



A Physician's Focus: Lisa Shultz, M.D. On the Importance of a Primary Stroke Center

Lisa Shultz, M.D., is Chief of Neurology and Medical Director of the Lourdes Stroke Center at Our Lady of Lourdes Medical Center in Camden. Dr. Shultz earned her bachelor of science degree from Yale University and her medical degree from Albert Einstein College of Medicine. She completed her preliminary year of Internal Medicine at Jersey Shore University Medical Center and her Neurology Residency at Brown University/Rhode Island Hospital. Dr. Shultz is a volunteer faculty member of the UMDNJ School of Medicine and a Diplomate of the American Board of Neurology and Psychiatry.

Why is there an emerging emphasis on stroke?

Stroke is the third-leading cause of death in the United States, with 700,000 strokes occurring annually. Of the stroke survivors, 15 to 30 percent will be permanently disabled. Millions of dollars are being spent on clinical trials for both acute and sub-acute stroke therapies and billions of dollars on the rehabilitation and long-term care of stroke victims. This is clearly a healthcare crisis.

Why is it important for a patient to be treated at a primary stroke center? What sets stroke centers apart from those without such specialized programs?

Six years ago, cerebrovascular experts and the American Academy of Neurology recommended the establishment of primary stroke centers in order to standardize and optimize the level of care provided to acute stroke patients. It has since been found that centers with specialized stroke teams, emergent radiology and rapid response protocols have improved acute stroke care and increased the chances of receiving tPA (tissue plasminogen activator). For those outside of the current three-hour time window for acute thrombolysis, the standardization of care in a stroke center, via stroke nursing units, standardized order sets and written care protocols, have decreased mortality and disability.

Unfortunately, because of the difficulty in acquiring dedicated and qualified personnel in multiple disciplines, obtaining the resources needed to diagnose and manage these critically ill

patients and establishing a new care pathway in a medical center, there are fewer than 300 JCAHO-accredited primary stroke centers in the United States.

Describe the Lourdes Stroke Center and what it has to offer patients that hospitals without stroke centers cannot.

The Lourdes Stroke Center is setting a unique standard of excellence in cerebrovascular care. The Emergency Department has established stroke pathways that quickly and efficiently guide the patient through radiological and serologic studies, initiate and maintain standardized clinical evaluations and enable rapid contact with multiple specialties, including neurology, cardiology, neurosurgery, critical care and internal medicine.

Our Department of Radiology not only offers immediate access to a CT scan and rapid 24-hour interpretation, but Lourdes has a 64-slice CT scanner which enables physicians to quickly visualize the intracranial vasculature. There is 24-hour access to all medical specialties, with immediate telephone contact and, if required, in-person evaluations regardless of the time of day. We have dedicated critical care beds and a stroke nursing unit that has specially trained nurses, adept at the evaluation and management of the acute stroke patient. There are care algorithms designed by physicians and nurses to ensure that all stroke patients receive the current standards of care in cerebrovascular evaluation and management. There is no detail too small that has not been incorporated into our care pathways and, rather than a rigid system, they are constantly being revised as new clinical recommendations emerge.

Our Lady of Lourdes Medical Center also has an acute rehabilitation unit, the only such center in the region located within an acute care hospital. It is staffed by a dedicated group of physical therapists, occupational therapists, speech therapists and physical medicine/rehabilitation physicians. This allows the Lourdes Stroke Center patients to receive high quality therapy during hospitalization and the chance, upon discharge, to continue to participate in rehabilitation with staff that is familiar with them and their clinical history.

What are the unique challenges in stroke prevention/treatment in the community?

Perhaps one of the biggest challenges to practicing acute care neurology and establishing a stroke center is public education. Only 8 percent of all stroke patients receive tPA. This disheartening number is because many people present long after the onset of the stroke. At the Lourdes Stroke Center, we are attempting to educate the public that acute neurological complaints should prompt immediate evaluation in an emergency room. We are conducting community outreach programs to educate the public. As Chief of Neurology, I am available 24 hours a day to speak with physicians who have concerns about patients, whether they are outpatient, in the ED or currently hospitalized.

Describe the importance of tPA in optimizing favorable outcomes and how this should be relayed to patients.

Tissue plasminogen activator (tPA) is an acute thrombolytic that can be administered within the first three hours of symptom onset. Only 13 percent of patients have the so-called Lazarus Effect, with immediate, complete resolution of all deficits. However, at the six-month mark, there is tremendous benefit seen. Stroke patients that receive tPA are three-times more likely to be alive six months after their stroke and two times more likely to be free of all deficits. There are, of course, contraindications to tPA, including recent stroke, history of intracerebral hemorrhage, hepatic dysfunction, recent surgeries, coagulopathies, pregnancy, etc. Directing your patients to a primary stroke center will enable them to have access to cerebrovascular specialists, who will analyze the risk/benefit ratio and treat strokes as aggressively as possible.

STROKE INFORMATION AND REFERRAL

For more information about stroke services at Lourdes, contact Stroke Program Coordinator, Janice A. Aceto, RN, CEN, CCRN, at **856-668-8430**.



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While the Lourdes Stroke Center Team is working hard to prevent strokes before they happen, their colleagues are working just as hard for those impacted by stroke. The team also has been recognized for its success, as noted by HealthGrades®, an independent source for the assessment of quality.

According to HealthGrades, Our Lady of Lourdes Medical Center is Number One in southern New Jersey for the treatment of stroke, with a five-star rating in 2006 – a reflection of its quality care and successful patient outcomes. In 2005, Lourdes received HealthGrades' Stroke Care Excellence Award™ for being in the top 10 percent of all hospitals in the nation providing stroke care services.

**For information or physician referral, call
1-888-LOURDES
(568-7337)**

OUR LADY OF LOURDES MEDICAL CENTER

1600 Haddon Avenue
Camden, NJ 08103

LOURDES MEDICAL CENTER OF BURLINGTON COUNTY

218 Sunset Road
Willingboro, NJ 08046

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