Blood vessels called arteries bring oxygen and nutrients to the brain. If an artery to the brain is narrowed or blocked, then part of the brain does not receive the blood it needs. That can cause permanent brain injury, called a stroke.

动脉血管为大脑输送氧气和营养物质。如果通往大脑的动脉狭窄或堵塞，大脑的一部分就无法获得所需的血液。这会造成永久性脑损伤，即中风。

Although strokes are much more common in adults, they can happen in children, even previously healthy children.

虽然中风在成年人中更为常见，但也可能发生在儿童身上，甚至是之前身体状况健康的儿童。

Strokes in children can be caused by diseases or injury of the arteries to the brain, or by blood clots in the heart that travel to the brain and block an artery. Either way, part of the brain does not receive enough blood, which can cause a stroke.

儿童中风可能是由大脑动脉的疾病或损伤引起的，也可能是由心脏中的血栓进入大脑并阻塞动脉引起的。无论哪种情况，大脑的一部分都无法获得足够的血液，从而导致中风。

In otherwise healthy children, the most common cause of a stroke is a rare condition called “focal cerebral arteriopathy,” or FCA. In FCA, the wall of an artery in the brain becomes inflamed. As the inflammation gets worse over days, the artery becomes more and more narrow, making it harder for the blood to get to the brain.

在健康儿童中，最常见的中风原因是一种叫做 "局灶性脑动脉病 " 的罕见疾病。患有局灶性脑动脉病后，大脑动脉壁会发炎。随着炎症日趋严重，动脉会变得越来越狭窄，使血液更难进入大脑。

Pediatric stroke doctors commonly treat FCA with high doses of steroids, which help calm the inflammation. But they do not know the *best time* to start the steroid treatment because there have been no clinical trials of FCA treatment.

儿科中风医生通常使用大剂量类固醇治疗局灶性脑动脉病，这有助于缓解炎症。但他们不知道开始类固醇治疗的最佳时间，因为还没有针对局灶性脑动脉病治疗的临床试验。

Doctors know a child has FCA when they see arteries get more narrow over a matter of days. Before that, they are often unsure of the diagnosis. The child *might* have FCA, or might have another cause of a stroke, like a blood clot that came from the heart.

当医生看到动脉在几天内变得更加狭窄时，就会知道患儿患有局灶性脑动脉病。在此之前，他们往往无法确诊。患儿可能患有局灶性脑动脉病，也可能是其他原因导致中风，如来自心脏的血栓。

This leads to two different ways that doctors currently treat FCA, each with possible pros and cons.

这就导致了医生目前采用两种不同方法治疗局灶性脑动脉病，每种方法都可能有利有弊。

Sometimes doctors start steroids as soon as they think a child *might* have FCA. We will call this Option A: the “just in case” approach. If the child has FCA, it might be better to start the steroids right away and prevent the disease from getting any worse. But…if the child has another cause for their stroke, then they will have gotten high doses of steroids for no reason, and steroids can have serious side effects.

有时，一旦医生认为患儿可能患有局灶性脑动脉病，就会立即开始使用类固醇。我们称之为方案 A："以防万一 "法。如果患儿患有局灶性脑动脉病，最好立即开始使用类固醇，以防病情恶化。但是......如果儿童中风是由其他原因引起的，那么他们就会无缘无故地服用大剂量的类固醇，而类固醇可能会产生严重的副作用。

More often, doctors will wait to start steroids until they are *certain* the child has FCA. They can be certain when the disease gets worse, meaning the artery gets narrower, within about 3 to 7 days. We will call this Option B: the “wait and see” approach. This way, only children with FCA get treated with steroids, and no child gets it without needing it. But…doctors still worry that if they wait for the FCA gets worse, the child might have more injury to the brain.

通常情况下，医生会等到确定患儿患有局灶性脑动脉病后才开始使用类固醇。如果病情恶化，也就是动脉变窄，大约3到7天内就可以确定。我们称之为方案B："静观其变 "法。这样，只有患有局灶性脑动脉病的儿童才会接受类固醇治疗。但是......医生仍然担心，如果等到局灶性脑动脉病进一步恶化，孩子的大脑可能会受到更大的伤害。

Doctors simply don’t yet know which option is best. Give steroids “just in case” a child has FCA? Or “wait and see” if the child really has FCA before starting steroids?

