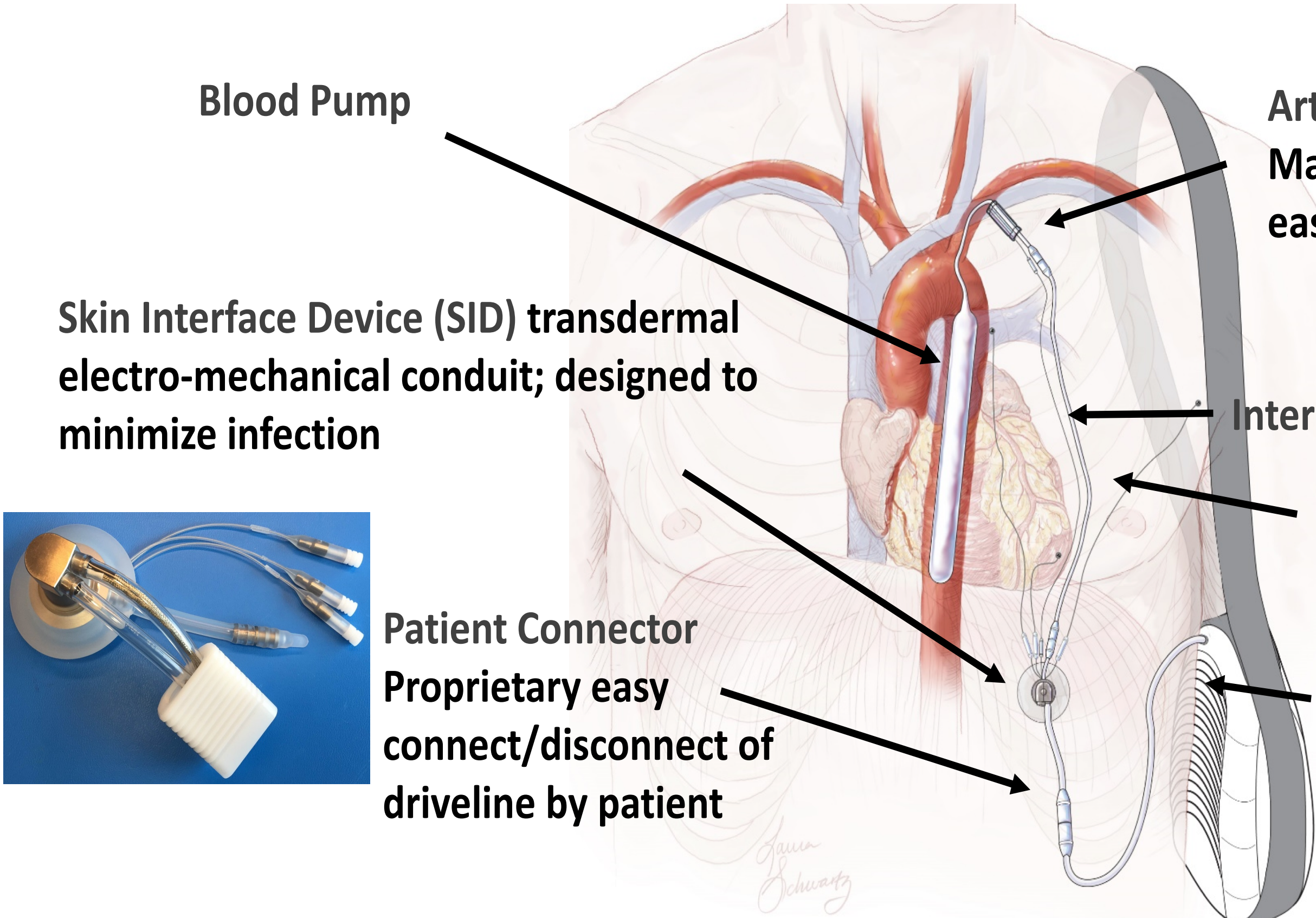


Background

- ◆ Increased scrutiny over financial performance and outcomes across healthcare systems makes it crucial to find alternatives that add cost value while maintaining the highest standard of care for patients.
- ◆ The Intra-Aortic Balloon Pump (IABP) can be used as a bridge to heart transplantation.
- ◆ Placing IABP through the subclavian artery (sIABP) allows the patient to ambulate and participate in physical therapy.
- ◆ NuPulseCV iVAS is a minimally invasive support device that allows for long term support using the principles of counter pulsation



