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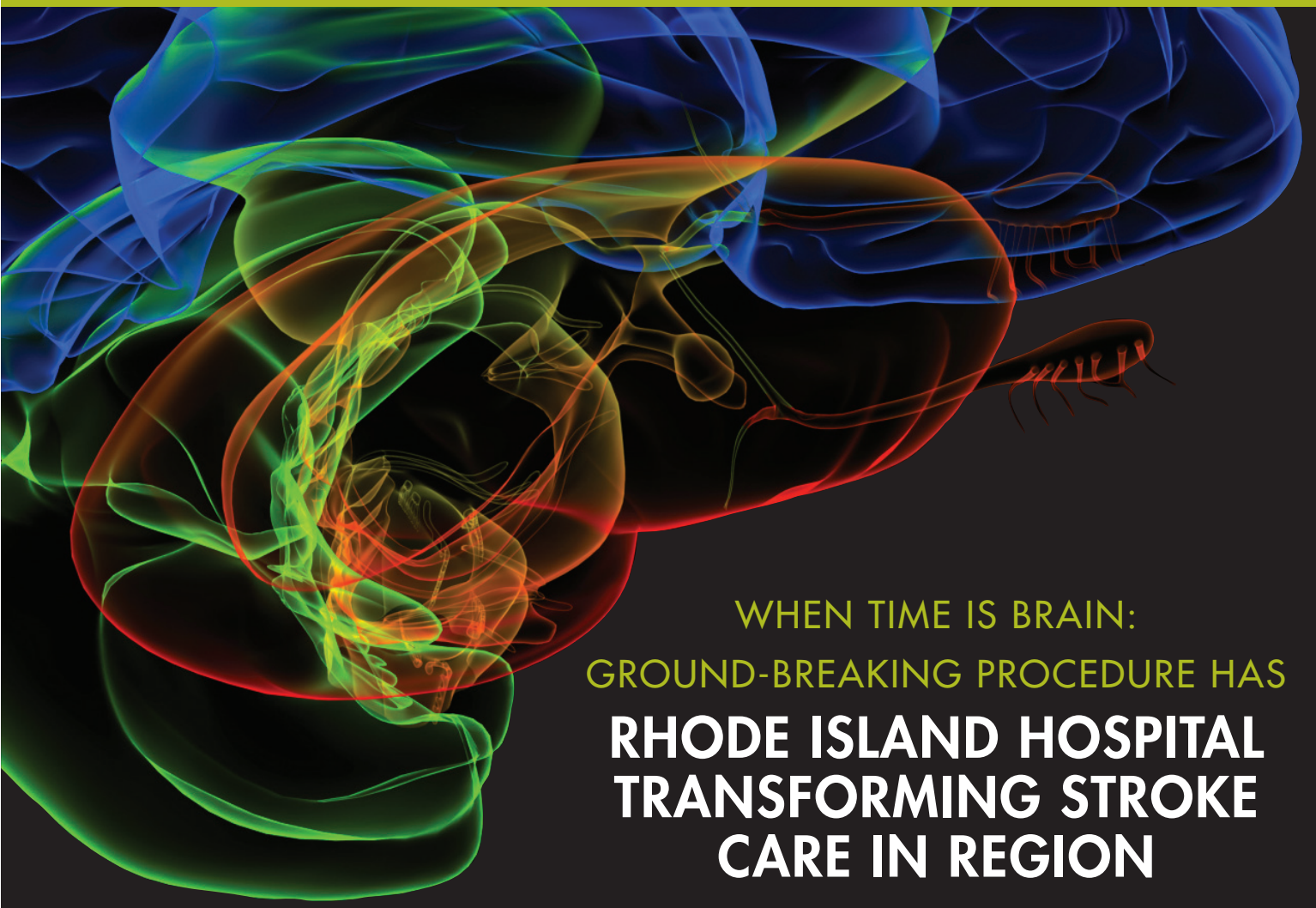
Touchpoints



WHEN TIME IS BRAIN:
GROUND-BREAKING PROCEDURE HAS RHODE ISLAND HOSPITAL TRANSFORMING STROKE CARE IN REGION

Scott Mellon was enjoying a bout of spring fever. It was April 28, and the 43-year-old was on the top of his game as he approached the 18th hole on a golf course in Easton, Massachusetts. Preparing to tee-off, Scott sneezed violently. Suddenly, everything began to spin out of control. He dropped to the ground.

A nearby golfer saw Scott collapse and called 911. Within minutes he was rushed by ambulance to Morton Hospital. Scott was suffering a massive stroke, was unresponsive, and paralyzed on his right side.

Medication to break apart the clot—known as tPA—was administered by Dr. Nicholas Musisca at Morton Hospital and Rhode Island Hospital was immediately called, quickly dispatching its LifePACT critical care ambulance. Meanwhile, a CT angiogram was being performed at Morton Hospital to determine the cause of Scott's stroke.

