



# **9<sup>th</sup> NATIONAL SUMMIT ON GOOD, REPLICABLE PRACTICES AND INNOVATIONS IN PUBLIC HEALTHCARE SYSTEMS IN INDIA**

## **H.P. TELE-STROKE PROJECT A DECENTRALIZED APPROACH**

**HIMACHAL PRADESH**



# STROKE EPIDEMIOLOGY IN INDIA

- One stroke every 20 seconds
- One stroke related death every 2 minutes
- Commonest cause of adult disability





# THE GOLDEN HOUR

- Thrombolysis increases chance of good outcome by 30%
- Effective Treatment Window- 4.5 hours
- Within 1 hour-60% patients recover by 90 days without disability
  - Modified Rankin Score of 0 to 1
- Within 3 hours-40%

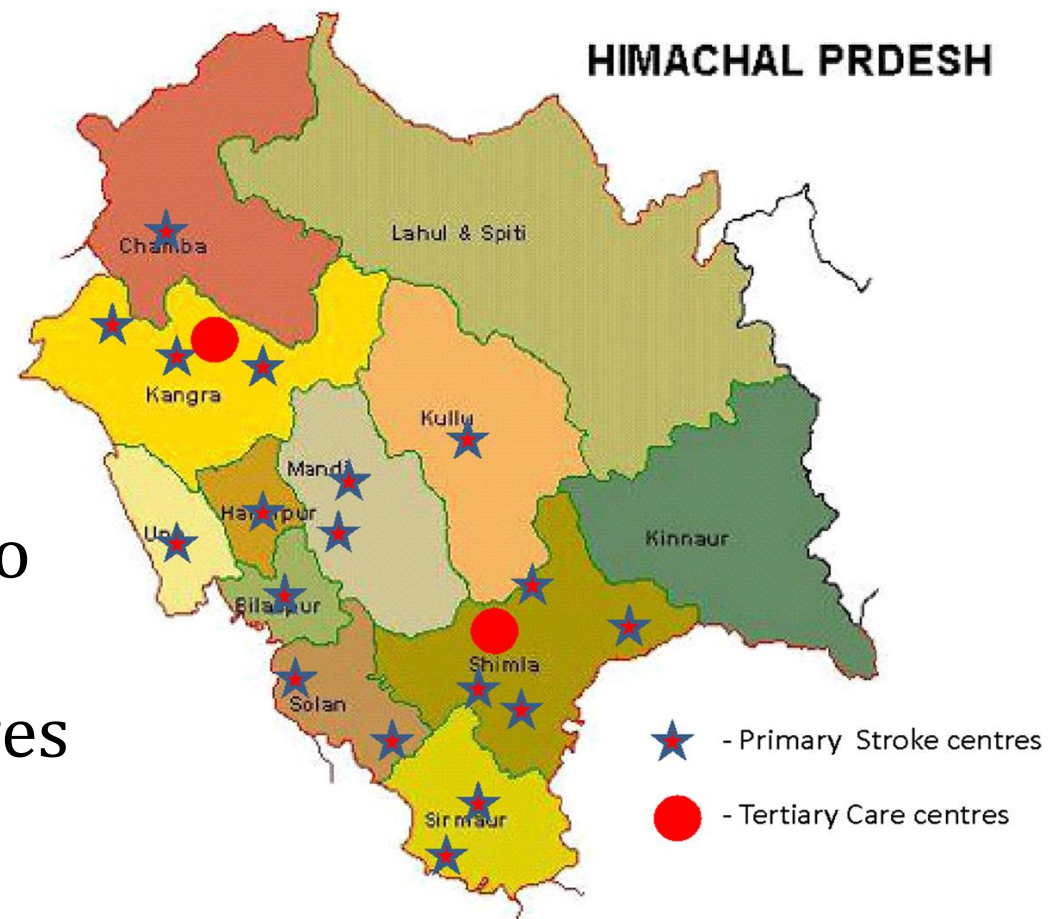




# TELE-STROKE PROJECT IN HIMACHAL PRADESH



- Initiated in 2014
- Hubs at IGMC, Shimla & RPGMC Tanda
- 17 spokes having CT scan notified
- Physicians & Causality MOs trained
- 108 Ambulance staff sensitized
- Four Neurologists made available 24x7 to manage
- Whatsapp used for transmitting CT images
- Tenecteplase made available free of cost
- Smartphone based app developed





