I have no disclosures.
Overview

- Where we Were
- Where we Are
- Where we are Going
THE PAST
1925: Strong Memorial Hospital started as a 250-bed acute care facility

The UR medical school opened its doors in 1925, and less than a year later, Strong Memorial Hospital followed suit.
THE PRESENT
2019: Strong Memorial Hospital, 846 inpatient beds

Annually, SMH has over 39,000 admissions

Level One regional trauma and burn center
UR Medicine Comprehensive Stroke Center

What is Stroke/TIA?
A stroke (otherwise known as a “brain attack”) occurs when brain cells die due to disruption of blood flow to the brain. Stroke can be caused by either a blocked blood vessel (ischemic stroke) or a leaky blood vessel (hemorrhagic stroke) in the brain.

Learn More

Why Choose Us?
UR Medicine’s Comprehensive Stroke Center offers world-class treatment and prevention of stroke, is the region’s only Comprehensive Stroke Center, and has the area’s only dedicated NeuroIntensive Care Unit.

Learn More

Rapid Access TIA Clinic
Our goal at UR Medicine’s Rapid Access TIA clinic and Neurovascular Laboratory is to swiftly address these events, while providing patients with a positive outpatient experience without the need for an emergency visit or overnight stay.

Learn More

Our Team
Our stroke team is comprised of fellowship-trained vascular neurologists, neurosurgeons, neuroradiologists and neurocritical care specialists. They form

Learn More

STAR-NY
The Stroke Treatment Alliance of Rochester of New York, a University of Rochester Medical Center (URMC) led community-wide initiative was formed to decrease the

Learn More

Mobile Stroke Unit
UR Medicine’s partnership with American Medical Response, has launched Upstate and Central New York’s first Mobile Stroke Unit, the STAR in the Brain. The unit

Learn More

5-1200: 20-bed acute inpatient rehabilitation facility
Long-Term Outcome Trends

AM Lin et al. 2019
Return to Work After Stroke

• **Ischemic stroke in young adults** [K Aarnio et al. Neurology 2018 Nov 13]
  – Helsinki Young Stroke Registry
  – 769 patients with ischemic stroke
  – 1 year: 62%, 2 years 58%, 5 years 53%
  – Factors associated with not returning to work at 1 year
    • Large anterior strokes
    • Caused by large artery atherosclerosis
    • Caused by high-risk sources of cardioembolism

  – 55 English or French manuscripts
  – 1 year: 56%, 2 years 67%
What is a Physiatrist?

- Physical Medicine and Rehabilitation (PM&R) physicians, also known as physiatrists, treat a wide variety of medical conditions affecting the brain, spinal cord, nerves, bones, joints, ligaments, muscles, and tendons.

- We may be subspecialty certified in Brain Injury Medicine, Hospice and Palliative Medicine, Neuromuscular Medicine, Pain Medicine, Pediatric Rehabilitation Medicine, Spinal Cord Injury Medicine, and/or Sports Medicine.
Safe Gait
Bioness Integrated Therapy System (BITS)
InMotion ArmBots
Constant Therapy: Effectiveness of an impairment-based individualized rehabilitation program using an iPad-based software platform
Outpatient

- Physical and Occupational Therapy
- Physiatry
- Integrative Cognitive Rehabilitation Program (ICRP)
  - comprehensive, integrative and multidisciplinary approach to help individuals develop compensatory strategies and maximize individual strengths
  - Speech Therapy, Occupational Therapy, and Neuropsychology
    - Changes in communication or word finding difficulties
    - Reduced ability to process information
    - Reduced attention or memory
    - Difficulty with planning or initiation
    - Reduced organizational abilities
    - Difficulty with multi-tasking
    - Cognitive overload

[Logo: UR Medicine, Del Monte Institute for Neuroscience]
THE FUTURE
Ongoing Stroke Recovery Trials at UR

- Fluoxetine for Post-Stroke Visual Recovery (Bogac Sahin)
- Training for Post-Stroke Visual Recovery (Krystel Huxlin)
- STRONG enrollment site (The Stroke, sTress, RehabilitatiON, and Genetics Study: Steven Cramer, UC Irvine)
- Developing a program for hand/arm motor recovery (Ania Busza):
  - Natural history to follow how hemiparesis improves
  - Neurologic versus musculoskeletal fatigue
  - Intensity of rehabilitation
$5 Million to be awarded to NeuroCuresNY on February 17, 2019
The SMaHRT Study at Mass General

How will I recover after my stroke?

Capture personalized trajectories of spontaneous motor recovery after stroke

Measure movement quantity and quality (i.e. upper extremity kinematics) in patients recovering from stroke

Understand how cortical activity (i.e. eeg) relates to arm kinematics and overall recovery

ClinicalTrials.gov/NCT03485040
Clinically...5-1200 and 6-1200
Thank you!

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