Third EP Wire Survey Results – Question 1

1. Characteristics				
	<50	50-200	>200	Response Count
Implantation of pacemakers number	5.1% (2)	28.2% (11)	**66.7% (26)**	39
Implantation of ICD's number	12.8% (5)	**59.0% (23)**	28.2% (11)	39
			answered question	39
			skipped question	0

Third EP Wire Survey Results – Question 2

2. Number of patients	< 10	10 - 40	> 40	Response Count
Referred for lead extraction	**51.3% (20)**	38.5% (15)	10.3% (4)	39
With lead extracted in own center	41.0% (16)	**46.2% (18)**	12.8% (5)	39
			answered question	39
			skipped question	0

Third EP Wire Survey Results – Question 3

3. On which country your center is based ?
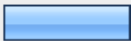
	Response Count
	31
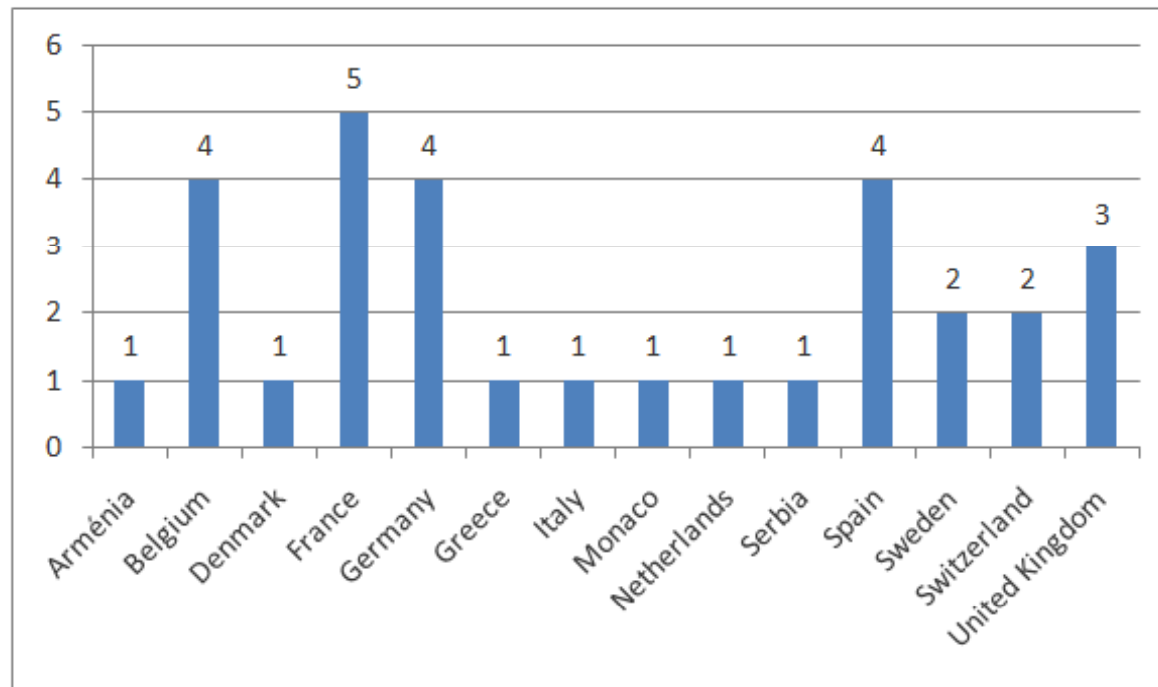
Third EP Wire Survey Results – Question 4

4. Indication for lead extraction in your center				
	<20%	**20-80%**	**>80%**	**Response Count**
Infections	33.3% (13)	**43.6% (17)**	23.1% (9)	39
Lead dysfunction	**56.4% (22)**	43.6% (17)	0.0% (0)	39
			answered question	39
			skipped question	0

Third EP Wire Survey Results – Question 5
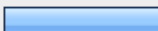
5. Cardiothoracic surgery

		Response Percent	Response Count
Yes		84.6%	33
No		15.4%	6
	answered question		39
	skipped question		0

Third EP Wire Survey Results – Question 6

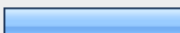**6. Please indicate your clinical approach towards the extraction of leads based on lead type and lenght of implant time.**

