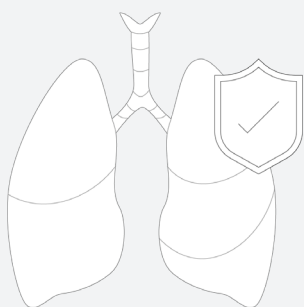


Automatic cuff pressure control with IntelliCuff. Reducing rates of Ventilator-Associated Pneumonia (VAP)



Case study from St George's University Hospitals Trust, London

VAP affects between 8 and 28% of ventilated patients¹, leading to higher morbidity, mortality, and healthcare costs. At St George's University Hospitals, a 66% reduction in VAP was observed following an intervention protocol using **an automatic cuff pressure controller (IntelliCuff)** and an automatic subglottic secretion removal device, resulting in significant cost savings and improved patient outcomes in the adult ICU.



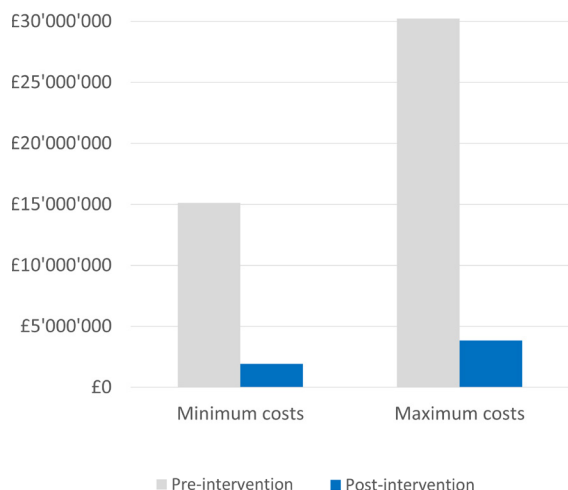
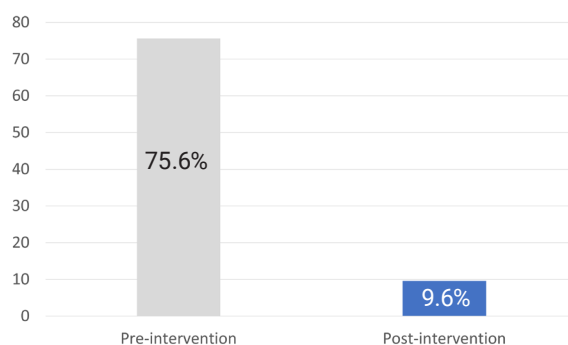
VAP rates before and after

Before intervention protocol

59 of 78 ventilated patients developed VAP: **75.6%**

After intervention protocol

8 of 83 ventilated patients developed VAP: **9.6%**



Potential cost savings analysis

The NHS England estimates the cost per VAP case between £10,000 and £20,000. The St George's University Hospitals Trust has around 2'000 ventilated patients per year.

Before intervention protocol

- VAP cases: 75.6% of 2,000 = 1,512
- VAP cost: £15,120,000 to £30,240,000

After intervention protocol

- VAP cases: 9.6% of 2,000 = 192
- VAP cost: £1,920,000 to £3,840,000

The introduction of the intervention protocol with an automatic cuff pressure controller (IntelliCuff) and an automatic subglottic secretion removal device **can save the NHS potentially between £13,200,000 and £26,400,000 per year.**



IntelliCuff - Automatic Cuff Pressure Controller

IntelliCuff continuously measures and automatically maintains the user-set cuff pressure of an endotracheal or tracheostomy tube in real-time.

