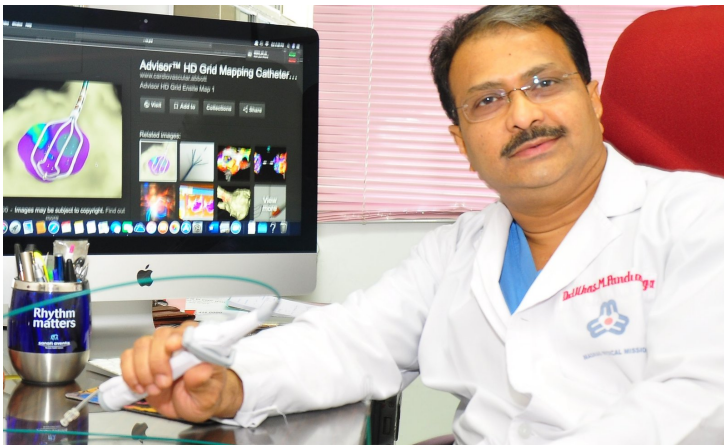


Every physician and hospital should adopt digital health solutions

13 June 2019 | Views

Dr. Ullhas M Pandurangi, Chief- Department of Cardiac Electrophysiology and Pacing, Madras Medical Mission Hospital, Chennai talks about advantages of newly launched HD grid mapping catheter by Abbott



What are your views on the current burden of cardiovascular diseases in India?

There is increase in prevalence of cardiovascular diseases in India. The global burden of disease study estimate of age standardization CVD death of 272 per 100,000 population in India, is higher than the global average of 235 per 100,000. Of course, the increasing availability of healthcare and infrastructure has helped reduce mortality rates. The surviving heart patients are ironically exposed to the risks of heart failure, stroke and sudden death. This is due to the fact that survivors still harbour scarred heart muscle. Upto one in ten heart patients who have recovered from heart attack are at risk for heart failure or sudden death.

Can you throw some light on the newly launched Advisor HD Grid Mapping Catheter?

The new catheter helps in accurately localizing the source of rhythm disorder in the heart. It helps reduce procedural time. It significantly reduced radiation exposure to the patient and the physicians. In a large number of cases, radiation may be completely avoided. The new catheter increases the success rate of the procedure and minimizes the complications.

How effective and successful this technology can be in reducing the burden of cardiovascular diseases in India? (Better than the previously used technologies?)

There are two life threatening rhythm disorders:

1. Ventricular Tachycardia (VT)
2. Atrial Fibrillation (AF)

The definitive therapy for VT most often is a Defibrillator (AICD). However many people in India cannot afford an AICD because of the cost. The HD Grid Mapping Catheter has made the ablation procedure for VT more effective and now more patients who cannot afford an AICD will benefit through ablation, using the new catheter.

The other serious arrhythmia is AF. One in two hundred people above the age of 50 years and almost one in fifty above the age of 75 years suffer from AF. AF is one of the common causes of stroke as well. AF ablation by the new catheter is much more effective as compared to the conventional catheters.

What could be the possible challenges with this technology?

One of the challenges is training of the physicians and technologists for adoption of the technology. Also, when looking at costs, one must actually look at it from the long-term perspective, that higher costs are compensated by the increased success rate of these procedures.

With major hospitals slowly adapting digital solutions, do you think going digital should be the way ahead for better diagnosis and treatment of any disease?

I strongly believe every physician and hospitals should adopt digital health solutions. I lead the largest Remote Monitoring Unit of Implantable Heart Devices in the country. My patients are monitored for their heart failure status, activity status and pacemaker status remotely almost always and in real time. The digital monitoring system helps in minimizing clinical visits and to take measures proactively even before the patient becomes symptomatic.