Resource impact summary report

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KardiaMobile is recommended as an option for detecting atrial fibrillation (AF) for people with suspected paroxysmal AF, who present with symptoms such as palpitations and are referred for ambulatory electrocardiogram (ECG) monitoring by a clinician.

Evidence suggests that the use of KardiaMobile reduces time to AF detection but there is no direct evidence for improved clinical outcomes after AF diagnosis. It is easy to use, compact and can be used anywhere, at any time of the day, to record an ECG. ECG recordings can be made available to healthcare professionals as soon as they are taken rather than at the end of a specified monitoring period. Therefore, it has potential benefits because of earlier detection compared with current practice.

Cost modelling shows that KardiaMobile is cost saving compared with Holter monitoring over 2 years in people presenting with symptoms such as palpitations. KardiaMobile is cost saving because of a reduction in repeat diagnostic assessments and the associated cardiology appointments. A <u>resource impact template</u> is available to support this summary report. Organisations can use the template to undertake an assessment of the potential local resource impact of using KardiaMobile. Users should input local prices and values specific to their organisation.

The financial impact for providers and commissioners resulting from any capacity benefit will be determined by the contract in place, but the capacity benefit may assist in reducing waiting lists.

The technology is commissioned by integrated care systems/clinical commissioning groups. Providers are NHS hospital trusts and GPs.