

HEART FAILURE



IDENTIFICATION OF **BIOMARKERS**



1964 First reported biomarker work by Braunwald et al. used an early C-reactive protein assay to analyze serum from affected patients. Since then hundreds of biomarkers, including B-type natriuretic peptides, have been identified

1990s National Institutes of Health and the World Health Organization publish biomarker definitions

2017 Latest ACC/AHA/HFSA Heart Failure Guideline incorporates biomarker testing into heart failure management

2018 First-ever biomarker for the most common type of heart failure (HFpEF) is discovered

NEUROHORMONAL ACTIVATION

1992 Neurohormonal hypothesis suggesting that the degree of neurohormonal activation correlates with disease severity and clinical prognosis in heart failure is first proposed

INOTROPIC THERAPIES

Inotropic agents like digoxin, dobutamine, norepinephrine, levosimendan, and others have evolved since the first introduction of foxglove into clinical practice in 1775 as a way to treat patients with systolic heart failure



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FOUR PILLARS OF PHARMACOLOGIC THERAPY



BETA BLOCKERS

1975 First use of β -blockers for heart failure reported

1997 β -blocker (carvedilol) first approved for heart failure

ACE INHIBITORS, ARBS & ARNIS

1987 Enalapril, an ACE inhibitor, shown to significantly reduce mortality in patients with severe heart failure

2015 Sacubitril/valsartan approved by the FDA, after trials demonstrate ARNI therapy outperformed ACE inhibitors and ARBs in reducing death and hospitalizations, ushering in a new era in heart failure treatment

MRAS

1999 Spironolactone found to significantly reduce mortality and hospitalization in patients with HFrEF

2003 Eplerenone found to reduce mortality and hospitalization in patients with heart failure after acute myocardial infarction

SGLT2 INHIBITORS

2022 Empagliflozin becomes the SGLT2 inhibitor approved for expanded indication for reducing risk of cardiovascular death and hospitalization for heart failure across all ejection fraction categories

ACC/AHA/HFSA Guideline for the Management of Heart Failure recommends SGLT2 inhibitors as one of four medication classes for heart failure treatment

Today Three SGLT2 inhibitors (empagliflozin, dapagliflozin and canagliflozin) are currently approved in the U.S. for reducing cardiovascular death or hospitalization for heart failure regardless of presence or absence of type 2 diabetes



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CARDIAC RESYNCHRONIZATION THERAPY

1990s

Cardiac resynchronization therapy (CRT) emerges as an intervention that improves quality and quantity of life for heart failure patients



