









international scientific and practical conference



2022 SHAWNEE, USA

International scientific and practical conference

CUTTING EDGE-SCIENCE

2022 Shawnee, USA Conference Proceedings Primedia E-launch Shawnee, USA

PRIMEDIA E-LAUNCH

International scientific and practical conference

CUTTING EDGE-SCIENCE

2022 Shawnee, USA

Conference Proceedings

Science editor: G. Kolne

Copyright © 2022

By Primedia E-launch LLC

All rights reserved.

Available at virtualconferences.press

Published Primedia E-launch LLC.

Shawnee, USA

ISBN 978-1-64945-234-4

DOI:10.5281/zenodo.5091677

Primedia E-launch LLC, 5518 Flint St, Shawnee, 66203, USA

https://orcid.org/0000-0001-9154-6049

instituteforscientificresearch@gmail.com

The effectiveness of anticoagulant therapy in Covid-19 associated ischemic stroke

Makhsudjan Ataniyazov, Abdulakhad Khamidov.

Tashkent Medical Academy, Departments of Neurology,

Tashkent, Uzbekistan

Background and Aims: To study and evaluate the effectiveness of various anticoagulant agents on hemorheological indicators in Covid-19 associated ischemic strokes.

Methods: 32 patients with acute ischemic stroke and a history of coronavirus infection (not more than 2 months) were selected for the study. These patients (n = 32) were divided into three groups. In the first group, n = 17 (53.1%) patients received heparin as anticoagulant therapy for 2 weeks at 24000-36000 ED per day, n = 9 (28.1%) patients in the second group received enoxiparin 1 mg /kg /day for 2 weeks, and third group consisted of n = 6 (18.8%) patients received rivaroxaban 15-20 mg per day for 2 weeks. Hemorheological parameters (D-demir, INR, fibrinogen, prothrombin time, APTT) of all patients were checked before and 2 weeks after therapy.

Results: When analyzing the age and sex of all patients in the study, the average age was 67.4 ± 2.3 , of which the proportion of men and women were 56.2% (n=18); 43.8% (n=14) respectively. As a result of anticoagulant therapy in groups, the hemorheological parameters were regressed in the first, second, and third groups of patients in the following order: D-dimer from 581.4 ± 1.6 ng/ml to 334.8 ± 2.1 ng/ml; from 628.6 ± 1.4 ng/ml to 336.7 ± 2.3 ng/ml; from 541.1 ± 1.9 ng/ml to 496.6 ± 1.4 ng/ml; respectively (p<0.001), fibrin degradation products from 7.71 ± 1.1 µg/ml to 3.6 ± 1.3 µg/ml; from 7.42 ± 0.9 µg/ml to 3.8 ± 1.19 µg/ml, from 7.52 ± 1.2 µg/ml to 3.71 ± 1.3 µg/ml, respectively (p<0.001), prothrombin time from $15,2\pm1.1$ sec to 9.4 ± 0.8 sec; from 14.9 ± 1.1 sec to 9.6 ± 0.8 sec; from $15,6\pm1.1$ sec to 9.2 ± 0.8 sec; respectively (p<0.001), APTT from 31.51 ± 1.29 sec to 24.16 ± 0.8 sec; from 28.2 ± 1.71 sec to 26.9 ± 1.65 sec; from $29,76\pm1.13$ sec to 25.21 ± 1.26 sec; respectively (p<0.001).

DOI:10.5281/zenodo.5091677

Compared with pre-treatment hemorheological parameters after 2 weeks, the following percentages decreased in the first, second, and third groups: D-dimer 42.4%; 46.4%; 8.2%; respectively (p<0.001), fibrin degradation products 53.3%; 48.8%; 50.7%; respectively (p<0.001), prothrombin time 38.1%; 35.6%; 41.1%; respectively (p<0.001), APTT 23.3%; 4.6%; 15.3%; respectively (p<0.001).

Conclusions: The results of the study showed that among hemorheological indicators, all anticoagulants have a significant positive effect on fibrinogen and prothrombin time, heparin and enoxyparin are effective against D-dimer, heparin and riboraxaban are effective against APTT. However, riboraxaban has almost no positive effect on D-dimer while enoxiparin has almost no positive effect on APTT.