医生们还不知道哪种方法更好。是 "以防万一 "给患儿注射类固醇？还是 "静观其变"，看患儿是否真的患有局灶性脑动脉病，然后再开始使用类固醇？

To find out, researchers at more than 25 children’s hospitals throughout the United States and Canada are conducting a study. The study is called FOCAS, the Focal Cerebral Arteriopathy Steroid Trial. It is paid for by the National Institutes of Health because they know how important it is to protect children from brain injury.

为了找出答案，美国和加拿大超过 25 家儿童医院的研究人员正在进行一项研究。这项研究名为局灶性脑动脉病类固醇试验。研究由美国国立卫生研究院资助，因为他们知道保护儿童免受脑损伤的重要性。

We are looking for volunteers to take part in the study. You and your child are being invited to participate because doctors believe *your* child might have FCA. By joining the study, you and your child will help doctors learn the best time to start steroids for future children in the same situation.

我们正在寻找参加这项研究的志愿者。之所以邀请您和您的孩子参加，是因为医生认为您的孩子可能患有局灶性脑动脉病。通过参加这项研究，您和您的孩子将帮助医生了解在相同情况下为未来的孩子开始类固醇治疗的最佳时机。

Taking part in the study is optional. It will not affect the rest of your care and does not cost any additional money.

参加这项研究是非强制性的。它不会影响您的其他治疗，也不需要额外的费用。

The way the study works is that, if a family decides to participate, the child will randomly be assigned to either Option A, steroids “just in case,” or Option B, “wait and see.” A computer, not a doctor, will make the assignment, and the decision will be random. Like flipping a coin, the child will have the same chance of ending up in either group.

这项研究的开展方式是，如果某个家庭决定参加，孩子将被随机分配到方案 A，即 "以防万一 "使用类固醇，或方案 B，即 "静观其变"。进行分配的是电脑，而不是医生，决定也是随机的。就像掷硬币一样，孩子被分到任何一组的机会都是一样的。

Children assigned to Option A will get started on high-dose steroids right away, without waiting to see if their arteries get worse. Children assigned to Option B will *not* get steroids right away. Doctors will follow the child’s exam closely and repeat pictures of the brain within 3 to 7 days. If the child’s arteries get more narrow, the doctors will start the steroids right away.

被分配到方案A的儿童将立即开始服用大剂量类固醇，而无需等待观察动脉是否恶化。被分配到方案 B 的儿童不会立即服用类固醇。医生将密切跟踪患儿的检查情况，并在 3 到 7 天内重复拍摄脑部照片。如果孩子的动脉变得更加狭窄，医生就会立即开始使用类固醇。

With either Option, *all children that have FCA will get treated with steroids*. The difference is that, with Option A, they will get it sooner. And with Option B, they will get them later. The children who turn out *not* to have FCA will *not* get steroids because they did not need them.

无论采用哪种方案，所有患有局灶性脑动脉病的儿童都将接受类固醇治疗。不同的是，如果采用方案 A，他们会更早接受治疗，而方案 B 则会晚一些。没有患局灶性脑动脉病的儿童将不会接受类固醇治疗，因为他们不需要。

You may ask, what’s the big deal about steroids? What are the downsides of a child with a stroke getting steroids, even if they do not really need them? Those are other questions that the FOCAS study will try to answer. The steroids given to treat FCA are high doses given through an IV, meaning directly into the bloodstream. High dose steroids *can* have serious side effects, like raising blood pressure, irritating the stomach, and affecting the body’s ability to fight off infection. You can learn more about this in one of the later videos.

您可能会问，类固醇有什么大不了的？中风患儿即使真的不需要类固醇，服用类固醇有什么坏处？这些都是这项研究要回答的问题。治疗局灶性脑动脉病的类固醇是通过静脉注射的高剂量药物，即直接进入血液。大剂量类固醇可能会产生严重的副作用，如血压升高、刺激胃部、影响身体的抗感染能力等。您可以在后面的视频中了解更多相关信息。

We hope this video will help you understand the FOCAS trial, and why it is so important. If you are interested in learning more, your child’s doctors and the FOCAS study team at your hospital can tell you more about it. You can also watch more of our short videos that explain different parts of the study.

我们希望这段视频能帮助您了解局灶性脑动脉病类固醇试验及其重要性。如果您有兴趣了解更多信息，孩子的医生和所在医院的局灶性脑动脉病类固醇试验研究团队会告诉您更多相关信息。您还可以观看更多短片，了解研究的不同部分。