As the region's only Joint Commission-certified Comprehensive Stroke Center equipped to care for complex cases of stroke, the call to Rhode Island Hospital was part of a Primary Stroke Center Protocol (PSCP) established

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by Neurointerventional Radiologist, Ryan McTaggart, MD and his colleagues. Once the call was received, Rhode Island Hospital's stroke team mobilized to prepare to perform a ground-breaking new procedure—using a stent retriever to manually remove the blood clot causing Scott's Emergent Large Vessel Occlusion (ELVO).

"STENT RETRIEVER TECHNOLOGY HAS REVOLUTIONIZED STROKE CARE DELIVERY WITHIN OUR REGION," SAYS DR. MCTAGGART. "WE'RE THE ONLY HOSPITAL IN THE AREA TO OFFER THIS PROCEDURE, SO WE NEEDED TO PUT SYSTEMS IN PLACE TO GET PATIENTS LIKE SCOTT HERE QUICKLY IF THEY PRESENT ELSEWHERE."

The stent retriever procedure uses a thin metal wire with a grapple hook on the end, and is delivered through a series of catheters inserted into the groin to remove the clot obstructing a large blood vessel at the base of the brain. The procedure is specific for patients with an ELVO—the most devastating of all ischemic strokes—which accounts for approximately 20 percent of all stroke patients.

Denise and Scott Mellon, Dr. McTaggert

"Research shows that patients with access to stent retriever technology in addition to tPA are twice as likely to be functionally independent at 90 days versus patients who receive tPA alone," says Dr. McTaggart, who joined Rhode Island Hospital in 2015 from The Cleveland Clinic.

Upon his arrival in Rhode Island, Dr. McTaggart and his colleagues, Dr. Richard Haas and Dr. Mahesh Jayaraman, met with more than a dozen stroke coordinators and Emergency Department (ED) physicians from hospitals in our region to share the PSCP they established: once a stroke patient comes into their Emergency Room, Rhode Island Hospital is called within 15 minutes and an ambulance is dispatched. A CT angiogram is done within 30 minutes, and using a program called LifeIMAGE, the results are sent to the physicians' mobile devices for review. If the images reveal an ELVO, Rhode Island Hospital's neurointerventional team is mobilized and the patient is quickly transferred to Rhode Island Hospital. If the CT angiogram reveals no ELVO, the ambulance transfer is cancelled. All that's been wasted is a bit of gas. Morton Hospital followed the protocol to a T.

Calling stroke care the "ultimate team sport," Dr. McTaggart acknowledges the only way the protocol works is through data sharing and the collaboration of regional hospitals, EMS, and Rhode Island Hospital's experienced stroke team.

Rhode Island Hospital was the first hospital in the country to maintain an "ELVO-ready state" in their neurointerventional suite—set-up to perform the procedure at a moment's notice and to open the occluded vessel as quickly as possible. In fact, Dr. McTaggart and the team developed a novel technique, Continuous Aspiration Prior to Intracranial Vascular Embolectomy, or CAPTIVE, to open the vessel in 14 minutes or less. Nationally, the average time to open the vessel is 60 minutes.

Currently, Rhode Island Hospital performs nearly 200 stent retriever procedures annually, with two-thirds of patients transferred from hospitals across southeastern Massachusetts. Scott Mellon is an example of one patient whose outcome would have been drastically different if not for the forward thinking efforts of the Rhode Island Hospital stroke team to innovate care delivery in our region. "I don't believe there's a diagnosis in medicine right now more time-sensitive than ELVO—everyone in our region needs to know our ability to remove these clots is second-to-none," says Dr. McTaggart.

Less than three hours after Scott suffered his stroke, the clot that caused it was removed and blood flow to his brain was restored. He was no longer paralyzed; his speech returned with each passing minute. Two days later, he walked out of the hospital on his own two feet.

Stroke is the number one cause of disability and the fifth leading cause of death in our country. "Right now, there's no other institution on the planet doing more to educate and execute this potential cure for stroke than Rhode Island Hospital," adds Dr. McTaggart. "There are many patients like Scott Mellon across our region who are not as fortunate—we must continue to change the way we deliver care to match the disease, and the PSCP is an example of how we leave no ELVO behind."

Rhode Island Hospital Honors Community Champions at Annual President's Pursuit of Excellence Dinner

Joe Prazeres, a local Dunkin' Donuts franchisee

Dr. Arthur A. Bert and Dr. Margaret M. Van Bree

Al and Gerrie Verrecchia

On November 15, Margaret M. Van Bree, MHA, DrPH, President of Rhode Island Hospital and Hasbro Children's Hospital, welcomed more than 500 hospital friends and supporters to the Rhode Island Convention Center for the 2016 President's Pursuit of Excellence Dinner.

The event highlighted successes of the past year, including a moving story from a patient whose life was saved by Rhode Island Hospital and the honoring of special community champions.

"I could not be more proud of our compassionate, highly-skilled teams for their dedication to doing whatever it takes to provide our patients with the best care possible," said Dr. Van Bree. "From attracting the best and brightest minds in medicine to Rhode Island and investing in research that puts us on the national stage, to creating partnerships with other healthcare leaders, the past year was defined by serving our patients even better than before."

