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Ischemic stroke: new diagnostic tools and therapeutic strategies in the era of recanalization

Stroke remains a global leading cause of death and permanent disability. Ischemic stroke is by far the most common kind of stroke, accounting for more than 85% of all strokes. Large vessel occlusions (LVOs), defined as blockages of the proximal intracranial anterior and posterior circulation, account for more than 40% of ischemic strokes. Intravenous thrombolysis with rtPA used to be the only reperfusion therapy. However, endovascular therapies including mechanical thrombectomy has revolutionized acute care of LVOs. This opens opportunities for the reevaluation of the entire chain of stroke care delivery, including diagnosis, neuroprotection and neuroreparation in the context of the neurovascular unit.

The present special issue welcomes papers on ischemic stroke, with special focus on, but not limited to, preclinical and clinical studies which results could pave the way for accurate diagnostic as well as effective neuroprotection and neuroreparation. A non-exclusive inspiring list of subjects could be the improvement of recanalization therapies, new thrombolytic agents, and reevaluation of neuroprotective compounds in the light of new standards for a rigorous preclinical testing. Non-drug based approaches, such as ischemic tolerance and hypothermia should also be considered. In this line, nano-drug delivery platforms will be positively assessed. Post-stroke neuroregeneration boosted by stem-cell based interventions is also a promising field. Finally, research works based on molecular imaging for diagnosis, prognosis, and evaluation of ischemic damage are suitable for this issue.

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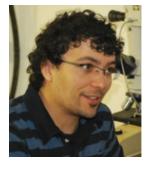


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