

Early [reperfusion](#) after [endovascular thrombectomy](#) is associated with an improved [outcome](#) in [ischemic stroke patients](#); however, the time dependency in [elderly](#) patients remains unclear.

Todo et al. investigated the time-outcome relationships in different age subgroups. Of 2420 patients enrolled in the [RESCUE-Japan Registry 2 study](#), a [study](#) based on a prospective [registry](#) of [stroke](#) patients with acute cerebral [large-vessel occlusion](#) at 46 centers, they analyzed the data of 1010 patients with successful reperfusion after [endovascular therapy](#) (mTICI of 2b or 3). In 3 age subgroups (< 70, 70 to < 80, and ≥ 80 years), the [mRS](#) scores at 90 days were analyzed according to 4 categories of onset-to-reperfusion time (< 180, 180 to < 240, 240 to < 300, and ≥ 300 min). In each age subgroup, the distributions of mRS scores were better with shorter onset-to-reperfusion times. The adjusted common [odds ratios](#) for better outcomes per 1-category delay in onset-to-reperfusion time were 0.66 (95% CI 0.55-0.80) in ages < 70 years, 0.66 (95% CI 0.56-0.79) in ages 70 to < 80 years, and 0.83 (95% CI 0.70-0.98) in ages ≥ 80 years. Early reperfusion was associated with better outcomes across all age subgroups. Achieving early successful reperfusion is important even in elderly patients ¹⁾.

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Todo K, Yoshimura S, Uchida K, Yamagami H, Sakai N, Kishima H, Mochizuki H, Ezura M, Okada Y, Kitagawa K, Kimura K, Sasaki M, Tanahashi N, Toyoda K, Furui E, Matsumaru Y, Minematsu K, Kitano T, Okazaki S, Sasaki T, Sakaguchi M, Takagaki M, Nishida T, Nakamura H, Morimoto T; [RESCUE-Japan Registry 2](#) Investigators. Time-outcome relationship in acute large-vessel occlusion exists across all ages: subanalysis of RESCUE-Japan Registry 2. Sci Rep. 2021 Jun 17;11(1):12782. doi: 10.1038/s41598-021-92100-7. PMID: 34140563.

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