



Clinical Champion Update

Date: 7/20/23

Subject: Congestive Heart Failure

Updated guidance for management of HFpEF

Incidence of HFpEF is rising. Now over half of HF patients have HFpEF (i.e. HF with an EF of 50% or higher), and outcomes are comparable to HFrEF. But treatment of HFpEF is still less clear-cut than HFrEF, since HFpEF data are less robust and meds aren't shown to reduce mortality so far.

General guidelines remain the same:

- Good control of HTN (consider BB, ACE or ARB) may slow HFpEF progression.
- Management of other comorbidities (anemia, afib, COPD, obesity, OSA)
- Cautious diuresis with loop diuretics if needed for fluid overload.
 - Cautious because reducing preload too much can worsen HFpEF symptoms.

Some new evidence for meds that may improve HFpEF outcomes

- **SGLT2 inhibitors.** Add one of these if practical.
 - *Farxiga* (dapagliflozin) or *Jardiance* (empagliflozin) prevents HF hospitalization in about 1 in 35 patients with HFpEF over about 2 years.
 - May be started with eGFR down to 20.
 - Now approved for HF, including HFpEF, regardless of diabetes.
 - Cons: genital yeast infections, volume depletion, and cost of about \$600/month.
- **Aldosterone antagonists.**
 - Spironolactone: reanalysis of data suggests it may reduce HFpEF hospitalizations.
- **ACEIs, ARBs, or *Entresto* (sacubitril/valsartan).**
 - Some evidence suggests any of these meds might reduce HFpEF hospitalizations.
 - Data for *Entresto* is stronger than for ACEIs or ARBs.

- But can cause hypotension and costs \$670/month.
- If *Entresto* isn't an option, choose an ARB over an ACEI since ACEIs have the least data suggesting benefit in HFpEF.
- Ensure close monitoring, such as electrolytes, kidney function, and volume status...especially when adding or titrating meds.

See <https://www.sciencedirect.com/science/article/pii/S0735109723050982?via%3Dihub> for complete article from [Journal of the American College of Cardiology, Volume 81, Issue 18](#), 9 May 2023, Pages 1835-1878: 2023 ACC Expert Consensus Decision Pathway on Management of Heart Failure With Preserved Ejection Fraction: A Report of the American College of Cardiology Solution Set Oversight Committee

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