

Single Center Experience in Lead Extraction in Thailand

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Korean Heart Rhythm Society COI Disclosure

Natcha Soontornmanokati, Bs,CEPs.

The author have no financial conflicts of interest to disclose concerning the presentation



Disclosure

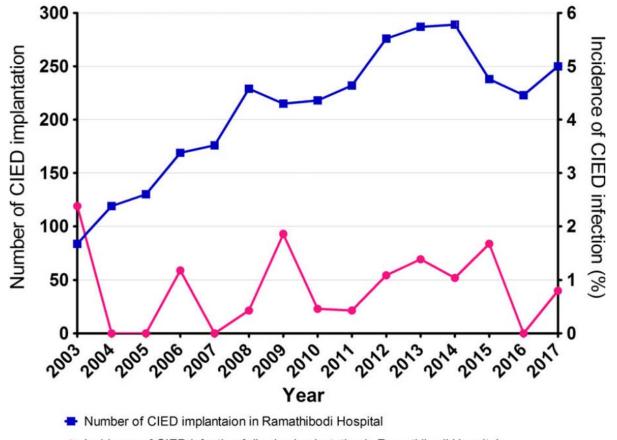
Relationships with commercial interests: None





What would you do for this ?





Incidence of CIED infection following implantation in Ramathibodi Hospital

KORKERDSUP ET AL., JOURNAL OF ARRHYTHMIA 2018;34:632-639



Risk factors of CIED infection in Ramathibodi hospital

TABLE 4 Univariate analysis for risk factors of CIED infection

	OR	P-value
Age	1.01 (1.00-1.03)	0.155
Body mass index	0.94 (0.87-1.02)	0.145
Autoimmune diseases	4.24 (0.75-23.93)	0.102
History of CIED infection	35.7 (7.74-164.66)	< 0.001
Vancomycin + clindamycin	2.38 (0.64-8.80)	0.193
Duration of perioperative antibiotics (days)	1.26 (1.02-1.54)	0.030
Duration of operation (hours)	1.62 (1.10-2.40)	0.015
Hematoma	2.86 (0.60-13.56)	0.185
Temporary pacemaker	2.86 (0.60-13.56)	0.185
PPM (VVI)	12.25 (3.34-44.91)	< 0.001
Type of the last procedure		
Primary implantation	1.00	
Generator change	0.63 (0.25-1.57)	0.327
Lead revision	1.07 (0.93-12.34)	0.956
Generator revision	10.71 (1.19-96.06)	0.034
Re-implantation	1.56 (0.56-4.30)	0.392



Procedural Definition

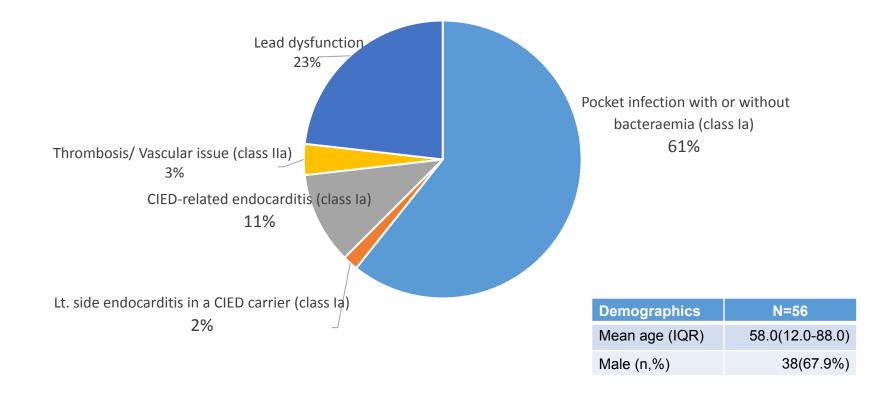
- Lead removal
 - Removal of a lead using any techniques.
- Lead explant
 - Removal of a lead using simple techniques.
 - Removed lead were implanted within 1 year.
- Lead extraction
 - Removal of a lead requiring the specialized equipment.
 - Removed lead were implanted longer than 1 year.



