



CARDIOVASCULAR AND INTERVENTIONAL RADIOLOGY
RESEARCH AND EDUCATION FOUNDATION

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**Latest on Minimally Invasive Stroke Prevention, Treatment and Research at
National Medical Meeting**

***Society of Interventional Radiology's Research and Education Foundation, CIRREF,
Convenes Multi-specialty Two-day Stroke Conference***

Fairfax, Virginia (Jan. 29, 2003) – Today, interventional radiologists will bring together clinicians, other physicians and scientists from private practice, government and industry for a multi-disciplinary stroke meeting. Stroke specialists will review the latest data and developments in minimally invasive techniques and create a coordinated research agenda to further stroke prevention and treatment. Stroke is the third leading cause of death in the United States, killing someone every three minutes.

“The treatment of stroke requires teamwork and interventional radiologists and interventional neuroradiologists offer many advances in stroke care including carotid stenting and targeted treatments with clot-busting drugs,” states Joseph Bonn, M.D., interventional radiologist and conference director. “Continued research in interventional radiology and collaboration among the medical community is the key to new advances and better patient care.”

Interventional radiologists and neuroradiologists are vascular experts who combine their expertise in imaging, angioplasty and stenting to diagnose and treat people at risk for stroke, in addition to treating those having an acute stroke. As vascular experts, interventional radiologists treat atherosclerosis throughout the body. Atherosclerosis, specifically blocked carotid arteries in the neck, can lead to ischemic stroke and interventional radiologists can identify and treat this blockage with angioplasty and/or a stent, thereby preventing the stroke from occurring in high-risk patients.

Interventional radiologists and neuroradiologists are also a critical part of the stroke team in hospitals. These doctors interpret images to determine what is causing the stroke. If the stroke is due to a blood clot, the clot-busting drug tPA (tissue plasminogen activator) can be given intravenously, if the patient is treated within three hours of the onset of symptoms. Currently, most patients arrive at the hospital too late, or make it through the emergency room, hospital processing and differential diagnosis to late to receive this standard treatment.

Beyond the three-hour window, interventional neuroradiologists and interventional radiologists who specialize in neurological procedures utilize imaging to guide a catheter to the tiny arteries in the brain and place the clot-busting drug (tPA) directly on the clot or break up the clot mechanically. This restores blood flow to the brain dramatically reversing the devastating effects of stroke. When given locally this way, tPA can be administered up to six hours after the onset of stroke symptoms.

Bonn added, “Many people aren’t able to recognize the symptoms of stroke, nor do they realize that prompt treatment can save lives and reduce disability. Our innovative stroke therapies are lengthening the window of time that stroke victims have for treatment and are improving outcomes.”

Currently, most patients arrive at the hospital too late to receive treatment in time to reduce long-term affects because they cannot identify the symptoms of stroke or wait too long to seek medical attention. Symptoms include numbness or weakness of the face, arm or leg, especially on one side of the body; sudden confusion, trouble speaking or understanding; sudden trouble seeing in one or both eyes; sudden trouble walking, dizziness, loss of balance or coordination; and a sudden severe headache with no known cause.

About the Stroke Meeting

The meeting will be held in Bethesda, Md., Jan. 30-31, 2004, at the Hyatt Regency hotel and will focus on:

- Developments in the area of stroke therapy and interventions
- Factors leading to the disease – hardening of the arteries
- Recent and on-going clinical trials
- Modern imaging techniques for stroke

The meeting is sponsored by the Cardiovascular and Interventional Radiology Research and Education Foundation (CIRREF), the research and education foundation of the Society of Interventional Radiology, and co-sponsored by the American Society of Interventional & Therapeutic Neuroradiology (ASITN).

About the Cardiovascular Interventional Radiology Research and Education Foundation (CIRREF)

CIRREF is a scientific foundation dedicated to fostering research and education in interventional radiology for the purposes of advancing scientific knowledge, increasing the number of skilled investigators in interventional radiology, and developing innovative therapies that lead to improved patient care and quality of life. Additional information on CIRREF can be found at www.CIRREF.org.

About the Society of Interventional Radiology

Interventional radiology is the medical specialty devoted to advancing patient care through the innovative integration of clinical and imaging-based diagnosis and minimally invasive therapy. Interventional radiologists are physicians who specialize in minimally invasive, targeted treatments performed using imaging for guidance. Interventional radiology procedures are a major advance in medicine that do not require large incisions – only a nick in the skin about the size of a pencil tip – and offer less risk, less pain and shorter recovery times compared to surgery.

Interventional radiologists pioneered modern medicine with the invention of angioplasty, the first catheter-delivered stent and the coronary angiography technique most used worldwide—state of the art treatments that are commonplace in medicine today. More information is available at www.SIRweb.org.

About the American Society of Interventional & Therapeutic Neuroradiology (ASITN)

The American Society of Interventional & Therapeutic Neuroradiology is the specialty society representing physician experts in minimally invasive, targeted neurological treatments performed using radiological imaging guidance. Innovations from the field of interventional neuroradiology include, among others, emergency stroke treatment, the endovascular treatment of cerebral aneurysms, carotid stents, intracranial stents, intracranial angioplasty, and vertebroplasty. More information about ASITN can be found on our Web site at www.asitn.org.

Interviews Available: To set up an interview or register for the conference, contact Emily Oehler at Emily@SIRweb.org. For information, visit www.SIRweb.org.

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