

COVID Impact On Cardiac Implantable Electronic Devices Trends In The Brazilian Public Health System: A Joinpoint Regression Analysis



MARCOLINO, M.A.Z.¹; CARNESECA, E.²;. SICCHIERI, M.P.²; POLANCZYK, C.A.³; RIBEIRO, R.A.¹; BELLI, K.¹; 1. TruEvidence, Porto Alegre, RS, Brasil. 2. ProEstat, Ribeirão Preto, SP, Brazil. 3. IATS, Porto Alegre, RS, Brazil.

Poster code RWD27

INTRODUCTION

Cardiac implantable electronic devices (CIED) have a long history in the Brazilian Public Health System (SUS). Changes in the population profile, preferences, clinical practice, and the occurrence of external events, such as the **COVID-19 pandemic**, may affect its use.



Our objective was to analyze the impact of the pandemic on the CIED implantation trends in SUS.

METHODS

Inclusion criteria



16 years Period 2008 - 2023



Study Location Brazil



Medical devices included

- permanent pacemaker [PM]
- implantable cardioverter-defibrillator [ICD]
- cardiac resynchronization therapy devices [CRT-Pacemaker or CRT-Defibrillator])

RWE Outcomes Assessment

- ❖ Incidence rates (IR) per 100,000 population were adjusted to the European standard population. Joinpoint regression, using Poisson modeling, estimated change points and regression coefficients, with the optimal number of joinpoints determined by the weighted Bayesian Information Criterion, considering a maximum of two points and uncorrelated errors.
- Annual percentage changes (APC) with 95% confidence interval (CI) were estimated for each segment, comparing average APC (AAPC) between the pre-COVID (2008-2019) and post-COVID (2020-2023) periods.

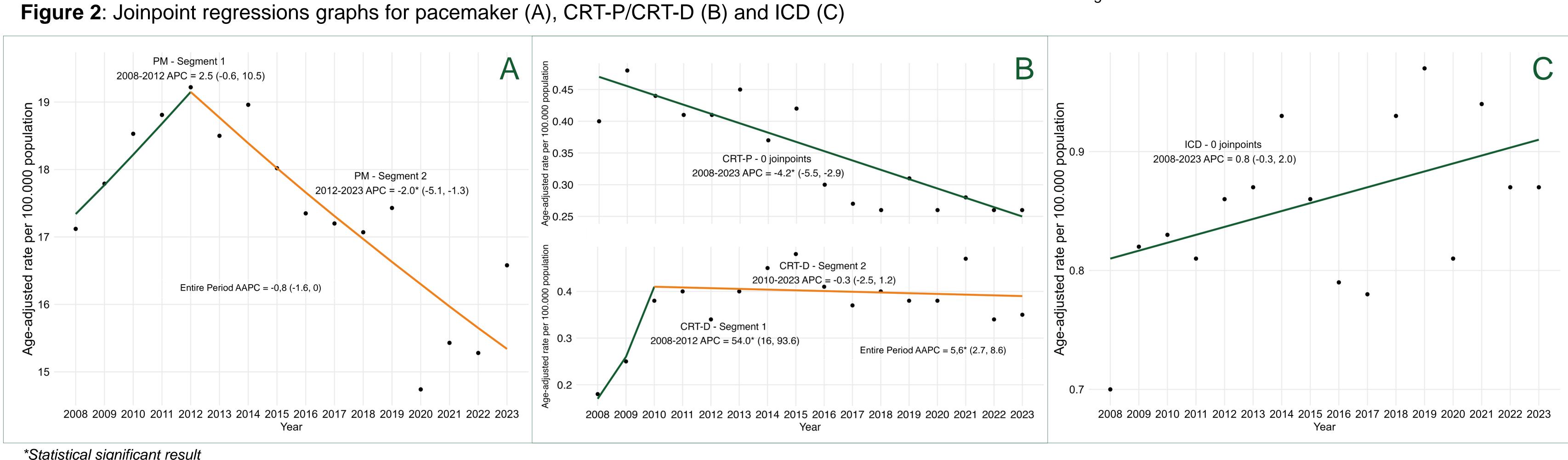
RESULTS

- During the period, 216,927 admissions for CIED implants were Figure 1: Joinpoint regression graph for the joint analysis of all devices.
- reimbursed by SUS. Overall annual IR oscillated from 18.4 to 20.8 implants per 100,000 population, with a significant decline identified after 2012 (APC 2008-2012 2.7, 95%CI -0.3, 10.8, 2012-2023 -1.9,
- 95%CI -4.1; -1.3 Figure 1). Pacemakers and CRT-Ds also presented different trends before and after 2012.
- *No inflection point was detected with the pandemic start, but the AAPC changed from -0.3 (95%CI -0.9; 0.8) to a significant decline of -1.9 (95%CI -4.0; -1.3) in the 2020-2023 period.
- * CRT-Defibrillator implants presented positive AAPC pre-COVID, with stagnation post-COVID, while PM presented a significant decline post-COVID. CRT-P and ICD trends remained the same pre- and post-COVID.

2008-2012 APC = 2.7 (-0.3, 10.8)

Entire Period AAPC = -0,7 (-1,5;0,1)

*Statistical significant result



CONCLUSIONS

The **COVID pandemic** temporarily disrupted surgical procedures but did not alter the general trend of CIED implantation in Brazil (SUS). Implantation rates were already stagnant pre-pandemic and tended to decrease post-COVID, with no recovery observed across device types, highlighting long-term challenges in maintaining CIED access and utilization in the Brazilian Public Health System, urging a better understanding of the reasons.

