

## RESILIENT- Extend: Randomization of Endovascular Treatment with Stent-retriever and/or Thromboaspiration vs. Best Medical Therapy in Acute Ischemic Stroke due to Large Vessel OcclusioN Trial in the Extended Time Window

RESULTS: In patients with acute large vessel occlusion stroke (LVOS), treatment with MT within 8-24 hours from TLSW using solely NCCT/CTA selection showed significantly higher rates of good (mRS 0-2) and excellent (mRS 0-1) outcomes at 90 days.

PURPOSE: To evaluate if mechanical thrombectomy (ME) outperforms medical management alone for better outcomes at 90 days in patients with acute LVOS seen 8-24 hours after Time Last Seen Well (TLSW), using NCCT/CTA selection exclusively.

TRIAL DESIGN: Multi-center, prospective, randomized, open, blinded endpoint, controlled trial, n=245.

## Ordinal Shift Analysis for the modified Rankin Score at 90 Days

| mRS Shift   | OR            | 95% CI     | p-value |
|-------------|---------------|------------|---------|
| 0 vs. 1-6   | 10.82         | 0.95-122.7 | 0.06    |
| 0-1 vs. 2-6 | 2.84          | 1.15-7.03  | 0.023   |
| 0-2 vs. 3-6 | 2.13          | 1.11-4.08  | 0.026   |
| 0-3 vs. 4-6 | 1.25          | 0.74-2.11  | 0.429   |
| 0-4 vs. 5-6 | V 0.71A R S   | 0.42-1.18  | 0.195   |
| 0-5 vs. 6   | Bc0.58 learts | 0.31-1.07  | 0.093   |

Key Takeaways: Patients undergoing MT within 8-24h from the TLSW and selected solely based on a NCCT/CTA showed significantly higher rates of good and excellent outcomes at 90 days, suggesting that expanding the availability of MT worldwide could benefit more patients.