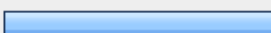|	I refer these patients to other centres.	The leads are extracted in my own centre.	Response Count
acute (less than 6 months)	5.7% (2)	94.3% (33)	35
chronic (more than 6 months)	14.3% (5)	88.6% (31)	35
atrial leads alone	12.1% (4)	87.9% (29)	33
ventricular leads alone	6.1% (2)	93.9% (31)	33
left ventricular leads	11.8% (4)	88.2% (30)	34
ICD leads	8.8% (3)	94.1% (32)	34
for passive fixation leads	5.9% (2)	94.1% (32)	34
for active fixation leads	8.8% (3)	91.2% (31)	34
any infected leads	14.3% (5)	88.6% (31)	35
		answered question	35
		skipped question	4

Third EP Wire Survey Results – Question 7

7. In my service, lead extractions generally performed by: (only one answer possible)

		Response Percent	Response Count
A.in the cathlab by the cardiologist.		20.0%	7
B.in the cathlab by the cardiologist with cardiothoracic surgeon standby.		22.9%	8
C.in the operating theatre by the cardiologist.		20.0%	7
D.in the operating theatre by the cardiothoracic surgeon .		**34.3%**	**12**
E. in and by none of the above.		2.9%	1
		answered question	35
		skipped question	4

www.escardio.org/EHRA

Third EP Wire Survey Results – Question 8

8. Do you think it is necessary to have a cardiothoracic surgeon on standby during extraction?

		Response Percent	Response Count
Yes in the cath lab		8.6%	3
Yes in the hospital		82.9%	29
No		8.6%	3
		answered question	35
		skipped question	4

Third EP Wire Survey Results – Question 9

9. What is your usual extraction technique for the leads listed?

	Atrial	RV pace/sense	LV pace/sense	RV-ICD	Response Count
A. traction	75.0% (15)	45.0% (9)	**80.0% (16)**	30.0% (6)	20
B. traction and extraction tools (excluding laser)	70.4% (19)	**92.6% (25)**	70.4% (19)	88.9% (24)	27
C. laser and traction	71.4% (5)	85.7% (6)	57.1% (4)	**100.0% (7)**	7
D. cardiac surgical removal	40.0% (2)	20.0% (1)	40.0% (2)	**60.0% (3)**	5
				answered question	34
				skipped question	5

Third EP Wire Survey Results – Question 10

10. Do you take these clinical parameters into consideration when you decide to extract a redundant, chronic and non-infected lead?

	Yes	No	Response Count
A. The possible occurrence of insufficiency of tricuspid valve with more leads than needed	65.7% (23)	34.3% (12)	35
B. Old age	88.2% (30)	11.8% (4)	34
C. A number of leads already present	91.4% (32)	8.6% (3)	35
E. Comorbidities e.g.mechanical prosthetic valve	85.7% (30)	14.3% (5)	35
		answered question	35
		skipped question	4

EUROPEAN Heart Rhythm ASSOCIATION

EUROPEAN SOCIETY OF CARDIOLOGY®

Third EP Wire Survey Results – Question 11

11. Which of the following ICD lead characteristics do you think may facilitate extraction:

	Yes	No	Possibly	Response Count
single shock coil (i.e. not dual shock coil)	**61.1% (22)**	2.8% (1)	36.1% (13)	36
goretex around shock coil	44.4% (16)	2.8% (1)	**52.8% (19)**	36
active fixation as opposed to passive fixation lead	**61.1% (22)**	8.3% (3)	30.6% (11)	36
			answered question	36
			skipped question	3

EUROPEAN Heart Rhythm ASSOCIATION

EUROPEAN SOCIETY OF CARDIOLOGY®

Third EP Wire Survey Results – Question 12

12. The next question concerns leads that are infected. Only answer if you perfom lead extractions yourself. When a lead is infected do you recommend:

	Yes	No	Response Count
trying treatment with antibiotics first?	**54.2% (13)**	45.8% (11)	24
extracting immediately if there are no vegetations?	**66.7% (16)**	33.3% (8)	24
extracting depending on size of vegetations (< 2 cm)?	**84.0% (21)**	16.0% (4)	25
always referring for formal surgical extraction if vegetations are present?	28.0% (7)	**72.0% (18)**	25
		answered question	27
		skipped question	12

Third EP Wire Survey Results – Question 13

13. Do you think lead extraction is superior to implantation of an additional pace-sense lead in the event of partial failure of an ICD lead (i.e. intact shocking circuit?)

		Response Percent	Response Count
Yes		56.8%	21
No		43.2%	16
		answered question	37
		skipped question	2