Indication for lead Extraction

Localised signs of inflammation such as erythema, swelling, pain, tenderness, warmth or drainage with positive or
negative blood cultures
Left heart vegetations with or without tricuspid valve or CIED involvement, and positive blood cultures
Positive blood cultures and lead or valvular vegetation(s), without local signs of pocket infection
Bacteraemia without an alternative source, resolves after CIED extraction
Clinical Scenarios (Class I, IIa, And IIb Indications)
Clinically significant thromboembolic events attributable to thrombus on a lead or a lead fragment that cannot be treated by other means (class I)
Superior vena cava (SVC) stenosis or occlusion that prevents implantation of a necessary lead (class I)
Planned stent deployment in a vein already containing a transvenous lead to avoid entrapment of the lead (class I
Maintaining patency of SVC stenosis or occlusion with limiting symptoms (class I)
Ipsilateral venous occlusion preventing access to the venous circulation for required placement of an additional lead (class IIa)
Severe chronic pain at the device or lead insertion site or believed to be secondary to the device, which causes significant patient discomfort, is not manageable by medical or surgical techniques, and for which there is no acceptable alternative ¹⁷ (Class IIa)
Life-threatening arrhythmias secondary to retained leads (class I)
Lead removal can be useful for patients with a CIED location that interferes with the treatment of a malignancy ¹⁸ (class IIa)
CIED implantation requires more than four leads on one side or more than five leads through the SVC (class IIa)
Abandoned lead(s) that interfere with the operation of a CIED system (class IIa)
Leads that pose a potential future threat to the patient if left in place, because of their design or failure (class IIb)
Lead removal may be considered to facilitate access to MRI ¹⁸ (class IIb)
The setting of normally functioning, non-recalled pacing or defibrillation leads for selected patients after a shared decision-making process (class IIb)

Indication for transvenous lead extraction



Indication of transveneous lead extraction in Ramathibodi hospital in 2008-2020

Adryan et al., Radcliffe cardiology 2018;210-217



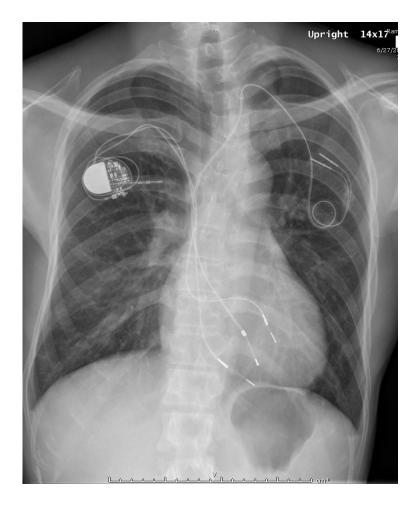


Lead Extraction data

Lead N=87	
Duration of implanted months mean, SD	87.75 ± 68.18
Lead type	
Pacemaker lead	58 (66.70%)
ICD lead	25 (28.70%)
LV lead	4 (4.60%)
Specialised sheath type N=56	
Laser sheath	49 (87.50%)
Mechanical rotating sheath	5(8.9%)
Laser & Mechanical rotating sheath	2(3.60%)

lead extraction data in Ramathibodi hospital in 2008-2020

A 39 years old man with CIED infection



KHRS 2021 The 13th Annual Scientific Session of the Korean Heart Rhythm Society

1986	Single chamber PPM
	at Left side.
2003	Dual chamber PPM
	at Right side.
2018	2 nd Generator change
2019	Pocket erosion.
	Vegetation at Rt. Lead.
	Failure for lead removal.
Refer	for Lead Extraction on June



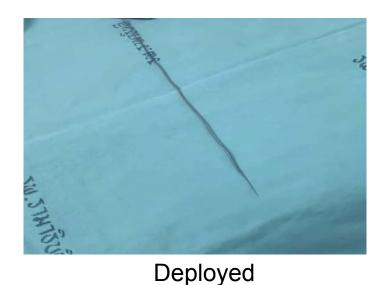
Extraction tools

Locking Stylet device

- improve tensile strength to facilitate traction.
- Stabilize leads.



Undeployed







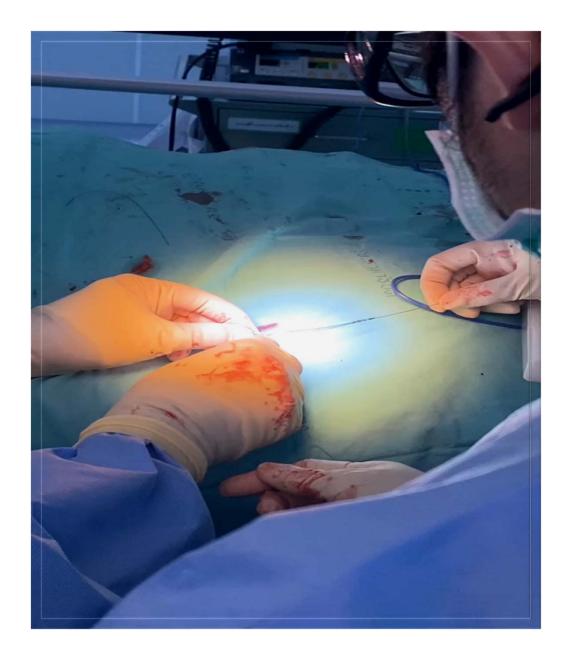
Extraction tools (cont.)