Aim

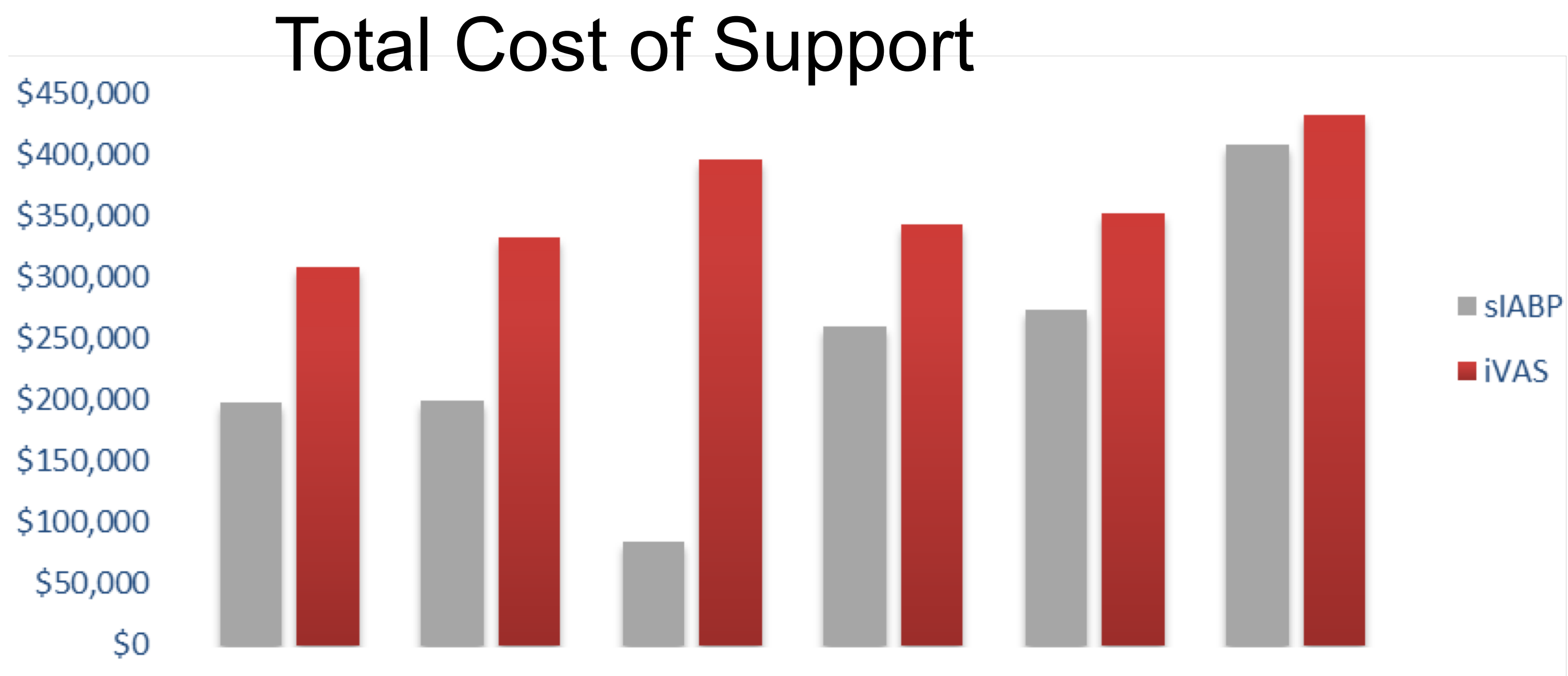
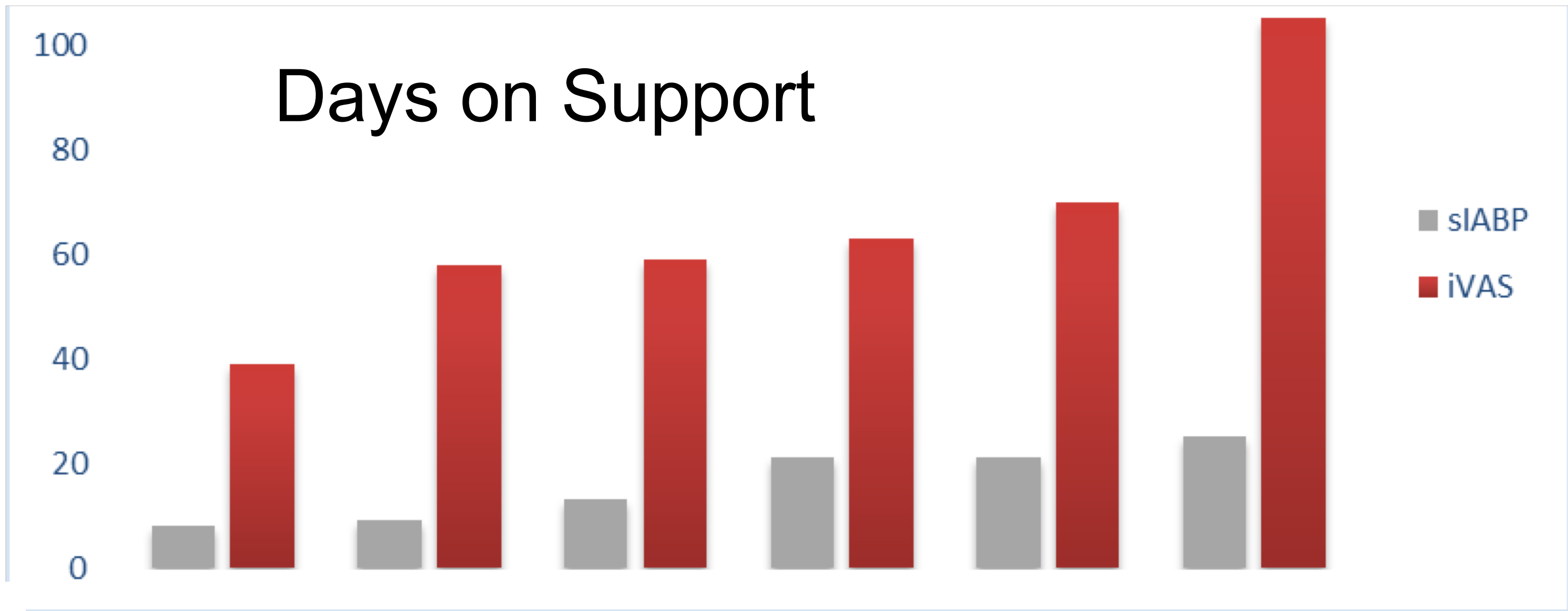
- ◆ The aim of this review is to compare the financial implications of a sIABP with iVAS as a bridge to heart transplant.

