

Gaps in the implementation of Guidelines for CRM Devices in ESC country members - the case of Poland

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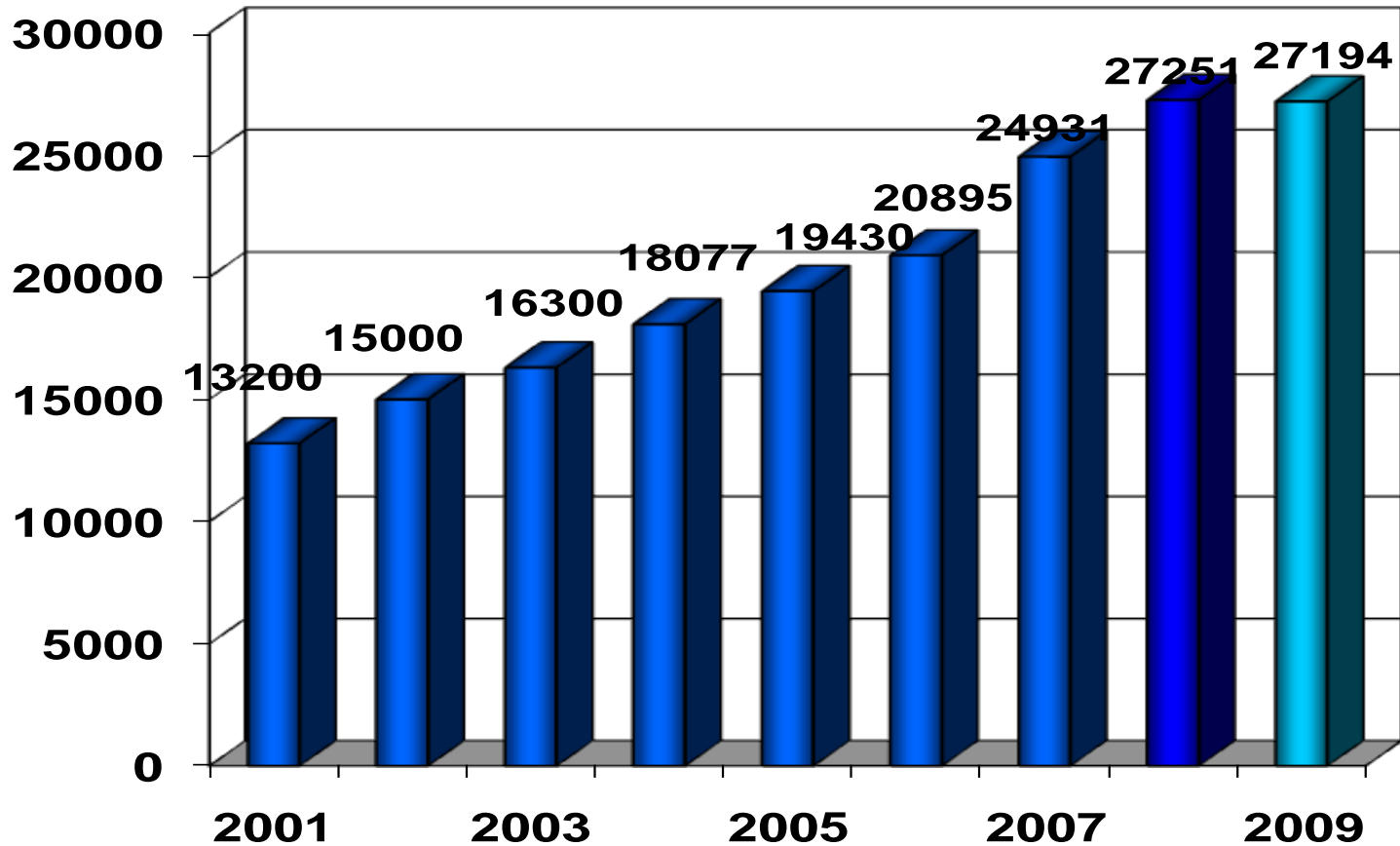
Zabrze, Poland

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113 centres implanting pacemakers



