

## References and Literature Grading

### Intra-Arterial Thrombectomy (“Clot Retrieval”) for Selected Patients with Acute Ischemic Stroke (9/6/2015)

In accordance with the CPC Guideline Statement Policy found here <http://www.aaem.org/UserFiles/CPCProtocols.pdf> this search was conducted on February 28, 2015.

Search terms “ischemic stroke” AND (interventional OR intra-arterial OR mechanical)

Publication	Grade	Quality	Comments	Finding
1. Ma	B	Adequate	Meta-analysis. Addressed intravenous (IV) versus intra-arterial (IA) treatment, not combined approach	Supportive
2. Singh	B	Good	Meta-analysis. Had mixture of IV vs IA and combined approaches. Included trials with older devices up to 2013	Neutral
3. Berkhemer (MR-CLEAN)	A	Outstanding	Large RCT, with early IV treatment followed by rescue approach. Used newer devices. Large positive effect. Imaging selection was only presence of large vessel occlusion.	Supportive
4. Broderick (IMS-3)	A	Outstanding	Large RCT, mostly combined approach using older devices, relatively late treatment.	Neutral
5. Ciccone (SYNTHESIS)	B	Outstanding	Good mid-sized RCT, addressed IV versus IA and not combined approach.	Neutral
6. Kidwell (MR-RESCUE)	B	Good	Small RCT, using penumbral imaging and determining whether embolectomy more effective when penumbra existed.	Neutral
7. Goyal (ESCAPE)	A	Outstanding	Mid sized RCT, using combined approach with newer devices. Imaging selection: large vessel occlusion. Imaging exclusion for large infarct core or poor collaterals.	Supportive
8. Campbell (EXTEND-IA)	A	Good	Small RCT, using combined approach and newer devices. Used perfusion imaging and presence of occlusion to select patients.	Supportive
9. Saver (SWIFT-PRIME)	A	Good	Mid-sized RCT using newer devices with collateral / occlusion based selection. Trial terminated early.	Supportive
10. Jovin (REVASCAT)	A	Outstanding	Mid-sized RCT embedded within statewide registry in Catalonia, Spain. Imaging selection by lack of extensive ischemia and presence of large vessel occlusion.	Supportive

