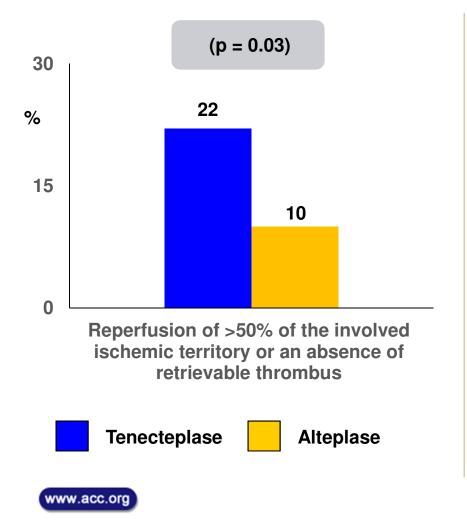
EXTEND-IA TNK

Trial design: Patients within 4.5 hours from symptom onset of ischemic stroke and undergoing endovascular therapy were randomized to tenecteplase 0.25 mg/kg (n = 101) vs. alteplase 0.9 mg/kg (n = 101).



Results

- Reperfusion of >50% of the involved ischemic territory or an absence of retrievable thrombus at the time of the initial angiographic assessment: 22% of the tenecteplase group vs. 10% of the alteplase group (p for noninferiority = 0.002, p for superiority = 0.03)
- Symptomatic intracerebral hemorrhage: 1% in the tenecteplase group vs. 1% in the alteplase group

Conclusions

 Among patients with acute ischemic stroke undergoing endovascular therapy, tenecteplase was associated with a higher incidence of reperfusion and better functional outcome compared with alteplase. Intracranial hemorrhage was similar between groups.

Campbell BC, et al. N Engl J Med 2018;378:1573-82