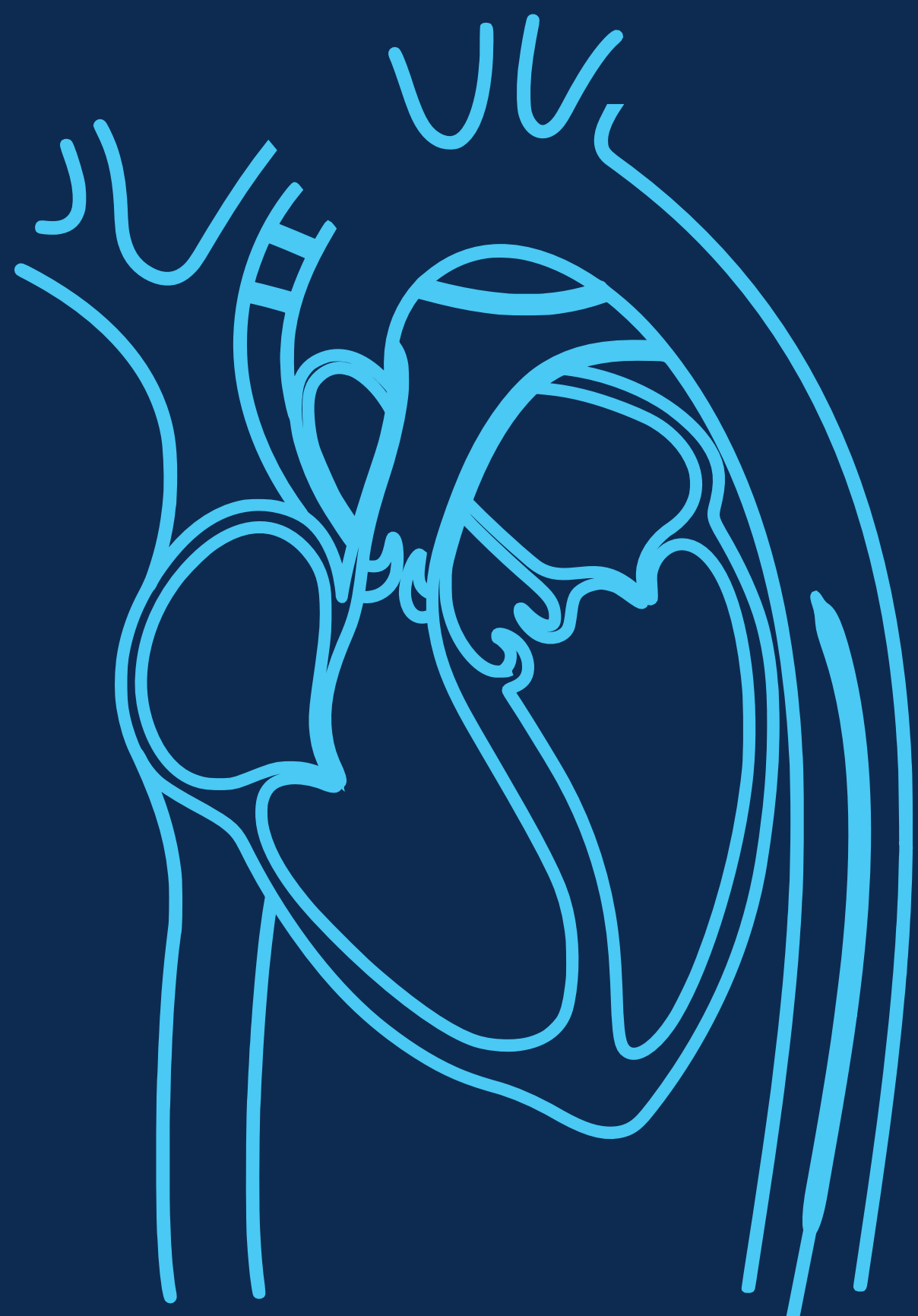
TEMPORARY MECHANICAL SUPPORT

1968

Intra-Aortic Balloon Pump developed for mechanical support

2008

FDA approves first commercially available transvalvular ventricular assist device



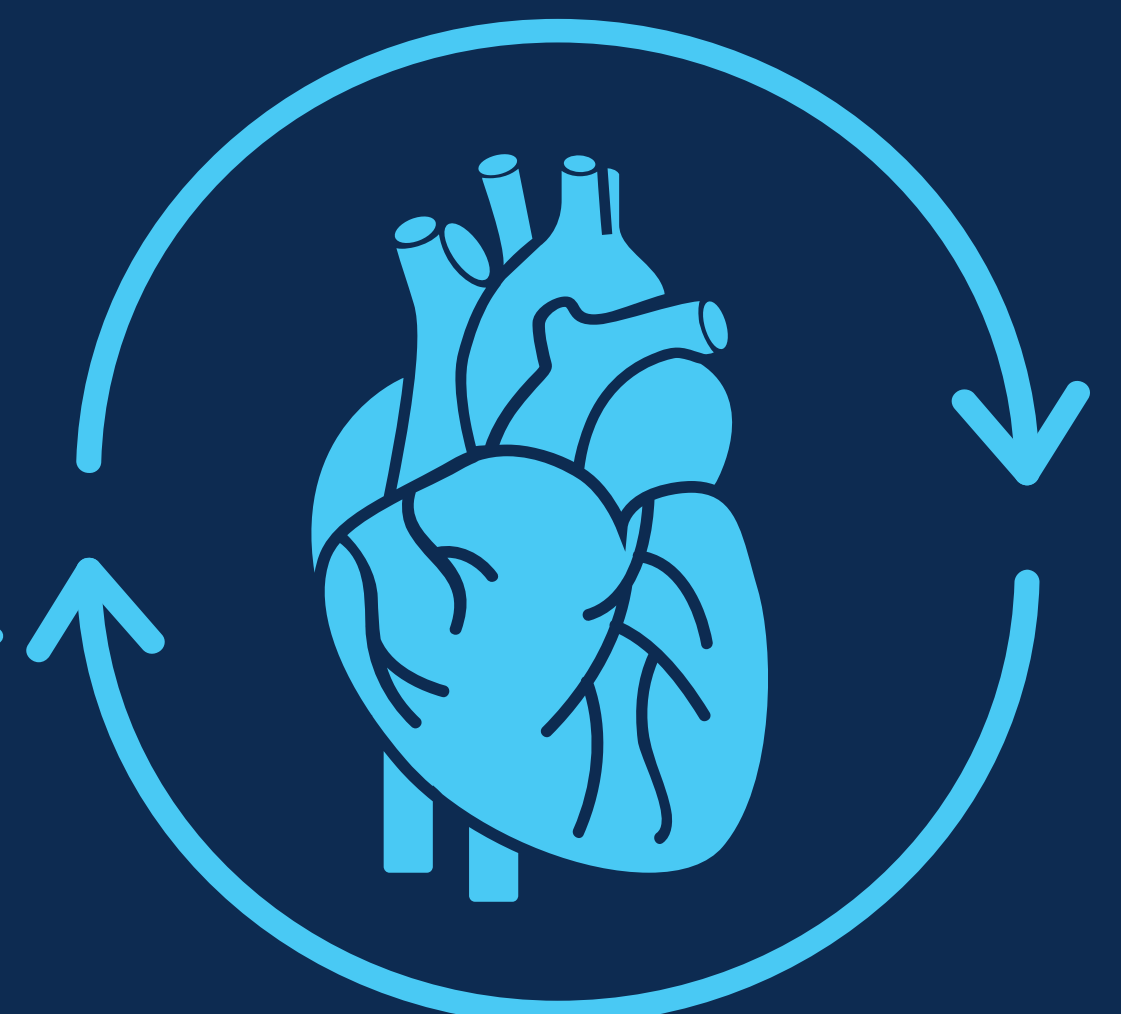
HEART TRANSPLANTATION

1967

The first successful human heart transplant performed

2018

United Network for Organ Sharing revises the long-time 3-tier heart allocation system into a 6-tier system with the goal of prioritizing the most unstable candidates and decreasing mortality



