











Survival benefits of an implantable cardioverter-defibrillator implantation: comparing outcomes in ischemic and non-ischemic cardiomyopathy – single centre experience

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Introduction: While implantable cardioverter-defibrillators (ICD) effectively reduce sudden cardiac death, their impact on overall survival differs between ischemic cardiomyopathy (ICM) and non-ischemic cardiomyopathy (NICM).¹⁻³ This study investigates survival outcomes and the significance of age in a cohort of ICD recipients.

Patients and Methods: A retrospective cohort of 786 patients who underwent ICD implantation between 2009 and 2018 was analyzed. Survival outcomes were assessed with a focus on differences between ICM and NICM, and the influence of age on device efficacy.

Results: Patients with NICM showed a lower rate of appropriate device activation compared to ICM (23% vs. 28%). Despite this, ICD implantation significantly improved survival in both groups, with younger patients (<70 years) benefiting the most. Age, non-sustained ventricular tachycardia (NSVT), and cardiac decompensation history were strong predictors of (non) survival.

Conclusions: ICD implantation offers clear survival benefits in both ICM and NICM, though younger patients and those with ischemic cardiomyopathy experience better outcomes. Age and cardiomyopathy type are crucial factors in determining the effectiveness of ICD therapy.

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LITERATURE

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