## Supplementary Appendix

This appendix has been provided by the authors to give readers additional information about their work.

Supplement to: Sanders GD, Hlatky MA, Owens DK. Cost-effectiveness of implantable cardioverter–defibrillators. N Engl J Med 2005;353:1471-80.

## **Supplementary Appendix: Input Variables and Sources**

Clinical Trial	Inclusion Criteria		
MADIT-I	MI three weeks or m	ore before study; unsustained VT; EF ≤35%	
CABG-PATCH	Scheduled for CABG, EF \(\leq 35\%\), abnormalities on SAECG		
MUSTT	CAD, EF $\leq$ 40%, asymptomatic non-sustained VT within 6 months an		
110011	not within 4 days after an MI or CABG		
MADIT-II	MI one month or more before study; $EF \le 30\%$		
DEFINITE	EF $\leq$ 35%, ambient arrhythmias, symptomatic heart failure, presence of		
DEFINITE	nonischemic cardiomyopathy		
COMBANION	NYHA III or IV, EF $\leq$ 35%, QRS = 120 ms, PR $>$ 150 ms, sinus rhythm, and a hospitalization for the treatment of CHF in the		
COMPANION			
	preceding 12 months		
DINAMIT	Within 4 to 40 days of an MI, EF $\leq$ 35%, impaired autonomic tone by		
DINAMIT			
COD IL-FT	heart rate variability NYHA class II or III symptoms, $EF \le 35\%$ and on optimal medical		
SCD-HeFT		symptoms, $EF \leq 35\%$ and on optimal medical	
	therapy		
Input Variable	Base-Case	Source	
<u> </u>	Estimate (Range)		
Control therapy clinical variables			
Annual total mortality, %	40.	1	
MADIT-I	19.5	2	
CABG-PATCH	8.5	3	
MUSTT	16.7		
MADIT-II	12.4	4	
DEFINITE	7.3	5	
COMPANION	18.9	6	
DINAMIT	7.2	7	
SCD-HeFT	12.3	8	
ICD clinical variables			
Efficacy of ICD in reducing total mortality, %			
MADIT-I	0.46 (0.26, 0.82)	1	
CABG-PATCH	1.07 (0.81, 1.42)	2	
MUSTT	0.45 (0.32, 0.63)	3	
MADIT-II	0.69 (0.51, 0.93)	4	
DEFINITE	0.65 (0.40, 1.06)	5	
COMPANION	0.64 (0.48, 0.86)	6	
DINAMIT	1.08 (0.76, 1.55)	7	
SCD-HeFT	0.77 (0.62, 0.96)	8	
Frequency of ICD generator replacement, y	5 (2–9)	Estimate based on 9-12, Medtronic and Guidant	
q, g, ,	- ()	unpublished data, 13 and expert opinion	
Probability of lead problems requiring surgical	2.4 (0-5)	4	
intervention (20 months), %	<b>2</b> (0 0)		
Duration of ICD benefit	Lifetime (3, 5, 12)	Assumed	
Control therapy costs, \$	Elicenne (3, 3, 12)	rissamea	
Monthly inpatient costs	494†	MITI registry, unpublished data and <sup>14</sup>	
Wontiny inpatient costs	(85-2500)	wiff i registry, unpublished data and	
Monthly outpatient costs	50 (0-100)	15	
ICD costs, \$	30 (0-100)		
	27.075	EV 2005 Madisons Innational Hamital Downsont	
ICD implantation	27,975	FY 2005 Medicare Inpatient Hospital Payments	
	(10,000–60,000)	and Professional Fees	
Monthly inpatient costs	494†	MITI registry, unpublished data and <sup>14</sup>	
	(85-2500)	15	
Monthly outpatient costs	50 (0-100)		
Generator replacement	18,390	FY 2005 Medicare Inpatient Hospital Payments and Professional Fees	
	(5,000-30,000)		

Baseline health state (Control therapy)	0.88 (0.6–1)	16, 17-18
ICD	0.88 (0.6–1)	Assumed to be equivalent to current health for
		base case
Hospitalization for ICD infection (days lost)	3.5	
Other variables		
Discount rate, %	3 (0–5)	19

The base-case estimate represents our best estimate for each value. Costs are expressed in 2005 U.S. dollars. †The monthly inpatient cost reported here reflects the average of the first 36 months. ICD = implantable cardioverter defibrillator; MITI = Myocardial Infarction Triage and Intervention, MI = myocardial infarction; EF = ejection fraction; NYHA= New York Heart Classification, SAECG = signal averaged ECG.

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