## Policy Brief January 2025





Health Technology Assessment on ICU Ventilators with Neurally Adjusted Ventilatory Assist Kalam Institute of Health Technology (KIHT), Visakhapatnam

## **Recommendations**

At the cost-effectiveness cut off of 1 GDP (INR 2,31,784) for procurement in public health programmes, the proposed intervention is not only highly cost effective but cost saving.

Population (P)	Patients (both adult & pediatric) who require mechanical ventilation support in intensive care units for respiratory distress
Interventio n (I)	Neurally Adjusted Ventilatory Assist (NAVA)
Comparato r (C)	Conventional Mechanical Ventilation (CMV) modes
Outcome (O)	<ul> <li>Reduction in duration of MV</li> <li>Incremental cost-effectiveness ratio (ICER)</li> <li>Net Monetary Benefit (NMB)</li> </ul>

Perspective Health system perspective

#### **Key Findings**

- The study showed adoption of NAVA reduces the cost per patient by 13% compared to CMV, while also lowering ICU resource utilization through reduction in MV duration by 42%.
- NAVA demonstrated significant cost savings with an ICER of ₹-2,282. The incremental NMB is ₹7,78,785, showcased its substantial economic advantage and value.

### Conclusion

- Cost effectiveness: The ICER/ QALY gained is Rs -2,282 for inclusion of ventilators supporting NAVA mode
- Cost saving: The strategy of ventilators supporting NAVA mode incurs an incremental net monetary benefit of Rs 7,78,785.
- Cost for NAVA is Rs 60518 and CMV is Rs. 69451

# Background

- Respiratory distress in ICU patients is a significant healthcare challenge, requiring mechanical ventilation (MV) for life-saving support. However, conventional MV modes often lead to complications due to patient-ventilator asynchrony.
- Neurally Adjusted Ventilatory Assist (NAVA) is a mode of ventilation that uses neural signals from the diaphragm, improves synchronization and offers better patient outcomes compared to conventional Mechanical Ventilation (CMV) modes.
- To assess the clinical and cost-effectiveness of NAVA compared to CMV modes for patients with respiratory distress, from the healthcare system's perspective, and assess whether investing in NAVA-compatible ventilators is a viable decision.

