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Improving the control on post-stroke complications in Georgia

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In Georgia, there is an observed growth trend in cerebrovascular diseases. For last years, at the National Health Sector level, special attention is paid to acute strokes. In general, stroke is one of the main causes of incapacitation of the population of Georgia. In particular, most of patients that survived stroke are disabled, and 30-40% of them needed permanent care. Because of a deficiency in rehabilitation services in Georgia, no correction of neurologic impairment can be made completely for stroke patients that reduce the quality of life. In response to the urgency of this disease, it is very important to study the methods for fighting this disease and for the management of its complications, as well as for its prior diagnosis. In this context, for the first time in Georgia, at the Kutaisi Referral Hospital, at the premises of the neurology department, there have been established the stroke management units, the so called stroke units, which allow not only for effective treatment of stroke patients, but also for assessing the complications and possible risks associated with stroke. During the 2015-2016, 1249 stroke patients passed through the mentioned Hospital, and 65% of them had dysphagia, which evolves as a result of infringement of brain blood circulation, and appears as inhibition of swallowing reflex, or as its complete elimination. Of course, in this case, there is the risk of an aspiration of foods in the airway that consequently may lead to aspiration pneumonia. The analysis of the mentioned complications among stroke patients during the 2015-2016 has shown that the studies in this area should be enhanced and improved. Since 2016, the studies were actively started for the detection of dysphagia. First, swallowing reflex is checked and lingual condition is assessed in all patients, as well as there is differentiated whether dysphagia is a neurological complication or not. Then the studies are carried out through video-photofluorography roentgenoscopy. Patient swallows the contrast substances of different consistencies, and radiologist assesses radioscopically the swallowing process. Also, in some cases, of high importance is to assess the pharynx condition, for which we apply to an endoscopy. After the mentioned examination, an attending physician and radiologist make decision on how the dietary regime of patient should be carried out. Of all 120 examined patients, dysphagia was detected in 85, and an appropriate examination regime and treatment were chosen for them, and in some of them the need of gastrostomy was identified. Analysis of latest data has shown that the problem of proper diagnosis of dysphagia allows for reducing the complications, even such as aspiration pneumonia that in turn is the most dangerous complication in terms of mortality. Thus, proper diagnosis is a guarantee of preventing possible incapacitation and anticipated mortality.

Biography

Tamar Janelidze is a Doctor-Neurologist and Neuroradiologist, a graduate of the Akaki Tsereteli State University Medical Faculty, and a Certified General Medical Practitioner (2000-2006). She has worked as a Doctor-Neurologist; participated in Clinical Studies and has worked as a Researcher. She is an author of 7 scientific publications, an Organizer of scientific conferences in the Medical field. She is the Head of Department of Therapy at the Kutaisi Referral Hospital since 2010 and a Member of European Stroke Organization (ESO).

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