Methods

- ◆ Chart review was performed prior to the new allocation system on 12 consecutive patients supported by either iVAS or sIABP that received a heart transplant.
- ◆ For consistency, only patients that remained in the hospital on support until transplant were included. Metrics observed: hospital-operating costs and duration. (Metrics were broken down by patient from initiation of support to heart transplant.)
- ◆ Due to the small sample size, total payments were not included, eliminating the variance in hospital specific contracts and payer mix.

Results

Device	Age	Male	ICM	Support (days)	Cost
sIABP (n=6)	59 ± 7	4 (67%)	0 (0%)	16 ± 7	\$237,257
iVAS (n=6)	57 ± 14	6 (100%)	3 (50%)	66 ± 22	\$360,727



Device	Average Cost per Day
sIABP (n=6)	\$14,828.00 ←
iVAS (n=6)	\$5,465.00 ←

Comparison Chart

	sIABP	iVAS
Pneumatic Supply	Helium; wheeled 100lbs console	Ambient air; 5.7 lbs wearable driver
Location of support	ICU	Home
Complexity of Care	ICU nurse; hourly	Patient self care
Durability	Short term – days	Long term – months
Need for reoperation/re-positioning	High	Low

Conclusions

- ◆ There is a significant reduction in resource utilization with iVAS vs sIABP.
- ◆ 60% less cost (direct and indirect) per day on iVAS vs sIABP:
 - ◆ less ICU with iVAS
 - ◆ less need for repeat procedures with iVAS with increased durability/stability of the balloon.
 - ◆ less need for PT due to increased independence with iVAS.