers with Neurosurgeons and Neurologists**

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Stroke is a neurological condition that is one of the top causes for mortality worldwide. Establishing a joint stroke center with neurosurgeons and neurologists is crucial for several reasons. The timing of stroke therapy is crucial. Having access to both neurologists and neurosurgeons enables that patients, whether requiring medicinal therapy or surgical intervention, receive the best care possible as soon as possible. Neurologists specialize in the identification, mitigation, and treatment of stroke as well as its underlying causes. They are capable of managing both post-stroke rehabilitation and acute stroke therapies like thrombolysis. On the other hand, neurosurgeons perform surgical procedures that could be necessary for specific kinds of strokes, such as hemorrhagic strokes or strokes with a large amount of brain swelling. Together, neurologists and neurosurgeons may create individualized therapy regimens that are comprehensive. By assuring that all viable therapy alternatives are considered, this can enhance patient results. The neurologists supervise the process of injecting TPA (tissue plasminogen activator), while the Neurosurgeons operate, especially if there is a need to operate the case like Removal of the ICH (intracerebral hemorrhage) or decompressive craniotomy. Joint centers often serve as hubs for research and education, leading to advancements in stroke care. Collaboration between neurologists and neurosurgeons fosters an environment of learning and innovation, which can translate into better patient care. Stroke recovery can be a long process, requiring ongoing care and rehabilitation. A joint center ensures continuity of care from the acute phase through rehabilitation, with input from both neurologists and neurosurgeons as needed. The integrated stroke centers with multidisciplinary teams can significantly improve patient outcomes and reduce mortalities. It has been reported that Alberts et al. established recommendations for the creation of comprehensive stroke centers that can provide critically ill patients with stroke and cerebrovascular illness with the entire range of therapy. Members of the Brain Attack Coalition (BAC), a diverse collection of prominent professional organizations concerned in the treatment of stroke and cerebrovascular disease patients, created the recommendations. They suggested that a comprehensive stroke center's capacity to provide patients with the vast range of specialized treatment they require depends on several critical areas that are supported by evidence-based medicine. There should be healthcare practitioners with required multidisciplinary neurological and neurosurgical expertise. These centers also should have advanced and diverse neuroimaging modalities, advanced surgical techniques such as clipping & coiling of intracranial aneurysms, endo-vascular therapy, simple/complex intracranial bypass procedures, carotid endarterectomy, intra-arterial thrombolytic therapy, emergency surgical stroke treatment, advanced neuro-interventional procedures and micro-catheter-based surgical interventions for stroke management. There is also need for advanced ICUs and stroke registry. The integration of the designated interdisciplinary competence into an integrated strategy or system based on hospitals is thought to improve the outcomes for patients in need of a comprehensive stroke center.

**Reference:** Alberts MJ, Latchaw RE, Selman WR, Shephard T, Hadley MN, Brass LM, Koroshetz W, Marler JR, Booss J, Zorowitz RD, Croft JB. Recommendations for comprehensive stroke centers: a consensus statement from the Brain Attack Coalition. *Stroke*. 2005;36(7):1597-616.