Enhanced External Counterpulsation (EECP) for patients with severe ischaemic heart disease

NHS Devon

Commissioning policy

The Peninsula Health Technology Commissioning Group (PHTCG) has come to a decision on the use of enhanced external counterpulsation (EECP) for patients with severe ischaemic heart disease.

In the management of patients with severe ischaemic heart disease enhanced external counterpulsation will not be commissioned.

Rationale for the decision

The vast majority of the published literature is in the form of case series or prospective observational studies. There are only two published randomised trials of EECP one of which is for heart failure treatment. The sole cohort comparison with PCI indicates that further coronary intervention, rather than EECP, is the more beneficial treatment if patients are technically eligible for it. Outcomes of subsequent cardiac mortality or major adverse cardiovascular events are not recorded. This does not provide firm evidence of the clinical effectiveness of EECP in chronic or refractory stable angina. The overall cost effectiveness of EECP is finely balanced and difficult to determine without evidence from a randomised controlled trial with long term follow-up and was considered to be too uncertain to be funded locally.

Guidance notes on exceptionality

Where the circumstances of treatment for an individual patient do not meet the criteria described above exceptional funding can be sought.

Plain language summary

Ischaemic heart disease (coronary artery disease or CAD) is a condition in which fatty deposits build up in the linings of the walls of the coronary arteries. This causes a narrow artery and reduced blood flow to the heart muscle. Myocardial ischaemia results in central chest pain, causing stable angina, unstable angina and myocardial infarction.

Enhanced External Counterpulsation (EECP) is a non-invasive method which has been used, mainly in the United States, to treat patients with refractory angina pectoris, ineligible for further drug or surgical intervention. Pneumatic cuffs are applied to the lower limbs and controlled to inflate sequentially in time with the heartbeat during the time when the chambers of the heart fill, a process designed to increase coronary blood flow and improve heart output. The Committee considered that there was insufficient robust evidence of effectiveness to support commissioning EECP in the Peninsula.

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