

## Public consultation feedback and response Stroke Living Guidelines Updates

August 10 – September 26, 2023

Author	Organisation	Topic	Feedback	Actions taken
<p>Prof Dominique Cadilhac (individual)</p> <p>12.08.23</p>	<p>Monash University, VIC.</p> <p>Living Guidelines Steering group, Stroke Foundation</p>	<p>Management of atrial fibrillation</p>	<p>For patients with ischaemic stroke without significant haemorrhagic transformation, direct oral anticoagulant therapy can commence within 48 hours of minor-moderate stroke and from day 6-7 for major stroke.</p> <p>Suggested rewording and comments especially since someone with AF may already have been on a DOAC prior to admission.</p> <p>"For patients with ischaemic stroke without significant haemorrhagic transformation, direct oral anticoagulant therapy can commence or recommence within 48 hours of minor-moderate stroke, and from day 6-7 after a major stroke with the decision made prior to discharge." [in case minor stroke or major stroke discharge sooner than the timeframes - should be noted in their management plan and discharge letter/s)</p> <p>Is there a note that defines what is meant by minor to moderate and major e.g NIHSS scores?</p>	<p>The phrase "or recommence" has been added to the recommendation. We have reached out to the nursing and acute medical working groups for their input prior to steering group approval regarding the "decision made prior to discharge" part and there was quite a bit of discussion. The trial doesn't distinguish between being discharged or not and there was the question about a stroke found on MRI by a GP in the community or early d/c. Both the discipline working groups separately suggesting removing the phrase from the recommendation, but we have emphasised commencing prior to discharge and added in the statement about noting in their management plan and discharge letters if discharged earlier than the timeframes in the practical information section. Additionally, in the practical information section, we have defined minor, moderate and major stroke as per the ELAN trial.</p>
<p>Stephanie Schreiner (on behalf of Dr Marco Briceno) (group)</p> <p>20.09.23</p>	<p>NT Health</p>	<p>Management of atrial fibrillation</p>	<p>The Office of the Chief Medical Officer has consulted with Clinical Excellence and Patient Safety, and the Top End and Central Australian Regional Health Services including Dr Anna Holwell and Dr Alvaro Cervera. The NT accepts the updated Guidelines for Stroke Management – Management of Atrial Fibrillation and has no additional comments.</p>	<p>Noted. No change required.</p>
<p>Olivia Tzavalas (on behalf of Dave Pepper) (group)</p> <p>22.09.23</p>	<p>Canberra Health Services</p>	<p>Management of atrial fibrillation</p>	<p>CHS has nil feedback to provide.</p>	<p>Noted. No change required.</p>