Specialized sheath





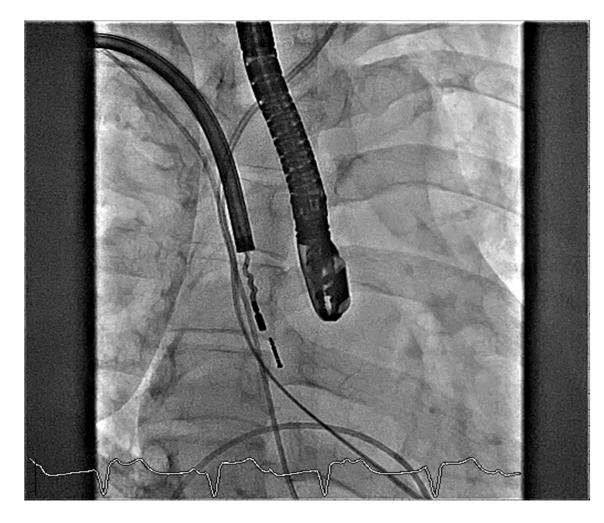
Type of Specialised Sheath	Useful For	Less Useful For
Non-powered telescoping sheaths ^{56,57}	Fibrous adhesions	Dense fibrotic or heavily calcified lesions
Laser sheaths ^{58, 59}	Fibrous lesions and scar tissue	Heavily calcified lesions
Rotational mechanical cutters ^{60–63}	Dense calcified fibrotic lesions	Scar tissue







1st Lead



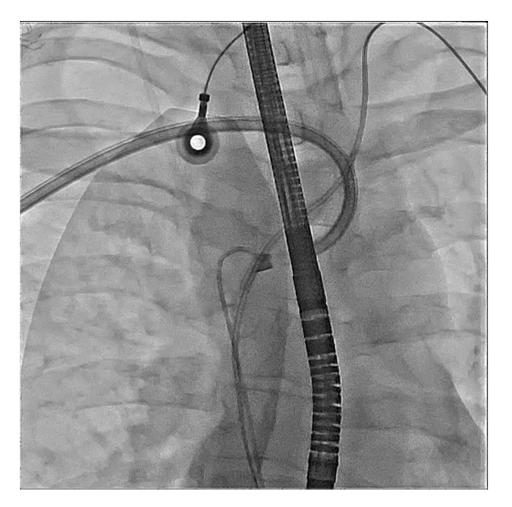
Tools

- Locking stylet :
 LLD EZ
- Specialized sheath : Laser sheath





2nd Lead



Tools

• Locking stylet :

LLD EZ

- Specialized sheath :
 - 12 Fr. Laser sheath





2nd Lead (cont.)



