

Leadless cardiac pacemaker implantation for bradyarrhythmias

Information for the public

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Right ventricular pacing alone

This procedure can be used for right ventricular pacing alone for bradyarrhythmias because it works well and there are no serious concerns about its safety in this condition.

Dual-chamber pacing or right atrial pacing alone when transvenous pacing is unsuitable

There are uncertainties about how well this procedure works or how safe it is for dual-chamber pacing or right atrial pacing alone when transvenous pacing is unsuitable. So, it can only be done while more evidence is generated to check if it is safe and clinically effective. This means that you will have regular appointments afterwards to check how well it is working or whether it has caused problems.

Dual-chamber pacing or right atrial pacing alone when transvenous pacing is suitable

This procedure can only be done for dual-chamber pacing or right atrial pacing alone when transvenous pacing is suitable as part of a research study. This is because there is not enough evidence to be sure how well it works or how safe it is.

Your healthcare professional should talk to you about the research.

Bradyarrhythmias are when the heart beats abnormally slowly. They are usually caused by a problem with the heart's electrical system. In this procedure, a cardiac pacemaker that does not have leads (leadless) is implanted directly into the internal wall of the heart. This avoids the need for a pacemaker box under the skin with leads connecting it to the heart. The procedure is done by inserting a tube through a large vein in the leg or neck. This is used to put the leadless cardiac pacemaker into the heart chamber. The aim is to stimulate the heart when needed to beat at a normal rate and reduce symptoms.

Is this procedure right for me?

You should be included in making decisions about your care. See [our webpage on shared decision making](#).

Your healthcare professionals should explain the risks and benefits of this procedure and how it is done. They should discuss your options and listen carefully to your views and concerns. They should offer you more information about the procedure. Your family or carers can be involved if you want or need them to be.

You will be asked to decide whether you agree (consent) to have the procedure. Find out more about [giving consent to treatment on the NHS website](#).

Some questions to think about

- How many appointments will I need?
- What are the possible benefits? How likely am I to get them?
- What are the risks or side effects? How likely are they?
- Will I have to stay in hospital?
- What happens if it does not work or something goes wrong?
- What happens if I do not want the procedure?
- Are other treatments available?

Information and support

The [NHS webpage on heart rhythm problems \(arrhythmia\)](#) may be a good place to find out more.

The [NHS website has information about NHS hospital services](#) and [referrals for specialist care](#).

- [NICE's information on interventional procedures guidance](#) explains what an interventional procedure is and how we assess it.
- [NICE's information on recommendations](#) explains the types of recommendation we make.

[Heart Rhythm Alliance](#), 01789 867 501, can give you advice and support.

You can also get support from your local [Healthwatch](#).

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