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19th May 2020

Deputy Louise O'Reilly Dail Eireann, Kildare St., Dublin 2.

Dear Deputy O'Reilly,

The Health Service Executive has been requested to reply directly to your Parliamentary Question below which you submitted to the Minister for Health for response.

PQ Question 3583/20: To ask the Minister for Health his plans for a reconfiguration of stroke services in the Dublin area; and if he will make a statement on the matter. - Louise O'Reilly

Since 2010, there have been significant changes in how stroke services are delivered and the Irish Heart Foundation/HSE National Stroke Audit 2015.

Mortality from ischaemic stroke has fallen to single digit figures for the first time in the history of the country and is the result of better stroke unit care, wider availability of thrombolysis (drug mediated clot dissolving treatment) and the commencement of a thrombectomy (mechanical retrieval of clot) service. Mortality from haemorrhagic stroke has fallen too over the last 10 years though it remains an area for improvement.

Stroke is becoming our second leading cause of death and is the leading cause of acquired adult neurological disability in the country. Stroke unit care is the cornerstone and foundation of all stroke care and no acute hospital should be receiving acute stroke patients without providing such care. Stroke unit care serves all stroke patients, regardless of stroke type or time of onset acute stroke units have been shown to reduce stroke mortality and dependency and are a European Stroke Organisation (ESO)⁵ recommendation with clear set guidelines on what constitutes an acute stroke unit.

The NSP has sought to ensure that all our acute hospitals have either an acute stroke unit or a bypass arrangement for acute stroke presentations to an adjacent hospital with such stroke unit care available. Our national KPI is for 90% of all acute stroke cases admitted to an acute stroke unit bed and that patients spend 90% of their acute care in such a unit.

Within Dublin, the following hospitals have acute stroke units;

- St James Hospital
- Tallaght University Hospital
- Mater Misericordiae University Hospital
- St Vincents University Hospital
- Beaumont Hospital
- Connolly Hospital



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Adequate staffing of stroke units is essential to ensure proper care of this emergency brain injury, enhance acute treatment delivery, prevent and manage complications, start patient recovery and discharge planning early and to ensure proper patient and carer education and support.

The current focus of the NSP is to ensure patient access acute stroke units and that the acute stroke units are resourced appropriately so that patients receive the level of care needed to ensure optimal outcomes. There are no plans currently to reconfigure stroke services in Dublin.

Yours sincerely,

Geraldine Crowley,

Assistant National Director, Primary Care Strategy and Planning