

## Why establish a CIED infection care pathway?

CIED infection is a significant public health problem often underdiagnosed and is associated with increased morbidity, mortality and costs



## 1 in 20

CIED patients will develop a CIED infection <u>in</u> over 3 years<sup>1</sup>



## **Diagnosis**

of CIED infection can be difficult as presentation varies<sup>2,3</sup>



## **Up to 35%**

1-year mortality rate with CIED infection<sup>4</sup>



### 50-100%

infection relapse with antibiotic treatment alone<sup>5,6</sup>

## Major gap in guideline adherence exists

## > 8 in 10

CIED infection patients are not treated according to Class 1 guidelines<sup>8</sup>

## **Early lead extraction**

is associated with a 42.9% lower risk of death<sup>8</sup>

## 7x decrease

in 30-day mortality with extraction vs. antibiotics alone<sup>4</sup>

# Planning the CIED infection care pathway

Philips will assist in the planning process with available resources



# Identify the team

Identify the champions and multidisciplinary specialists to formulate the CIED infection care pathway.



# Gather the team

Hold CIED infection care pathway team meetings to establish the pathway and lay out an implementation plan.



## Implement plan

Deploy awareness, education and quality improvement plans to hospital system and beyond to include surrounding community providers and patients.



## **Evaluate**

Ongoing assessment, communication and improvement by the CIED infection care pathway team.

## **CIED infection pathway team:**







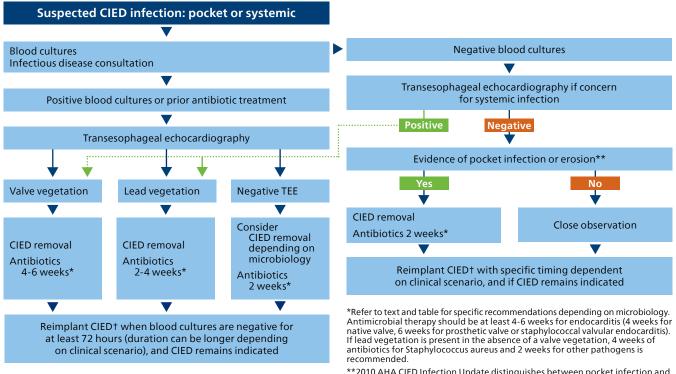




Internal medicine specialists

## **Management of suspected CIED infection**

Infection diagnosis and treatment



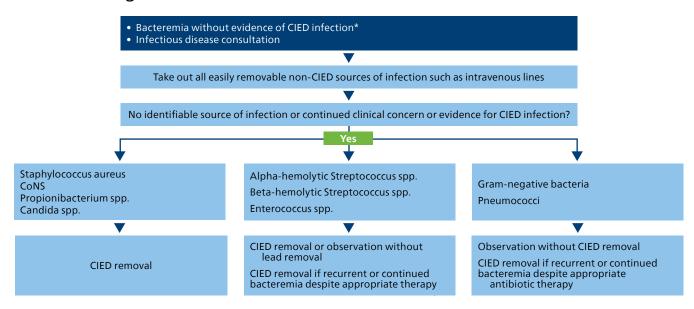
This information is directly from the 2017 HRS Consensus Statement.<sup>7</sup>

\*\*2010 AHA CIED Infection Update distinguishes between pocket infection and erosion (Baddour et al. Circulation 2010;121:458-477)

†Usually the contralateral side; a subcutaneous ICD may also be considered.

## Management of bacteremia without evidence of CIED infection

Infection diagnosis and treatment



This information is directly from the 2017 HRS Consensus Statement.<sup>7</sup>

# CIED infection care pathway implementation resources

Below are tools Philips offers to help support planning and implementation of your CIED infection quality improvement program.



## HCP education presentations for Grand Rounds and CEU

- ✓ D021391 Grand Rounds presentation
- ✓ D058999 CEU presentation



### **EP fellow and training programs**

- ✓ D021391 Grand Rounds presentation
- ✓ D058999 CEU presentation
- ✓ D059035 CRM Presentation



## **HRS CIED pocket guides**

- ✓ D040224 2017 HRS Consensus pocket guide
- ✓ D053322 HRS brochure for non-extractors



#### Website resources

- ✓ www.upbeat.org/CIEDManagement
- ✓ www.deviceinfection.com



#### **Patient education**

- ✓ D059328 HRS patient infographic
- ✓ D020583 'What's in your pocket' booklet
- D023608 Patient risk vs. risk brochure



#### **Hospital administrator**

- ✓ D059321 Value Dossier short deck
- ✓ D059597 Value Dossier one-pager
- ✓ D059900 Value Dossier brochure
- ✓ D059035 CRM presentation



## EMR (Tools to help implement an EMR system in order to flag potential infection patients)

- ✓ D045671 Using EMR to fight CIED infection - committee deck
- ✓ D041246 Yale EPIC Q&A
- ✓ D042305 EPIC go-live plan

### Who is on your CIED infection care pathway team?

General cardiologists	
Electrophysiologists	
Infectious disease specialists	
Cardiac surgeons	
Internal medicine specialists	
Quality improvement specialists	
Case managers	
Hospital administrators	
Dovice clinic purses	

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- 2. Blomström-Lundqvist, C., et al. (2020, Jun 1). European Heart Rhythm Association (EHRA) international consensus document on how to prevent, diagnose, and treat cardiac implantable electronic device infectionsendorsed by the Heart Rhythm Society (HRS), the Asia Pacific Heart Rhythm Society (APHRS), the Latin American Heart Rhythm Society (LAHRS), International Society for Cardiovascular Infectious Diseases (ISCVID), and the European Society of Clinical Microbiology and Infectious Diseases (ESCMID) in collaboration with the European Association for Cardio-Thoracic Surgery (EACTS). Eur Heart J, 41(21), 2012-2032. https://doi.org/10.1093/eurheartj/ ehaal10
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- 8. Pokorney, Sean D., et al. "Low Rates of Guideline Directed Care Associated with Higher Mortality in Patients with Infections of Pacemakers and Implantable Cardioverter Defibrillators." ACC 2022 Late Breaker Clinical Study Presentation. April 3, 2022.