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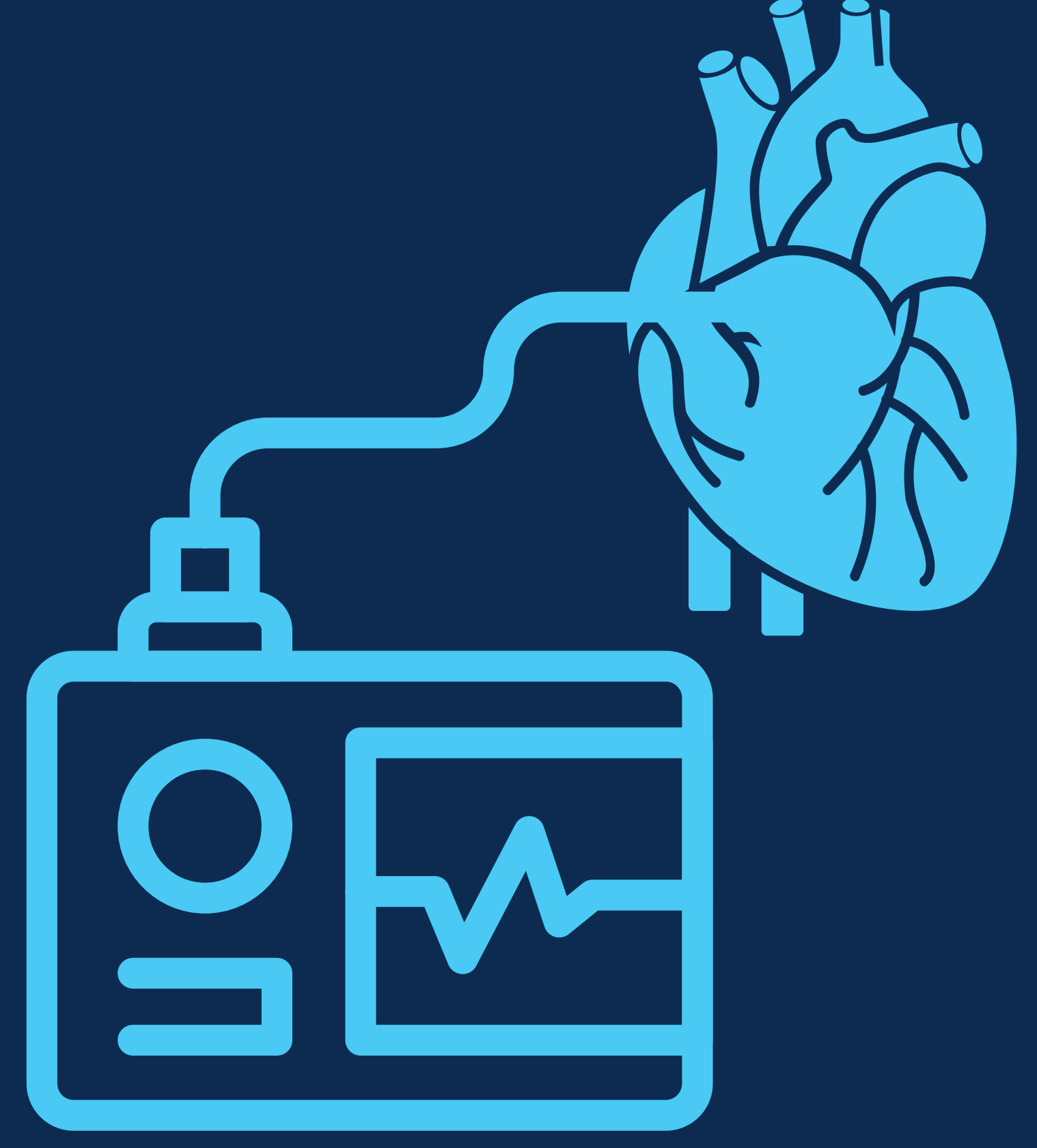
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DURABLE LEFT VENTRICULAR ASSIST DEVICE (LVAD)



1980s First implantation of left ventricular assist device (LVAD), primarily as a bridge to transplant

1990s FDA approves first LVAD for bridge to transplant

2000s Second generation LVADs approved for bridge to transplant and destination therapy

2015 FDA approves third-generation continuous-flow LVADs

2020s Normothermic machine perfusion and normothermic regional perfusion (NRP) technologies increase orthotopic heart transplant donor pool by 20%



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