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Webinar EVER Pharma

Neurorecovery – When evidence from the bench meets results at the bedside

October 18, 2022

Cerebrolysin®

Reconnecting Neurons.
Empowering for Life.

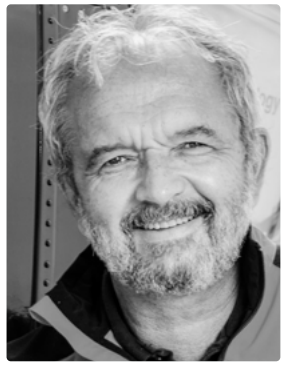
Webinar EVER Pharma (October 18, 2022)

Neurorecovery – When evidence from the bench meets results at the bedside

SPEAKERS

Andrei Alexandrov

Chair of the Department of Neurology and Semmes-Murphey Professor at the University of Tennessee, USA



Helmut Trimmel

Head of Anaesthesia, Emergency and General Intensive Care Medicine Landesklinikum Wiener Neustadt, Austria

Peter Lackner

Head of Department of Neurology, Clinic Floridsdorf, Vienna, Austria

INTRODUCTION

For many years hundreds of pharmacological compounds with neuroprotective and neurorecovery-enhancing properties showed promising results in the preclinical stage but failed to translate these results into successful clinical evidence.

However, one compound succeeded and is nowadays labeled as evidence-based medicinal product proven by successful clinical trials and many different guideline inclusions – Cerebrolysin.

Two renowned clinicians, Professor Helmut Trimmel from Wiener Neustadt, Austria, and Professor Andrei Alexandrov from Memphis delivered very powerful and convincing messages in EVER Pharma's fifth webinar in 2022 titled "When evidence from the bench meets results at the bedside"

Neuroprotection in severe Traumatic Brain Injury (sTBI)
by Helmut Trimmel

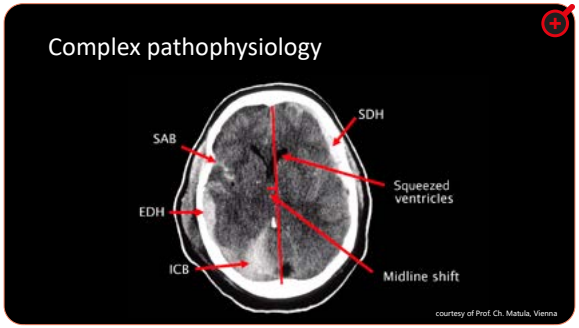
Role of Cerebrolysin in Post Stroke Recovery
by Andrei Alexandrov

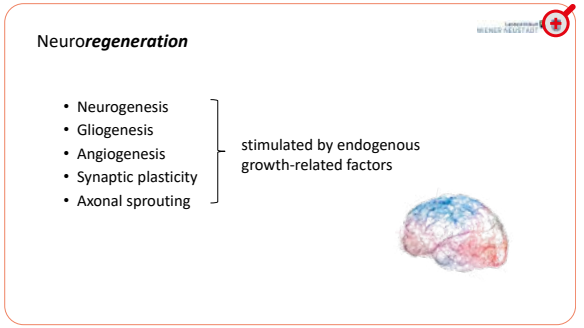
Neuroprotection in severe Traumatic Brain Injury (sTBI)

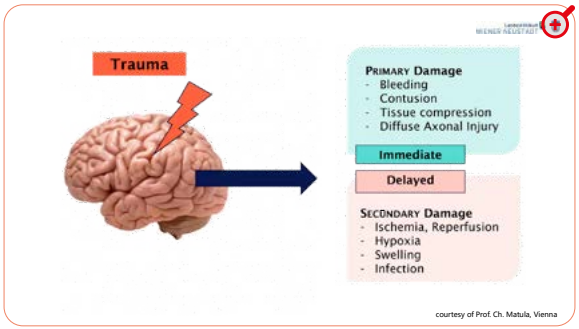
by Helmut Trimmel

Helmut Trimmel introduced the audience to the most important epidemiological facts of neurotrauma, also called the "silent epidemic". It affects more than 7.7 million people in Europe with fatal outcome in 57.000 people, most of them are young males.

Neurotrauma is a very complex medical problem making clinical research and standard treatment very difficult. It is the task of clinicians to reduce the impact of secondary damage, which can be alleviated by multi-modally acting neuroregenerative agents such as Cerebrolysin.

