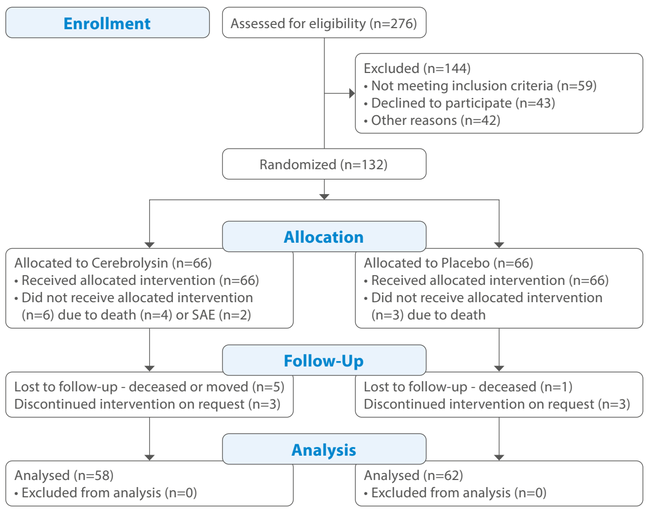
Patient population

Inclusion criteria

- Ischemic stroke - Left middle cerebral artery (MCA) territory
- Non-fluent aphasia
- Enrollment in the study between 3 and 5 days post-stroke
- Right-handed
- Local language as primary language
- Provision of signed informed consent

Exclusion criteria

- History of symptomatic ischemic or hemorrhagic stroke
- Severe comprehension deficits that could compromise the understanding of informed consent or instructions, such as fluent aphasias (e.g. Wernicke aphasia) or global aphasias
- History of epilepsy or EEG-documented epileptic discharges
- Severe chronic renal or liver failure, indicated by aspartate aminotransferase, alanine aminotransferase levels greater than 4 times the normal values, or creatinine levels exceeding 4mg/dL
- Presence of life-threatening diseases
- Uncorrectable auditory or visual deficits that could impair testing
- Preexisting neurodegenerative or psychiatric disease



Combination treatments including Cerebrolysin improve post-stroke complications!

Treat stroke patients with Cerebrolysin as soon as possible

Disorder	Daily dosage	Initiation of treatment	Duration of treatment
Stroke	30 ml	as soon as possible no later than 5 days after stroke	30 days

Cerebrolysin is safe and well tolerated.

Treatment Scheme of ESCAS[1]

Titel: Speech therapy combined with Cerebrolysin enhances aphasia recovery after ischemic stroke: ESCAS[1] Randomized Pilot Study

Groups: 132 stroke patients in total
66 Cerebrolysin group + 66 Placebo group

Treatment: 1 cycle = 30ml Cerebrolysin + 1 hour SLT[3] for 10 days
3 cycles in two-week intervals = d1-14, d29-42, d57-70
First cycle starts 3 - 5 days after stroke

[1] ESCAS = **E**fficacy and **S**aftey of **C**erebrolysin in the treatment **A**phasia after AI**S**
[2] Western Aphasia Battery
[3] Speech and Language Therapy

ABBREVIATED PRESCRIBING INFORMATION – Cerebrolysin. 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 Authorization 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. (Reference SPC-CCDS Version 2.0/03.06.2016)

EVER Neuro Pharma GmbH, Oberburgau 3, 4866 Unterach, Austria, www.everpharma.com, www.cerebrolysin.com

CERE/INT/01/2025/2

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STROKE

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Published in
Stroke
Stroke. February 2025
Homberg V. et al.

Speech therapy combined with Cerebrolysin® in enhancing non-fluent aphasia recovery after AIS

Results from the ESCAS[1] Randomized Pilot Study

Homberg V. et al., Stroke 2025
A prospective, randomized-controlled, multicenter, double blinded-study

Cerebrolysin sets a new treatment standard in post-stroke aphasia

- Aphasia related deficits significantly improve
- Excellent mRS results
- More pronounced response of Cerebrolysin patients
- Better quality of life

Cerebrolysin®
Reconnecting Neurons.
Empowering for Life.

