ABCD2 AS A DIAGNOSTIC PROBABILITY TOOL IN STROKE

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Background: The ABCD2 scale is a predictor of risk of recurrence of a new stroke in patients with transient ischemic attack (TIA). It is a score consisting of the evaluation of the patient's age (A≥60 years = 1 point), systemic arterial hypertension (B≥140x90mmHg = 1 point), clinical picture of TIA (C = unilateral paresis = 2 points / 1 point / others = 0 points), duration of symptoms (D = 0-10minutes = 0 points / 10-59minutes = 1 point / ≥60 minutes = 2 points) and history of diabetes (D = 1 point if present). This score is also used in clinical practice to guide the indication of dual antiaggregation in patients with TIA or minor stroke, or in cases of single prolonged episode of vertigo, to guide the indication of magnetic resonance.

Objective: The objective of this study is to analyze the score ABCD2 of patients with Stroke mimics with suspected stroke or TIA but in whom the diagnosis was excluded.

Methods: A retrospective observational study from August 2017 to May 2018, conducted at a private hospital in Rio de Janeiro, which analyzed the ABCD2 of patients admitted with suspected stroke and TIA (included in the stroke protocol) and were excluded because of an alternative diagnosis ("Stroke mimics").

Results: In the analyzed period, 200 patients were included in the stroke protocol at this institution. Patients with confirmed stroke had a mean age of 78 years (SD ± 17), comprised 47 men and 62 women, 69.7% of hypertensive patients, 27% of diabetics, mean ABCD2 4.7 (SD ± 1, 58). In patients with stroke mimics composed of 45 men and 46 women, ABCD2 3.8 (SD ± 1.34). The most frequent final diagnoses in non-stroke patients were seizures (18 patients), anxiety (6 patients), headache (5 patients).

Conclusion: A total of 91 patients with Stroke mimics and Group B: 109 patients with AVCI / TIA diagnoses, the median of group A = 4 and group B = 5 (p <0.001). Conclusion: Score ABCD2 was higher in patients with stroke or TIA.