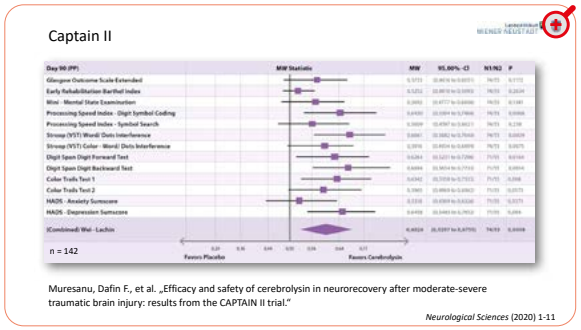






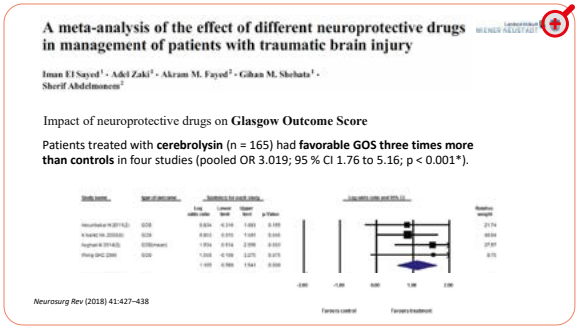
Helmut Trimmel presented a short overview of specific compounds, which were researched in the past such as progesterone, corticosteroids, erythropoietin, and others. All of these compounds succeeded in preclinical studies but failed in clinical trials. The same applies for citicoline, however, it showed at least modest effects.

Finally, Trimmel presented and discussed the latest clinical evidence of Cerebrolysin in TBI, including the significant multidimensional treatment advantage as shown by the CAPTAIN trial and the impressive effects on the Glasgow Outcome Score as shown by a recently published meta-analysis.



Muresanu, Dafin F., et al. „Efficacy and safety of cerebrolysin in neurorecovery after moderate-severe traumatic brain injury: results from the CAPTAIN II trial."

Neurological Sciences (2020) 1-11



Neurosurg Rev (2018) 41:427–438

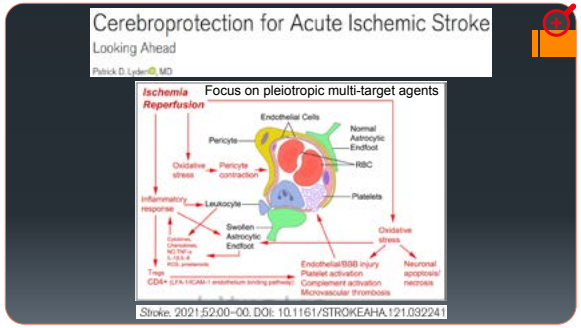
In his conclusion, Trimmel emphasized the importance of combining neuroprotective treatment with standard intensive care in order to improve the neurocognitive outcome and to enhance the quality of life, especially, when the neuroprotective treatment has a beneficial safety profile.

Role of Cerebrolysin in Post Stroke Recovery

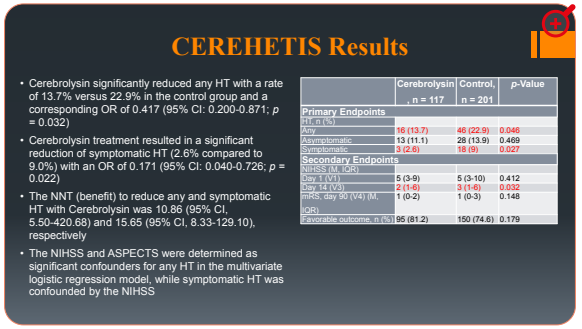
by Andrei Alexandrov

The 2nd speaker, Andrei Alexandrov from Memphis, USA, started out by mentioning his first clinical experience treating patients with Cerebrolysin already in 1989 and that he stayed involved in following the research and progresses made to create evidence in ischemic stroke.

He titled his lecture "The role of Cerebrolysin in neurorecovery" and introduced a very recent publication emphasizing that neuroprotection as a research field has been replaced by the term "cerebroprotection", which includes further aspects of brain protection, such as vascular protection.