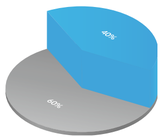
Aphasia problems after stroke

Aphasia signs

- Language problems
- Problem with finding the right words
- Comprehension problems
- Communication problems

Consequences for daily life

- Impact on quality of life
- Increased social isolation
- Problem with returning to work
- Frustration in caregivers

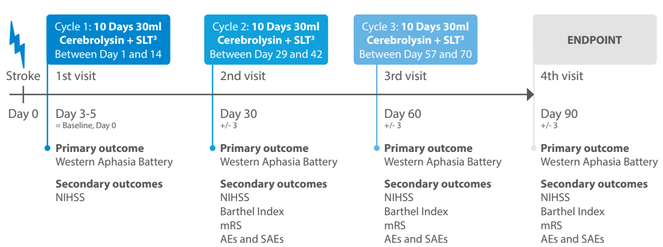


Up to 40% of all stroke patients suffers from aphasia

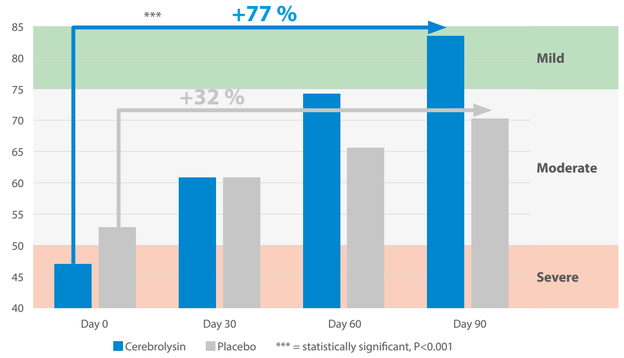
Primary objective

ESCAS[1] study is investigating the efficacy and safety of Cerebrolysin and speech therapy versus placebo and speech therapy at day 30, 60 and 90 after baseline.

Treatment and outcome criteria



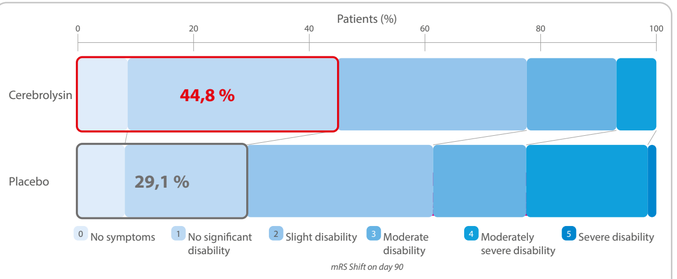
Aphasia related deficits significantly improve



WAB², ITT, Median

- Significantly better results in the combination therapy
- **+36 points** in the Cerebrolysin group vs. only +17 in the placebo group
- More than **doubles treatment benefits** in Cerebrolysin group
- Cerebrolysin treated patients **shift from severe (47 WAB²) to mild status (83 WAB²)**
- In contrast, placebo treated patients remain at moderate status (53;70 WAB²)

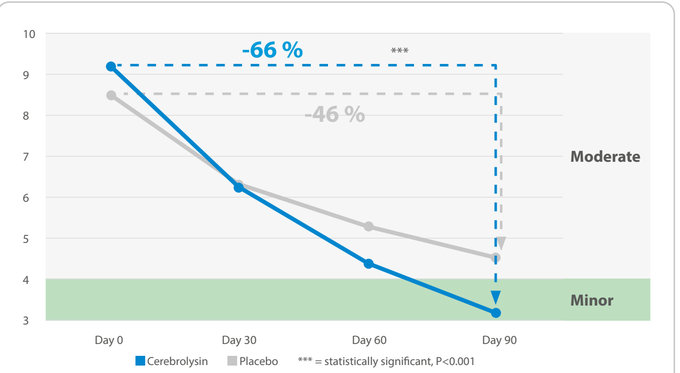
Excellent mRS results



mRS Shift on day 90

- **Significant results** in mRS score on day 90
- **44,8% of patients** gained full independence (mRS score 0-1) in the Cerebrolysin group
- Only 29,1% in the placebo reached the same level

More pronounced response of Cerebrolysin patients



NIHSS, ITT, Mean

- Significant improvement in NIHSS
- Patients in Cerebrolysin group shift **from moderate** (9) **to minor** stroke (3)
- Placebo treated patients **remain at moderate** stroke severity level (9;5)
- Cerebrolysin group **improves by 6 points,** placebo only 4 points
- According to NINDS criteria: Cerebrolysin treated patients respond to the treatment

Patient benefits

- **Better quality of life**
- **Faster reintegration into social- and work-life**
- **Less dependence on caregivers**