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Successful intravenous thrombolysis of a wake-up stroke with underlying valvular atrial fibrillation (Article)

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Abstract

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A 42-year-old female admitted with new-onset atrial fibrillation had a wake-up stroke on the high-dependency unit and the time last seen well (TLSW) was 6.5 h. She suffered left-sided body weakness and her National Institutes of Health Stroke Scale (NIHSS) score was 17. An emergency CT perfusion showed right M1 segment occlusion with more than 50% penumbra. She was given recombinant tissue plasminogen activator (r-tPA) at 9 h from TLSW. An immediate diagnostic angiogram with intention to treat, owing to the presence of large vessel occlusion, showed complete reperfusion after intravenous r-tPA. She was discharged with NIHSS of 2, and at 3-month follow up her Modified Rankin Scale was 0. We demonstrated a successful reperfusion and excellent clinical recovery with intravenous thrombolysis in a patient who presented with a wake-up stroke with underlying valvular atrial fibrillation despite evidence of large vessel occlusion. © 2018, Royal College of Physicians of Edinburgh. All rights reserved.

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Atrial fibrillation Computed tomography perfusion R-tPA Wake-up stroke

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References (9)

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1 Tissue plasminogen activator for acute ischemic stroke

(1995) *New England Journal of Medicine*, 333 (24), pp. 1581-1588. Cited 7959 times.
doi: 10.1056/NEJM199512143332401

[View at Publisher](#)

2 Riccio, P.M., Klein, F.R., Cassara, F.P., Giacomelli, F.M., Gonzalez Toledo, M.E., Racosta, J.M., Delfitto, M., (...), Sposato, L.A.

Newly diagnosed atrial fibrillation linked to wake-up stroke and TIA: Hypothetical implications

(2013) *Neurology*, 80 (20), pp. 1834-1840. Cited 16 times.
doi: 10.1212/WNL.0b013e318292a330

[View at Publisher](#)

3 Albers, G.W., Marks, M.P., Kemp, S., Christensen, S., Tsai, J.P., Ortega-Gutierrez, S., McTaggart, R.A., (...), Lansberg, M.G.

Thrombectomy for stroke at 6 to 16 hours with selection by perfusion imaging

(2018) *New England Journal of Medicine*, 378 (8), pp. 708-718. Cited 235 times.
<http://www.nejm.org/medical-index>
doi: 10.1056/NEJMoa1713973

[View at Publisher](#)

4 Nogueira, R.G., Jadhav, A.P., Haussen, D.C., Bonafe, A., Budzik, R.F., Bhuva, P., Yavagal, D.R., (...), Jovin, T.G.

Thrombectomy 6 to 24 hours after stroke with a mismatch between deficit and infarct

(2018) *New England Journal of Medicine*, 378 (1), pp. 11-21. Cited 317 times.
<http://www.nejm.org/medical-index>
doi: 10.1056/NEJMoa1706442

[View at Publisher](#)

5 Marini, C., De Santis, F., Sacco, S., Russo, T., Olivieri, L., Totaro, R., Carolei, A.

Contribution of atrial fibrillation to incidence and outcome of ischemic stroke: Results from a population-based study ([Open Access](#))

(2005) *Stroke*, 36 (6), pp. 1115-1119. Cited 495 times.
doi: 10.1161/01.STR.0000166053.83476.4a

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