

Arrhythmias White Book contains first European data on lead extraction

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The first European data on lead extraction was released by the European Heart Rhythm Association (EHRA) of the European Society of Cardiology (ESC). The information is published in the EHRA White Book 2013¹, launched at EHRA EUROPACE 2013 in Athens, Greece, during 23-26 June.

The EHRA White Book reports on the current status of arrhythmia treatments in the 55 ESC member countries² and has been published every year since 2008. This year 46 countries took part.

For the first time this year data is provided on lead extractions. France reported the highest number of lead extractions (2,000) followed by Germany (800) and Poland (520). Several countries reported that no lead extractions had been performed (Iceland, Cyprus, Montenegro, Malta, Armenia).

Professor Fernando Arribas (Spain), EHRA White Book coordinator, said: "This is an area of increasing interest because device therapy has now been provided for many years. Device systems depend on the function of the leads which become sick as they get older and should be replaced. This is a growing problem because lead extraction has a significant morbidity and mortality all over the world."

Every country reports on general statistics to describe its demographics and healthcare system. The proportion of deaths resulting from [CVD](#) in 2012 were lowest in Israel (17%), Tunisia (23%), Morocco (23%),

France (26%) and the Netherlands (28%) and highest in the Ukraine (65.8%), Bulgaria (63%), Serbia (56%) and the Russian Federation (55.5%).

Data is revealed on the use of cardiovascular implantable electronic devices including pacemakers (also called implantable pulse generators or IPGs), implantable cardiac defibrillators (ICDs), and cardiac resynchronisation therapy (CRT) devices.

In 2012 [pacemaker implantations](#) were highest in Germany (106,567) and France (62,846) and lowest in Montenegro (143). Germany also had the highest numbers of CRT implantations (17,949) and ICD implantations (26,536) in 2012, followed by Italy (11,900 CRTs and 12,000 ICDs). Iceland had the lowest number of CRT implantations (10) while Macedonia had the lowest number of ICD implantations (15). Professor Arribas said: "Devices are an important therapy for saving lives and have an important impact on healthcare indices."

The number of ablations performed in 2012 was highest in Germany (38,000) and France (31,000) and lowest in Bosnia & Herzegovina (3), Malta (10) and Cyprus (40). Professor Arribas said: "The impact of catheter ablation on big outcomes such as mortality is less significant but the therapy is very important for treating some arrhythmias that have become an epidemic, for example atrial fibrillation."

The White Book presents raw data by country and compares it to the previous edition. An analysis and graphic presentation of the figures will be published in a dedicated supplement of EHRA's official journal EP-Europace during the ESC Congress, held 31 August – 4 September in Amsterdam, the Netherlands. The analysis will be based on White Book data from 2008 onwards and will include comments from experts in the field.

Professor Arribas said: "The analysis will show how access to treatment has changed over time in individual countries. It will also allow countries to benchmark their results with other countries, and provide a picture of where inequalities remain in access to arrhythmias care in Europe."

EHRA president, Professor Angelo Auricchio (Switzerland), said: "This new addition is another landmark in the history of the White Book because it includes the lead extraction data, which no other scientific society has been able to provide. We are pleased with our good collaboration with the national societies and working groups that provided us with this information."

He added: "The forthcoming EP-Europace supplement will show the trends in electrophysiological activities and implantation of devices in Europe. It will reveal whether the current economic crisis in Europe has led to a decline in the number of device implantations over the last year. This would denote a general reduction in care for patients and a growth in the inequality of access to lifesaving treatments."

Provided by European Society of Cardiology

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