



May 4, 2021

A message to our EMS partners from OhioHealth Neurosciences:

Alteplase (tPA) has been the mainstay of acute ischemic stroke therapy in the first 4.5 hours of acute ischemic stroke for the last 25 years. Recently, new data shows tenecteplase (TNK), a thrombolytic that has been available for over 20 years, has promise to be more effective than alteplase for acute ischemic stroke.

OhioHealth Neurosciences at our comprehensive and primary stroke centers will be the first in your region to expand treatment opportunities for select acute stroke patients with IV tenecteplase.

Patients with large vessel occlusions who receive IV tenecteplase do better than those who get no treatment or IV alteplase prior to a thrombectomy procedure. In fact, more than double of those getting IV tenecteplase do not need the thrombectomy procedure.

Fast reperfusion is the best treatment of acute ischemic stroke. TNK delivery and onset of action is much faster than tPA.

Patient eligibility for tenecteplase

- Onset within 0-4.5 hours
- Severe stroke presentation (LAMS > 3)

This is not FDA approved but it is also not research. TNK has a Class 2 endorsement by the AHA and several randomized clinical studies show that tPA is not the superior drug.

Differences between TNK and tPA

Compared to tPA, TNK is 15x more selective to bind to fibrin which then activates thrombolysis and is resistant to being degraded by the body. It has a lower bleed rate of approximately 2% when compared to 6% for tPA. TNK is easy to administer as an IV push and does not require an IV drip infusion. This makes nursing care easier.

To learn about OhioHealth Neurosciences and stroke care, visit:
ohiohealth.com/services/neuroscience/our-programs/stroke/

For information about OhioHealth EMS programs and learning opportunities, visit
ohiohealthems.com