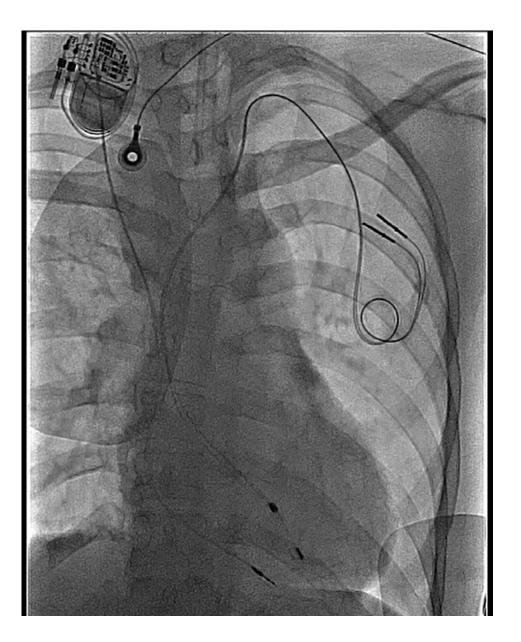
Tool

 Specialized sheath : 9 Fr. Rotating mechanical sheath

Calcified extracted lead

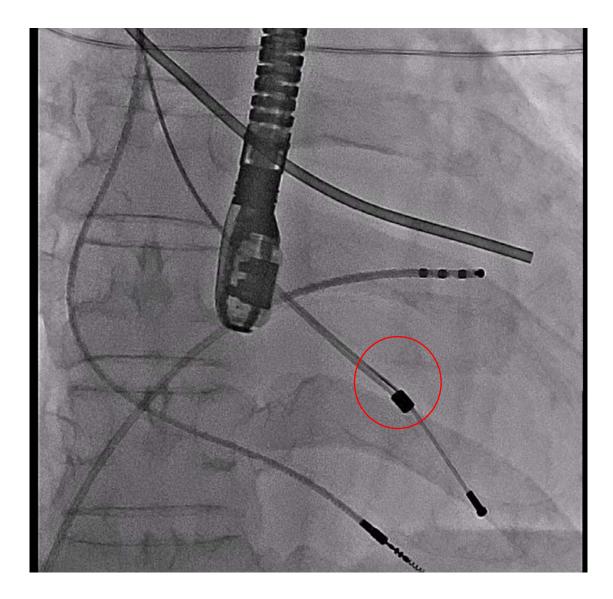


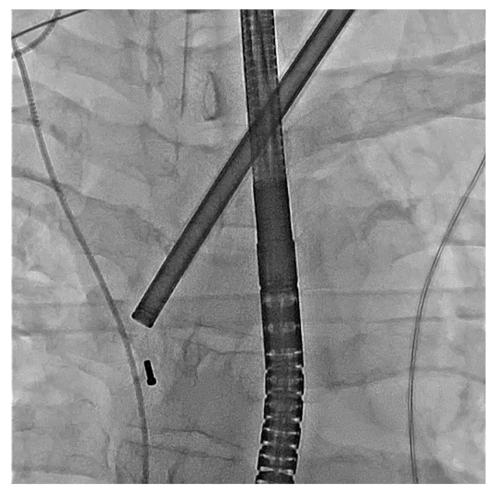




NS1 Natcha Soontornmanokati, 2021-04-16

2nd Lead extract procedure





Tool

- Locking stylet :
 LLD EZ
- Specialized sheath : 11 Fr. Mechanical rotating sheath

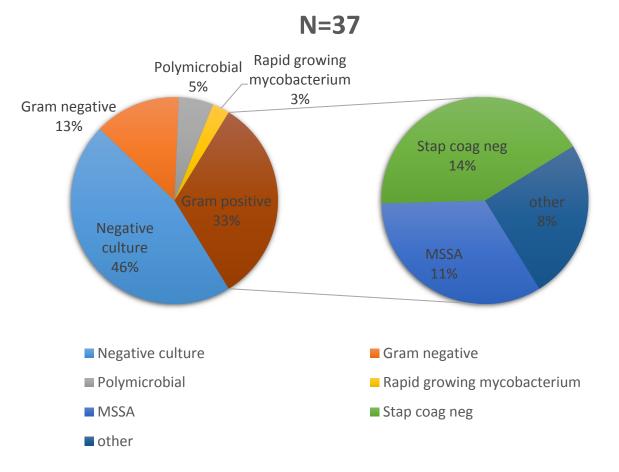
Extracted lead







Microbiology of CIED infection

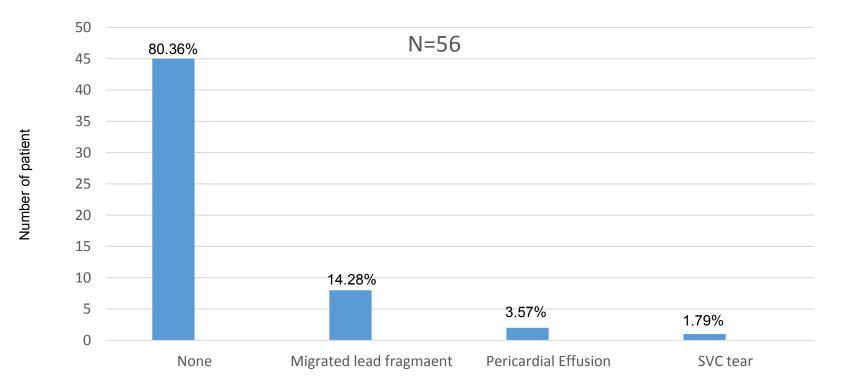


Microbiology of transveneous lead extraction in Ramathibodi hospital in 2008-2020





