Extraction of an implantable cardioverter defibrillator electrode: a case report

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In the last few years, there has been a significant increase in the implantation of permanent electrostimulators of the heart, especially implantable cardioverter defibrillators, whose task is to recognize and interrupt life-threatening cardiac arrhythmia. With the increase in the number of implantations, the possibility of complications related to the electrode and the need for its extraction increases. Electrode extraction is a very demanding and risky procedure in cardiology. It can be done by explanting the electrode with the help of simple traction techniques and by extraction when it is necessary to use specialized equipment and techniques. Indications for electrode extraction can be divided into those in which the risk of leaving the electrode in place is greater than the risk of removal, and those in which the decision to extract requires careful consideration of the risks and benefits for the individual patient. Transvenous electrode extraction is a procedure with a potentially high risk of complications that can be divided into major complications that require rapid intervention and minor complications that are more common but not life-threatening. In this paper, we will present the case of a patient with an implanted cardioverter defibrillator who developed sepsis caused by vegetation on the electrode of the device.[1-3]

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