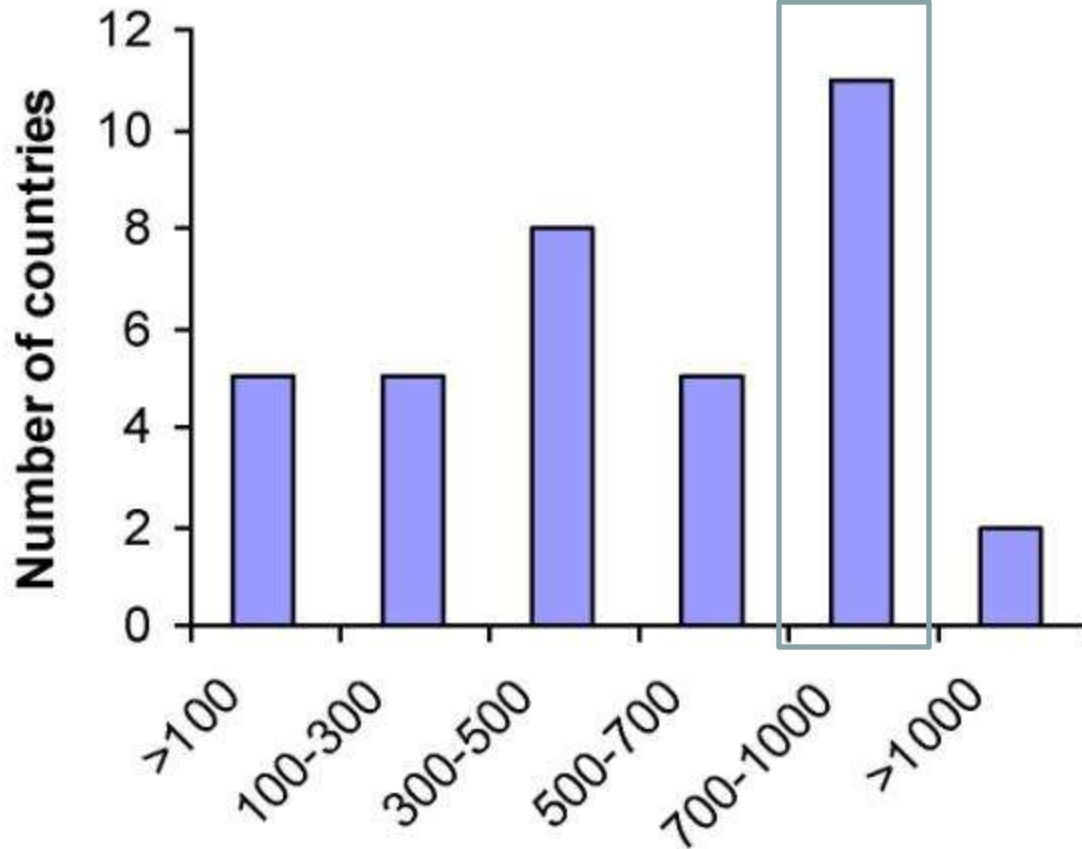
Pacemakers implantation



768 implantations/million/year

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Pacemaker implantation rate per Mio in 2008