Following her remarks, Dr. Van Bree introduced Scott Mellon and his wife, Denise, to share how Rhode Island Hospital's revolutionary stroke care saved Scott's life after he suffered a massive stroke while golfing. Though Scott presented at a Massachusetts hospital, he was quickly triaged to Rhode Island Hospital, which is home to the region's only Comprehensive Stroke Center equipped to care for complex cases of stroke. (See page 1 for Scott's full story.)

Completing the celebration was the recognition of Rhode Island Hospital's 2016 Champions: Local Dunkin' Donuts Franchisees as Corporate Champion; Arthur A. Bert, MD for Lifetime Achievement; and Al and Gerrie Verrecchia as Individual Champions. Videos shown at the event to honor this year's champions may be found at: https://giving.lifespan.org/PPOE-2016-Videos.

Rhode Island Hospital extends its sincere thanks to event chair Lawrence A. Aubin, Sr., Chairman of the Lifespan Board of Directors and Chair of the Rhode Island Hospital Board of Trustees, and event co-chairs, Roger N. Begin, Chair of the Rhode Island Hospital Foundation Board of Trustees; Karen L. Furie, MD; Thomas A. Magliocchetti; and Marc A. Paulhus, as well as our generous presenting sponsors Amaral Revite General Contractors, Rhode Island Hospital Guild, Rhode Island Medical Imaging, and University Orthopedics.

FOR GENEROUS COUPLE, CONTRIBUTING TO ALZHEIMER'S STUDY IS BOTH PERSONAL AND GLOBAL

Truly remarkable medical advancements are taking place every day at Rhode Island Hospital, especially in the field of neuroscience. Our world-class physicians and researchers are making cutting-edge discoveries that hold tremendous promise for improving our understanding of diseases of the brain, and how to treat them.

One study taking place at Rhode Island Hospital—and at more than 300 sites across the globe—is offering significant hope to the estimated 5 million Americans with Alzheimer's disease, the progressive neurological disease that destroys memory and thinking skills, and for which there is currently no cure.

Led at Rhode Island Hospital by neurologist Brian R. Ott, MD, the phase 3 study will evaluate the effect of monthly doses of an experimental drug called aducanumab, an antibody designed to attack the amyloid plaques suspected of killing brain cells.

Carol Keefe and Tom DePetrillo

Dr. Ott is encouraged by the findings of a phase 1b preliminary study on early-stage Alzheimer's that was recently completed. Rhode Island Hospital was one of 32 sites to participate in the study.

"We're very pleased with the early trial results. The antibody did everything it's supposed to. That is, slowing cognitive decline and reducing amyloid plaques in the brain," says Dr. Ott, Director of The Alzheimer's Disease & Memory Disorders Center.

Carol Keefe and Tom DePetrillo of North Kingstown share Dr. Ott's enthusiasm about the aducanumab trial. Carol, a former R.I. prosecutor, has early-stage Alzheimer's and was accepted into the clinical trial at Rhode Island Hospital last fall.

Carol is very optimistic today, but when she received her diagnosis a couple of years ago, she was devastated. She couldn't bring herself to even talk about her diagnosis until last year. "I didn't tell anyone because I didn't want it to be true," says Carol with a rueful laugh. Her father had died from complications of the disease several years earlier.

Today, she is not only talking about Alzheimer's disease but helping to advance the science of the disease by taking part in the clinical trial, which is more than half-way towards enrolling 1,350 patients worldwide.

"I want to help make a difference any way I can for people who are going through what I am, and to honor the memory of my father," says Carol. To that end, Carol and Tom are also supporting Dr. Ott's work with a generous gift to Rhode Island Hospital. The funds will help renovate and update the rooms where study participants receive monthly infusions.

"Their generosity will go a long way towards enhancing the comfort of our patients," says Dr. Ott, noting that infusions and tests can take hours to complete. "Improving their overall experience will, in turn, allow us to do more research in the area of developing this and other biological agents to slow and hopefully someday prevent Alzheimer's disease altogether."

Carol retired from private practice 10 years ago and remains busy—playing tennis, practicing yoga, enjoying games of Trivial Pursuit with Tom, an investment banker, and walking their beloved dog, Maggie Mae. The couple is currently in Florida, where Carol continues to receive infusions at a participating study site.

"TEN YEARS AGO, YOU KNEW THE END RESULT OF ALZHEIMER'S. THERE WAS NO WAY OUT," SAYS TOM, CAROL'S HUSBAND OF 32 YEARS. "FOR THE FIRST TIME, WITH THIS RESEARCH, IT CAN COME OUT DIFFERENTLY. WE ARE VERY HOPEFUL."

If you have questions about giving to Rhode Island Hospital or any of its programs, please contact 401-444-6758 or RIHgiving@lifespan.org.
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For more information, please visit giving.lifespan.org/RIH-Foundation