Complication



Complication of transvenous lead extraction in Ramathibodi hospital in 2008-2020

Snaring







Definition of success

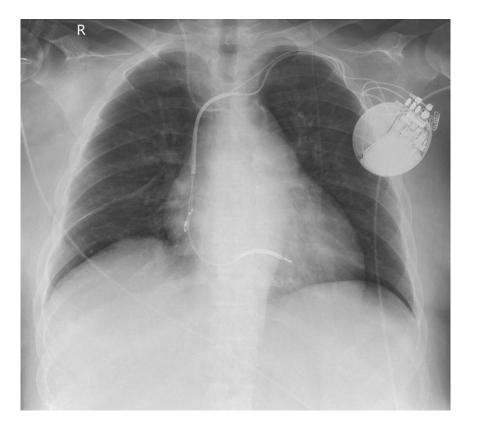
Term	Definition
Nonfunctional lead	A lead that is not usable due to electrical dysfunction, regardless of whether it is connected to the CIED or not.
Abandoned lead	A functional or nonfunctional lead that is left in place and is not connected to the CIED.
Lead removal procedure	A procedure involving the removal of a pacing or defibrillator lead using any technique, regardless of time since implantation.
Lead explant procedure	Lead removal procedure where all leads were removed without tools or with implantation stylets and all removed leads were implanted for less than 1 year.
Lead extraction	Lead removal procedure where at least one lead removal required the assistance of equipment not typically employed during lead implantation or at least one lead was implanted for greater than 1 year.
Definitions for extraction procedures	
Complete procedural success	Lead extraction procedure with removal of all targeted leads and all lead material from the vascular space, with the absence of any permanently disabling complication or procedure-related death.
Complete procedural success rate	Extraction procedures where there is complete procedural success/total number of extraction
Clinical success	Lead extraction procedures with removal of all targeted leads and lead material from the vascular space or retention of a small portion of the lead (<4 cm) that does not negatively impact the outcome goals of the procedure.
Clinical success rate	Extraction procedures where there is clinical success/total number of extraction procedures
Failure	Lead extraction procedures in which complete procedural or clinical success cannot be achieved, or the development of any permanently disabling complication, or procedure-related death.
Failure rate	railed extraction procedures/total number of extraction procedures.
Lead removal with clinical success	Leads with attempted removal where the entire lead is taken out of the body or with retention of a small portion of the lead material (<4 cm) that does not negatively impact the outcome goals of the procedure.
Lead removal with clinical success rate	Number of leads removed with clinical success during a lead extraction/total number of leads with attempted removal.

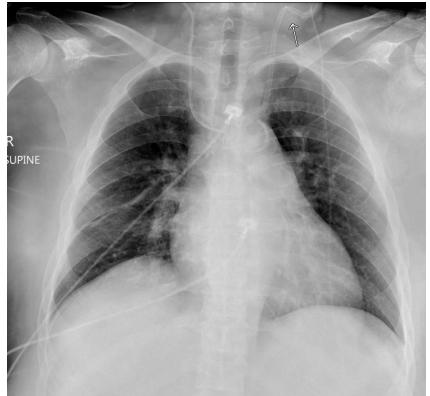
CIED = cardiovascular implantable electronic device.





Complete procedural success





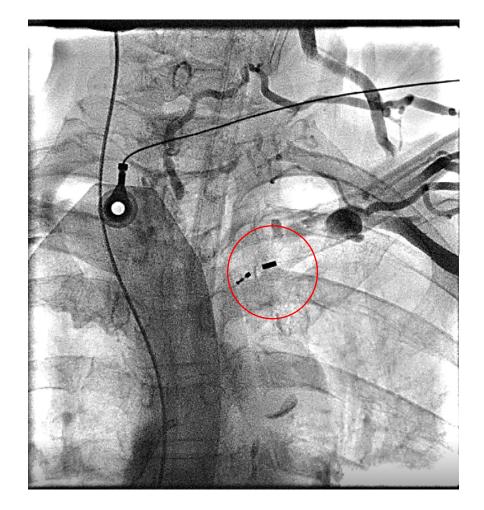
Preprocedural

Postprocedural





Clinical success





Procedural outcome

Procedural outcome N=56Complete procedural success n,%54 (96.42%)Clinical success n,%1(1.79%)Procedural failure n,%1(1.79%)Duration of operation minutes mean,SD159.70±72.22Fluoroscopic time mean,SD12.46±12.56Length of stay days mean,SD14.72±18.21Reimplatation n,%28(50%)

Procedural outcome of transvenous lead extraction in Ramathibodi hospital in 2008-2020



Conclusion

- The lead extraction should perform follow the guideline.
- The lead extraction in our center is an effective procedure to treat patients with chronic CIED infection.
- The lead extraction knowledge of team should be continue learning for a benefit of the patients.



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