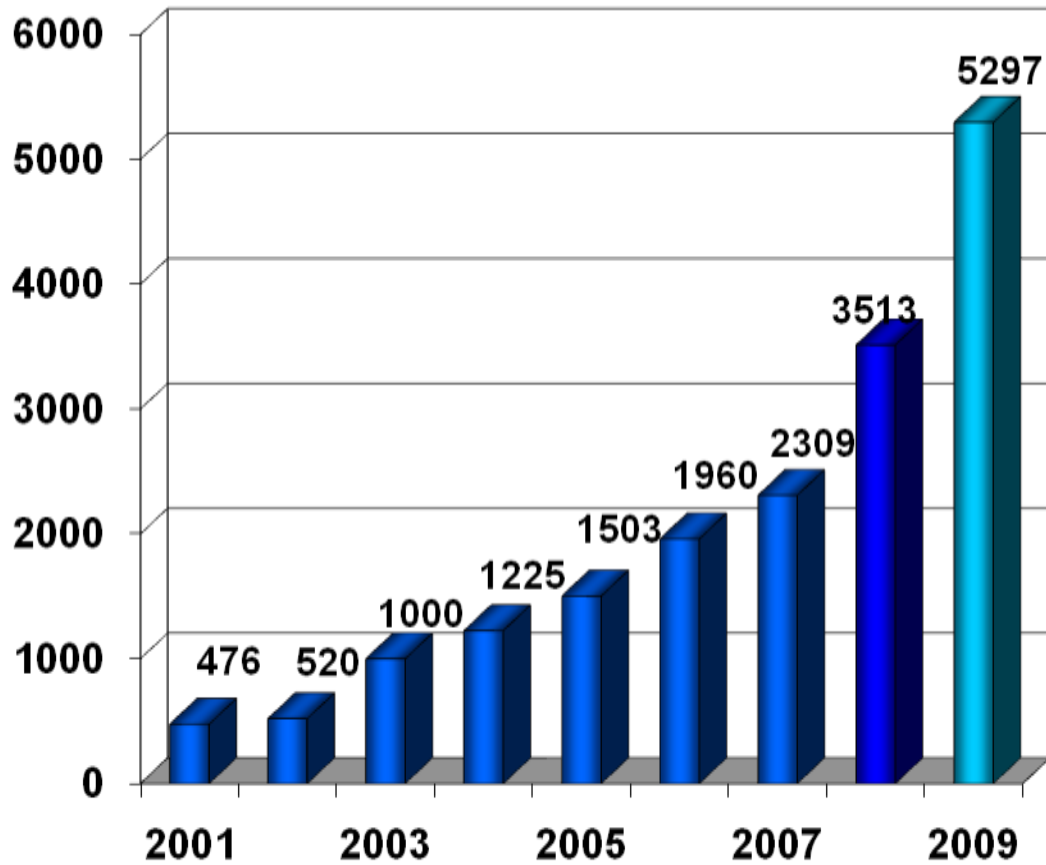


Source: EHRA Whitebook 2009

84 centres implanting ICDs



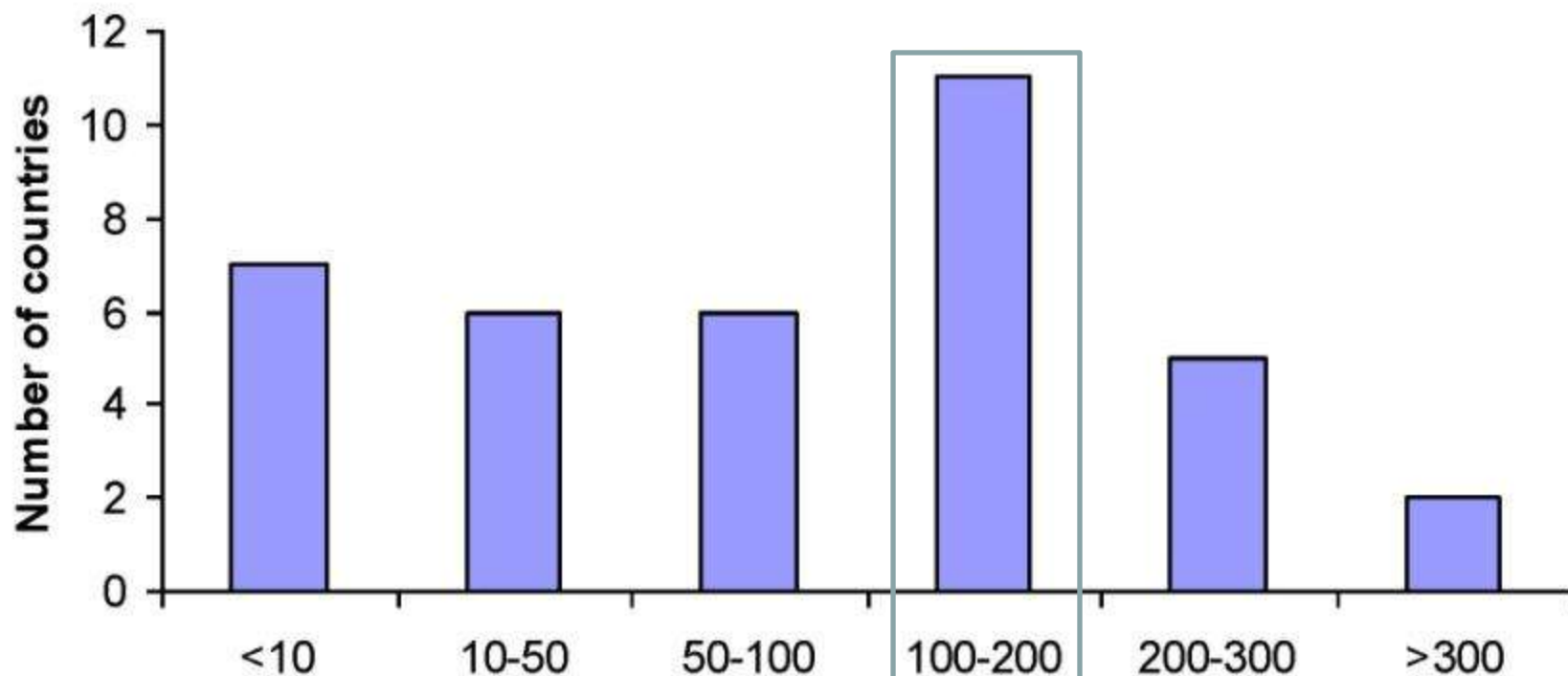
ICD implantation



