



IQWiG Reports – Commission No. H22-04

Pulmonary thrombectomy using a disc retriever for pulmonary artery embolism¹

Extract

¹ Translation of the executive summary of the §137h assessment: H22-04 *Pulmonale Thrombektomie mittels Disc-Retriever bei Lungenarterienembolie* (Version 1.0; Status: 27 September 2022). Please note: This translation is provided as a service by IQWiG to English-language readers. However, solely the German original text is absolutely authoritative and legally binding.

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IQWiG thanks the medical advisor for his contribution to the §137h assessment. However, the advisor was not involved in the preparation of the §137h assessment. IQWiG is solely responsible for the content of the §137h assessment.

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Executive summary

The Federal Joint Committee (G-BA) commissioned the Institute for Quality and Efficiency in Health Care (IQWiG) to assess the method “pulmonary thrombectomy using a disc retriever for pulmonary artery embolism” according to §137h Social Code Book (SGB) V – Statutory Health Insurance. The assessment documents were submitted to IQWiG on 16 August 2022.

According to the information in the submission form, the above method is used to mechanically remove the thrombotic material from the pulmonary artery as completely as possible by fixation of the thrombus in the device.

Documents on a total of 45 studies with results were available for the assessment. There were 3 retrospective comparative studies, 12 case series and 30 case reports available. In addition, 2 ongoing studies were mentioned, one of which was a randomized controlled trial (RCT) comparing the method with catheter-directed thrombolysis (CDT).

Results from 1 retrospective comparative study were used to assess the method. Two large case series were additionally reviewed with regard to harmfulness.

No findings on the benefit, ineffectiveness and harmfulness of the method could be derived from the data of the retrospective comparative study, since no differences in favour or to the disadvantage of the method were discernible in a magnitude that could not be explained by systematic bias alone. Nor could an equivalence of the method with CDT be deduced. The supplementary examination of the results of the case series also did not indicate harmfulness of the method.

Overall, based on the documents submitted on the method “pulmonary thrombectomy using a disc retriever for pulmonary artery embolism”, neither a benefit, harmfulness or ineffectiveness of the method can be identified in the present assessment according to §137h.

For the comparison relevant to the assessment, 1 RCT with 550 planned participants is running; it seems possible in principle to assess the benefit of the method with this study.

The full report (German version) is published under

<https://www.iqwig.de/projekte/h22-04.html>