2018 - LEFT VENTRICULAR ASSIST DEVICE (LVAD) AS DESTINATION THERAPY.

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LINKS RELACIONADOS

Spanish full text

Introduction: heart failure (HF) is a worldwide epidemic that has a significant impact on healthcare costs in developed countries. Despite the progress made over the last 20 years in the medical treatment of HF, a high percentage of patients whose illness reaches an advanced or terminal stage still remains. When medical therapy is no longer effective, heart transplantation is considered the treatment of choice. However, due to the limited availability of organs and the waiting time until a compatible organ is available, Left Ventricular Assist Devices (LVAD) are an acceptable therapeutic alternative. In the case of patients with a permanent contraindication for heart transplant due to their age or comorbidities, LVAD used as a destination therapy are one of the main options.

Aims: to analyse the safety, effectiveness, considerations for use, and the economic, organisational, social, ethical, or legal aspects arising in relation to the use of LVAD as a destination therapy.

Methods: specific search strategies were designed in order to locate studies that have evaluated the safety and/or effectiveness of LVAD as a destination therapy, their economic and organisational impact, patient acceptability and satisfaction, and the ethical, social, and legal aspects associated with its use. These strategies were carried out in November 2017 using the principal medical literature databases. The main features and results of the studies that were included were summarised in evidence tables. A qualitative synthesis of the evidence was carried out using the GRADE system, for which 14 result variables were selected, all of which except one were classified by the clinicians as critical. In order to evaluate the bias risk of the studies, specific tools were used depending on the type of study. The quality of evidence was evaluated using the GRADE system in the case of the quantitative studies, and the GRADE-CERQual version was used for the qualitative studies. Both the extraction of data from the studies and the synthesis and evaluation of the evidence were carried out independently and blind by two investigators.

Results and conclusions: See pdf below