138 implantations/million/year

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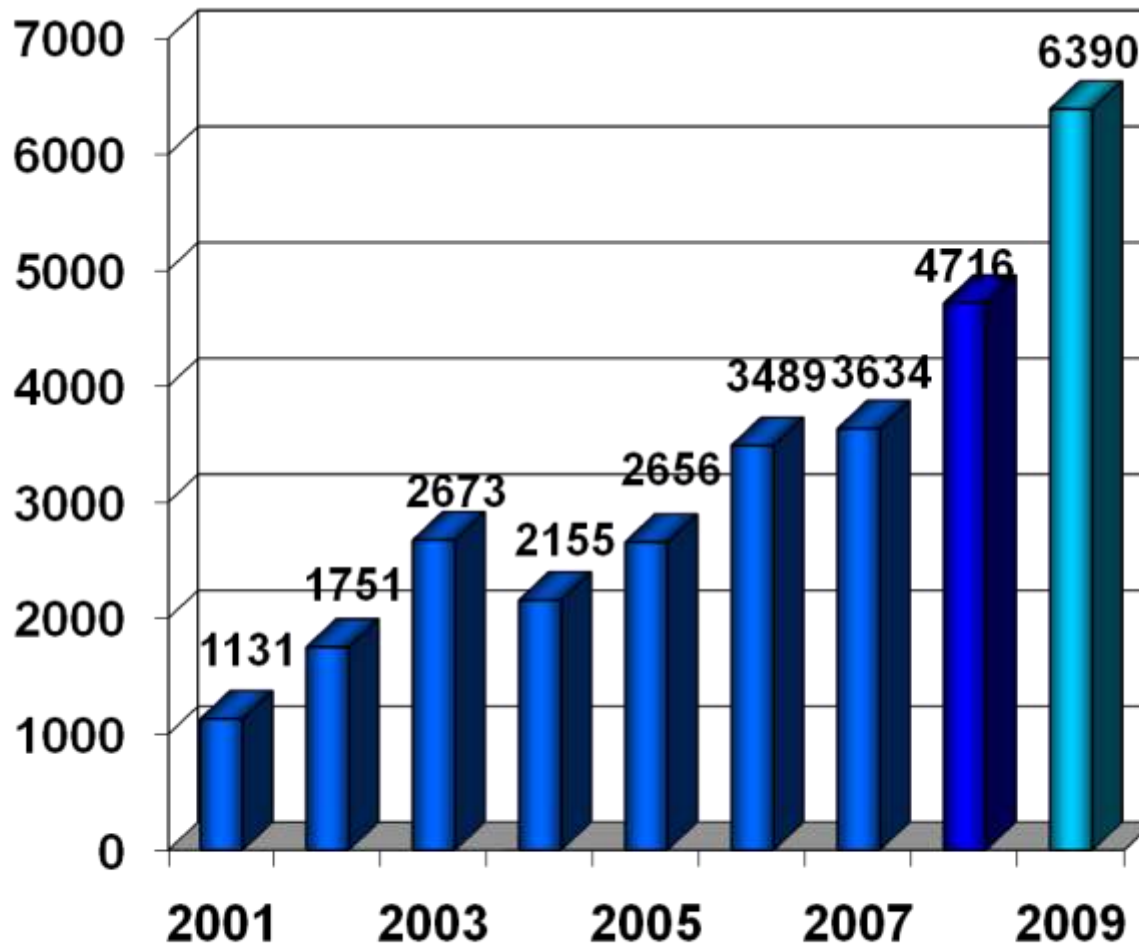
ICD+CRT-D implantation rate per Million 2008



