

Infection + Device = Removal



With **27,173** CIED infections each year^a, **72%** are not treated in adherence to guidelines^{1,b}

Infection in a CIED patient is a **Class I indication** for **complete extraction** and **extractor consultation**^{2,5,6}

CIED infections are associated with:

A **>3-fold** increase in mortality^{7,c}

Increased Medical Costs

- **2.4x greater average** annual medical costs^{8,e}

A **significant reduction** in patient's QoL ($p=0.004$)^{7,d}

- **\$55,547 or more** per CIED infection hospitalization^{7,9}

- **Up to \$2,156** in out-of-pocket expenses⁷

Barriers to CIED extraction may be due to:

Infection Identification^{10,11}

Referral Complexities¹¹

Procedural Concerns¹¹

Complete extraction for CIED infection is proven safe and effective^{12-19,f}

97.7% Clinical Success **1.4%** Major Complications **0.28%** Procedure Mortality

CIED extraction for infection can help save lives and money

Extraction vs. No Extraction

Extraction results in lower mortality²⁰

7x↓ in 30-day mortality vs. antibiotics alone



1-year Mortality

Early vs. Late Extraction

Early extraction results in lower mortality^{12,20,g}

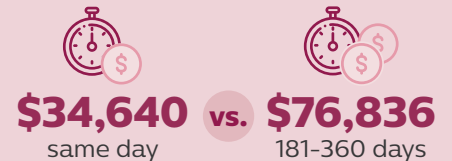


1-year Mortality ($p=0.028$)

Infections with CIED extraction costs less than half vs. no removal^{9,h}



Delayed extractions have higher costs^{21,i}



CIED extraction is the solution to a devastating clinical & economic problem.

Abbreviations

CIED = cardiac implantable electronic devices; QoL = quality of life; vs. = versus.

Footnotes

a) CIED infections can be presented as a pocket infection², a systemic infection³, or infective endocarditis⁴; b) Calculated as the sum of the infections for the de novo, replacement, and existing device cohorts (the number of infections in each cohort was calculated as the number of devices multiplied by the estimated infection rate). Please see the value deck for more details; c) Compared to non-infection patients ($p < 0.001$); d) QoL measured at infection diagnosis vs. baseline; e) Compared to patients with no CIED infection; f) Outcomes reported for the entire cohort ($n = 1,449$) of the Lexicon study where 56.9% of patients were indicted for infection; g) Early removal is defined as device extraction within <10 days of diagnosis; h) In hospitalized patients; i) Extractions occurring >180 days after infection diagnosis to have the highest costs; reported costs are all-cause Medicare payments in 12 months post-infection period, by time to device extraction, among intervention groups 1A and 1B.

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