NICE Recommends Boston Scientific HeartLogic™ Heart Failure Diagnostic as an Option for UK Heart Failure Patients

Diagnostic algorithm shown to detect early signs of worsening heart failure and reduce hospitalisations for patients with cardiac implantable electronic devices

HEMEL HEMPSTEAD, United Kingdom, 24 October, 2024 – Boston Scientific (NYSE: BSX) announced that the National Institute for Health and Care Excellence (NICE), which provides evidence-based recommendations to improve health and social care in the National Health Service in England and Wales, has issued guidance recommending the use of the HeartLogic™ Heart Failure Diagnostic as an option for managing heart failure in patients with cardiac implantable electronic devices.[1]

Heart failure is a condition that occurs when the heart is unable to pump enough blood and oxygen throughout the body, and can result in symptoms including fatigue, breathing problems or coughing. Today, heart failure is one of the leading causes of hospitalisation in western countries in people over the age of 65 and the average age of diagnosis is 77.[2] In the U.K., the condition affects close to one million people with approximately 200,000 new diagnoses each year,[3] and hospitalised heart failure patients can spend on average nine days in hospital, resulting in high burden on the NHS and society.[4]

“Early prediction of heart failure events enables physicians to intervene sooner – leading to better patient outcomes and reduced burden on the healthcare system – and we believe this decision will broaden the use of the HeartLogic Heart Failure Diagnostic among physicians,” said Angelo Auricchio, M.D., Ph. D., chief medical officer for Rhythm Management at Boston Scientific in Europe, Middle East and Africa (EMEA). “Remotely monitoring worsening heart failure can also reduce inequities, particularly in underserved, lower socioeconomic and remote communities who may be more reluctant to travel to hospitals, helping to address a key priority of the NHS.”

The HeartLogic Heart Failure Diagnostic, which has demonstrated accurate detection of patients at risk of heart failure events up to 34 days in advance[5], incorporates multiple sensors and combines trend data into one composite index, sending clinicians a single actionable alert and detailed report when it crosses a clinician-set threshold. This allows early intervention and the potential to reduce patient hospitalisations. NICE found the HeartLogic diagnostic to be the most accurate and consistent of reviewed heart failure algorithms in the UK market.[6]

More information on the HeartLogic Heart Failure Diagnostic isavailable here.

References

[1] For information on the NICE guidance, visit:https://www.nice.org.uk/guidance/DG61

[2] Fonarow GC, Abraham WT, Albert NM, et al. Association between performance measures and clinical outcomes for patients hospitalized with heart failure. JAMA. 2007;297(1):61–70. https://www.ncbi.nlm.nih.gov/pubmed/17200476

[3] National Institute for Health and Care Excellence. NICE guideline NG106, Chronic Heart Failure in Adults: Diagnosis and Management, September 2018. Available at: https://www.nice.org.uk/guidance/ng106

[4] ESC Atlas in Heart Failure – average length of stay in hospital primarily due to HF chart available at https://eatlas.escardio.org/Atlas/ESC-Atlas-in-Heart-Failure

[5] Boehmer, J et al., JACC-HF, 2017;5(3),2 1 6 – 2 56

[6] National Institute of Health and Care Excellence. NICE guidance DG72, Heart failure algorithms for remote monitoring in people with cardiac implantable electronic devices, Updated External Assessment Report (dated 20 March 2024), produced by Newcastle Technology Assessment Review Group, Newcastle University, published as part of committee papers, 14 May 2024. Available at: https://www.nice.org.uk/guidance/gid-dg10080/documents/committee-papers

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urological diseases and conditions. Learn more at www.bostonscientific.eu and connect on LinkedIn and X, formerly Twitter.

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This press release contains forward-looking statements within the meaning of Section 27A of the Securities Act of 1933 and Section 21E of the Securities Exchange Act of 1934. Forward-looking statements may be identified by words like “anticipate,” “expect,” “project,” “believe,” “plan,” “estimate,” “intend” and similar words. These forward-looking statements are based on our beliefs, assumptions and estimates using information available to us at the time and are not intended to be guarantees of future events or performance. These forward-looking statements include, among other things, statements regarding our business plans and product performance and impact. If our underlying assumptions turn out to be incorrect, or if certain risks or uncertainties materialize, actual results could vary materially from the expectations and projections expressed or implied by our forward-looking statements. These factors, in some cases, have affected and in the future (together with other factors) could affect our ability to implement our business strategy and may cause actual results to differ materially from those contemplated by the statements expressed in this press release. As a result, readers are cautioned not to place undue reliance on any of our forward-looking statements.

Factors that may cause such differences include, among other things: future economic, competitive, reimbursement and regulatory conditions; manufacturing, distribution and supply chain disruptions and cost increases; new product introductions; demographic trends; intellectual property; litigation; financial market conditions; and future business decisions made by us and our competitors. All of these factors are difficult or impossible to predict accurately and many of them are beyond our control. For a further list and description of these and other important risks and uncertainties that may affect our future operations, see Part I, Item 1A – Risk Factors in our most recent Annual Report on Form 10-K filed with the Securities and Exchange Commission, which we may update in Part II, Item 1A – Risk Factors in Quarterly Reports on Form 10-Q we have filed or will file hereafter. We disclaim any intention or obligation to publicly update or revise any forward-looking statements to reflect any change in our expectations or in events, conditions or circumstances on which those expectations may be based, or that may affect the likelihood that actual results will differ from those contained in the forward-looking statements, except as required by law. This cautionary statement is applicable to all forward-looking statements contained in this document.

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