42 centres performing EP ablations



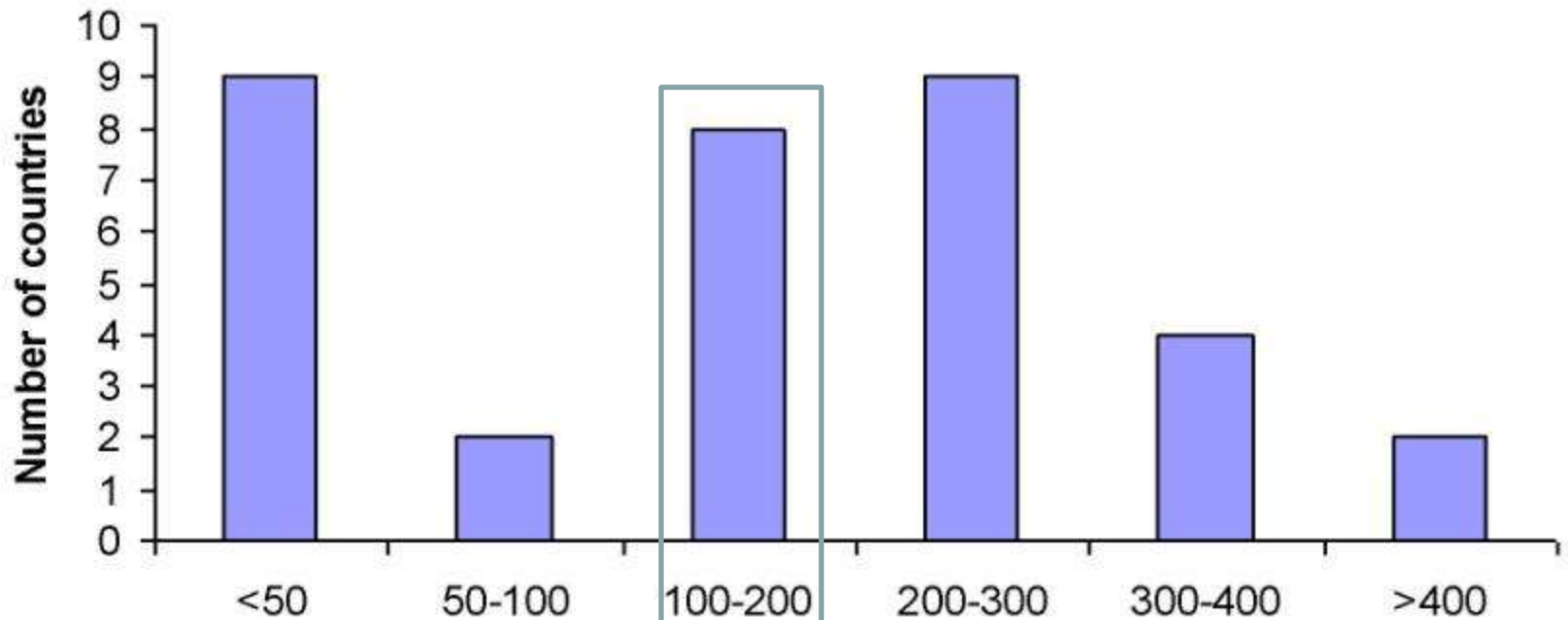
EP ablations



166 EP ablations/million/year

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Catheter Ablation rate per Million in 2008



166 EP ablations/million/year

Electrophysiology in Poland

	Centres	Number of implantations /million/year	Number of operators
<i>Pacemakers</i>	113	768	200
<i>ICD</i>	84	138	100
<i>CRT</i>	N/A	?	40?
<i>Catheter ablations</i>	42	166	50 ?

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1. Funding of a limited number of medical procedures

All electrotherapy procedures are completely reimbursed by the National Health Fund

Total budget of the hospital/department for these kind of procedures is limited

A small progress in a funding of electrotherapy procedures in recent years

Increasing awareness of guidelines and their implementation

Prolongation of waiting lists for the majority of electrophysiology procedures

In contrast, the reimbursement of an invasive treatment of acute coronary syndromes in Poland is unlimited

2. Restricted utilization of available centers capable of performing advanced invasive procedures

The analysis of the correlation between the number of EP labs and operators indicates that nearly only one operator is working in one EP lab

Limited number of EP ablations in correlation to the number of implanted devices

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3. A small number of fully qualified, experienced operators being able to perform all kinds of procedures

The total amount of EP operators is 50

The number of the most experience ones being able to perform the most advanced procedures including AF and VT ablation seems to be limited and lower

Long period of training necessary for complete education for an experienced, fully qualified operator

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Main barriers in the development and implementation of advanced medical technologies

1. Funding of a limited number of medical procedures
2. Restricted utilization of available centers capable of performing advanced invasive procedures
3. A small number of fully qualified, experienced operators being able to perform all kinds of procedures
4. No funding for new advanced technology
4. No funding FU check-ups and telemonitoring of devices, lead management and hybrid procedures