# SMARTPHONE BASED APPLICATION

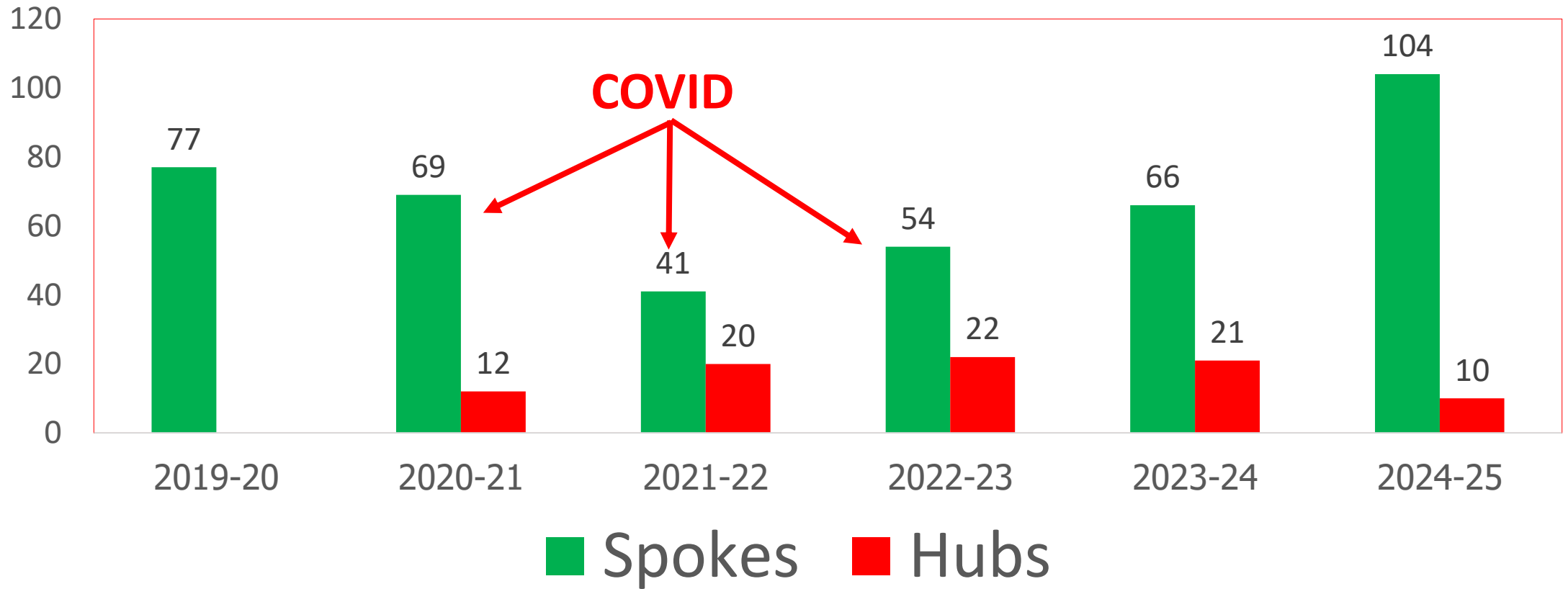
- Developed by NIC
- Features for doctors
  - Doctors have access to standardized protocols
  - Patient data is fed by the doctor
- Features for patients
  - Helps patient to identify if he/she is having stroke
  - Has a feature to send emergency SOS
  - Shows nearest active spoke
  - Opens Google map for navigation
  - Has IEC material in English & Hindi





# RESULTS

831 Thrombolysed till date in spokes





# CHALLENGES

- Patients still reporting directly to quacks
- Doctors at spokes apprehensive of bleeding complications
- More spokes required for better penetration

# WAY FORWARD

- Spokes are being increased
  - 17 CT scans being added in Adarsh Swasthya Sansthans
- Comprehensive IEC strategy to increase awareness
- Continuous capacity building to improve confidence of doctors



Thank you