ESO Department to Department visiting program 2020

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Host institution: InselSpital Bern, Neurology Department, Bern, Switzerland.

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I would like to start this report by saying thank you to the European Stroke Organisation for this amazing opportunity. It is a very insightful and memorable experience for a young clinician working in stroke medicine.

I did my visiting program at the InselSpital in Bern, Switzerland. This hospital is a stroke center, reference to many stroke units in the western part of Switzerland. It is composed of a highly specialized and organized staff, performing endovascular treatment of acute ischemic stroke, including acute revascularization of carotid stenosis.

I started every day in the stroke unit, with the morning meeting of Dr. David Seiffge and the residents, discussing all the patients, who may have been hospitalized and treated during the night. MRI perfusion and diffusion images were the modality choice of imaging for all stroke patients presenting in the emergency department. This made it possible for all the staff to get in depth of the acute vascular event and to mobilize quickly for thrombolysis or endovascular treatment. I got the chance to learn a lot about the stroke treatment options and the organizational part of work, which is as important as treating the patient. Every case was discussed in a staff meeting, where everyone gave their opinion on the patient. I think this is essential, since every case is complex and sometimes there is no consensus definitive criteria for treating certain patients.

In the emergency department, the work was organized in a very efficient way. Doctors knew beforehand that a stroke patient was coming, along with a brief medical history. That made them ready and prepared for the situation. Since the ER is usually a messy and noisy environment, I found that ER to be highly organized and cooperative. An acute stroke patient was first evaluated by the clinician, and then sent straight to the MRI department. After the MRI, either the stroke patient was started on thrombolysis right there or was sent to the interventional team for endovascular treatment.

I was able to watch a basilar thrombectomy, along with stenting of the vertebral artery, performed by interventional neuroradiologists. You learn a lot by watching the interventional team cooperate and manage different case scenarios in the intervention room. They explained me every step of the procedure, along with the expectations we get from intervening a certain way.

Finally I visited the Doppler ultrasound laboratory, where neurologists performed carotid, vertebral and also transcranial Doppler. I didn't have experience with transcranial Doppler. It is a procedure that gives a lot of information on the cerebral vascular tree, so that was a good experience for me.

During my one week experience, I had never seen stroke patients being taken care of in such a good and efficient way. Most of these patients only suffered minor consequences of the vascular event. Coming from a not so developed country, it felt so good and rewarding as a doctor, to see the patient recover so well after an acute stroke, which we know sometimes can be fatal.

I would like to sincerely thank Dr. Mirjam Heldner and Dr. David Seiffge for the mentorship and guidance during my visit. They made this observership such a valuable and memorable experience, which I hope to inspire me for some needed changes in our clinic in Albania.



