Brain natriuretic peptide among stroke patients

Sir,

We thank Dr. Wu *et al*.[1] for their interest in our article named "A prospective study of brain natriuretic peptide (BNP) levels in three subgroups: Stroke with hypertension, stroke without hypertension, and hypertension alone."[2] Early prediction of fatal outcome after stroke might improve decision-making processes. The role of BNP and N-terminal of the prohormone BNP (NT-proBNP) as independent predictors of all-cause mortality after stroke.[3] BNP has a significant association with mortality and functional outcome, in recent times studies.[4,5]

Dr. Wu *et al*. have claimed that the including patients in Group I and II could not be representative of the classical stroke types. However, patients in Group I and II were typically classical stroke and they were scored according to the National Institutes of Health Stroke Scale (NIHSS). Furthermore, Dr. Wu *et al*. have claimed that serious bias in our study. These are very heavy and unfair allegations. We do not certainly agree to these allegations. There is no any bias in our study. Several cardiac abnormalities such as cardiac failure, myocardial necrosis, and arrhythmia can develop in acute stroke patients. These cardiac changes may cause increased BNP production by the heart.[6-8] Therefore, our study the relationship between BNP levels and acute ischemic stroke (AIS) correctly. It is better to exclude those stroke patients who also have cardiac pathologies. In our study, patients with congestive heart failure, chronic cor pulmonale, severe valvular heart disease, chronic renal failure, liver insufficiency, diabetes mellitus, and atrial fibrillation were excluded from the study, especially. Because these diseases can affect the plasma BNP levels. The mean BNP levels in our study subjects were affected only by hypertension and stroke.

Another criticism made by Dr. Wu *et al*. is that we did not classify the AIS patients into any subtypes. They are right about that. We only classified the stroke patients into two subtypes ischemic and hemorrhagic.

García-Berrocoso *et al*.[3] have reported that BNPs (both BNP and NT-proBNP) are associated with post stroke mortality independent of NIHSS score, age, and sex in their meta-analysis.[3] Furthermore, we agree with Dr. Wu *et al*. opinion about the value of the use of BNP in AIS patients.

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Experiences and the use of BNP POCT platform on suspected stroke patients by a Chinese emergency department

Sir,

We have recently published an article about the opinions of the use of brain natriuretic peptide (BNP) among acute ischemic stroke patients in Annals of Indian Academy of Neurology.[1] In this field, several studies have reported that the plasma BNP level in cardioembolic stroke is

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