37. NEGATIVE PROGNOSTIC FACTORS IN STROKE PATIENTS

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Introduction. Stroke is a heterogeneous disease that causes a major problem by reaching epidemic proportions. In the Republic of Moldova, stroke ranks second deadliest disease and is the leading cause of disability among the adult population. Analyzing and realizing the importance of stroke-generating factors separately, their interaction through the manifestation of associated diseases and post-stroke complications is crucial in obtaining a favorable prognosis in stroke patients.

Aim of study. A systematic review of observational studies evaluating the association between risk factors and negative prognosis in stroke patients.

Methods and materials. The analysis and retrospective synthesis of the bibliographic database from the last 10 years was performed, which includes meta-analyzes and dynamic revisions relevant to the researched topic. The highlighted variables included both modifiable and non-modifiable risk factors, comorbidities, treatment and medical complications from onset to discharge related to the prognosis of stroke patients.

Results. As a result of studying the existing data, we highlighted the risk factors with a major resonance in the prognosis of stroke. There was a significant negative correlation between age, the coexistence of obesity and dyslipidemia, hypertension, diabetes, atrial fibrillation and other cardiac causes and stroke. At the same time, risk factors were elucidated, with no less influence on the prognosis, classified according to the potential for reversibility and associated with a vulnerable outcome such as family history of stroke, behavioral factors such as smoking and alcohol consumption, lack of lipid therapy, especially statins, antihypertensive treatment and a suboptimal degree of anticoagulation. Other reliable predictors included prestroke Rankin Scale (pRS) score, door-to-needle time for tissue plasminogen activator therapy and The Modified Rankin Score (mRS), generating a number of complications with an impact on the prognosis of stroke. Among the most common early complications in the hospital were cerebral edema, respiratory infections and urinary tract infections.

Conclusion. Old age accompanied by increased prevalence of risk factors such as diabetes, high blood pressure, atrial fibrillation and coronary heart disease are predictors of stroke mortality. The Rankin Score has remarkable potential for use in assessing stroke prognosis.