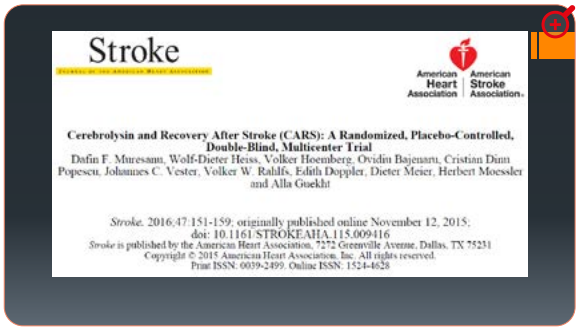


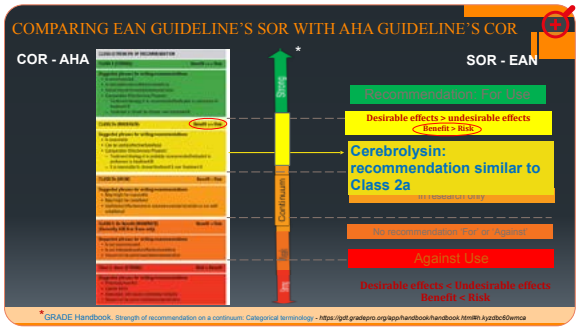
Andrei Alexandrov moved on to present a new study, the CEREHETIS study, which is currently under publication. This study demonstrates as the primary endpoint a significant reduction of hemorrhagic transformation and also shows a trend for better clinical outcome.

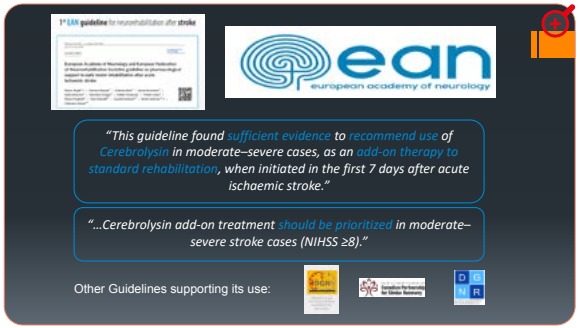


Furthermore, Andrei Alexandrov discussed briefly the well-known CARS study, which he put into the context of recent guideline inclusions. In particular he mentioned the inclusion into the EAN-Guidelines but he also showed how this guideline "translates" into the AHA-guideline as a 2a recommendation.

Finally, he briefly introduced the Cerebrolysin Recanalization and Reperfusion program (CERECAP), a series of investigator-initiated pilot studies combining recanalization therapies with Cerebrolysin.







The discussion highlighted the particular benefits of neuro- and vascular protection with Cerebrolysin as Andrei Alexandrov clearly pointed out that there is mounting evidence that Cerebrolysin improves the blood-brain-barrier integrity and that this might be of particular benefit for patients with diabetes and strokes with a higher risk for hemorrhagic transformation.

Summary

Andrei Alexandrov very convincingly introduced the basic science related to cerebroprotection, clearly a "hot topic" in the context of current stroke medicine and that **Cerebrolysin seems to play a major role** in establishing irrefutable evidence in this field.

Helmut Trimmel explained Cerebrolysin's mechanism of action even more deeply, highlighting latest studies **why Cerebrolysin should be administered to patients with brain trauma**. He built a credible bridge to the clinical data and showed that Cerebrolysin is momentarily the only agent with significantly positive trials in randomized trials.

Altogether the objective of this webinar was fully achieved - to demonstrate that **Cerebrolysin is the only compound whose preclinical research has been successfully translated into clinical evidence**.

ABBREVIATED PRESCRIBING INFORMATION. Name of the medicinal product: Cerebrolysin - Solution for injection. Qualitative and quantitative composition: One ml contains 215.2 mg of Cerebrolysin concentrate in aqueous solution. List of excipients: Sodium hydroxide and water for injection. Therapeutic indications: For treatment of cerebrovascular disorders. Especially in the following indications: Senile dementia of Alzheimer's type. Vascular dementia. Stroke. Craniocerebral trauma (commotio and contusio). Contraindications: Hypersensitivity to one of the components of the drug, epilepsy, severe renal impairment. Marketing Authorisation Holder: EVER Neuro Pharma GmbH, A-4866 Unterach. Only available on prescription and in pharmacies. More information about pharmaceutical form, posology and method of administration, special warnings and precautions for use, interaction with other medicinal products and other forms of interaction, fertility, pregnancy and lactation, effects on ability to drive and use machines, undesirable effects, overdose, pharmacodynamics properties, pharmacokinetic properties, preclinical safety data, incompatibilities, shelf life, special precautions for storage, nature and contents of the container and special precautions for disposal is available in the summary of product characteristics.

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