

A dark blue background featuring a stethoscope and an ECG (heart rate) line. The stethoscope is positioned diagonally across the frame, with its chest piece in the center and earpieces extending towards the right. The ECG line is overlaid on a grid, with various lead labels like 'aVL', 'aVF', 'V1', 'V3', and 'F' visible. The overall aesthetic is professional and medical.

# THE UNMET NEEDS OF HEART FAILURE PATIENTS

A Virtual Town Hall Summary



PARTNERSHIP TO **ADVANCE**  
**Cardiovascular**  
**Health**

# Overview

On November 13, 2020, the Partnership to Advance Cardiovascular Health hosted a virtual town hall meeting to explore the unmet needs of heart failure patients. In addition to health care advocates and people living with heart failure, the meeting featured the following cardiovascular health experts:



**Dharmesh Patel, MD**

*President, Partnership to Advance Cardiovascular Health, Stern Cardiovascular Clinic*



**Alanna Morris, MD**

*Director of Heart Failure Services, Atlanta VA Medical Center, Assistant Professor of Medicine, Emory's Center for Heart Failure Therapy and Transplantation*



**David Lanfear, MD**

*Specialist in Advanced Heart Failure and Transplant Cardiology, Henry Ford Health System*

## Heart Failure at a Glance

After decades of improvement, the experts noted, cardiovascular progress has begun to fade.



The number of Americans dealing with heart failure is expected to grow to 8 million by 2030, increasing the total cost of care to almost \$70 billion.<sup>1</sup>



One in eight deaths from heart disease in the U.S. has heart failure as an underlying cause.<sup>2</sup>



Medicare patients with heart failure have a rate of hospitalization four times that of the general population.

This webinar acknowledged these challenges by exploring the unmet needs of heart failure patients. Among the many issues discussed during the webinar, three unmet needs in particular became apparent.

## Unmet Need #1

# Lack of Public Awareness

Although heart disease is the cause of one in four U.S. deaths,<sup>3</sup> there is a gap in public knowledge about what heart failure is, its consequences, and how to prevent it. Patients, for example, sometimes mistakenly think they've had a heart attack when in fact they have heart failure.

**“ You don't have to be old to have congestive heart failure. I have patients in their 20s, their 30s, and their 40s.”**

**-Alanna Morris, MD**

Alanna Morris, MD, pointed out that the cardiovascular community has done a good job of educating the public about

and reducing risk factors that can trigger heart attacks, such as smoking and high cholesterol. But now obesity is on the rise, Americans are more sedentary, and more people suffer from hypertension, all of which can cause heart failure.

More education is needed to teach people about the risks of sedentary lifestyles and obesity.

The public would also benefit from heightened understanding that heart failure is a progressive disease, a “silent killer.” With lifestyle changes and prevention of other chronic diseases such as hypertension, high cholesterol and diabetes, patients and providers can make significant strides toward reducing the risk of heart failure.



## Unmet Need #2

# Patient-Centered Care for Heart Failure Patients

Heart failure patients often have comorbidities and require an array of different medications. Insurance hurdles and access barriers can easily disrupt their care, increasing the risk of repeat hospitalization or worsening cardiovascular disease. Patient-centered care is important for protecting their health and achieving optimal health outcomes.



### Breakthrough Treatments

A strong research pipeline continues to expand treatment options for heart failure patients. One example is the fairly recent clinical trials showing that SGLT2 inhibitors, an effective therapy for Type 2 diabetes, can also reduce cardiovascular death and heart failure hospitalization.<sup>4</sup> Another example is omecamtiv mecarbil, which treats heart failure by improving muscle function.<sup>5</sup>

As research strengthens treatment options for high-risk patients, providers must optimize available medications to prevent and manage heart failure. David Lanfear, MD, and Dharmesh Patel, MD, both underscored the need to get heart failure patients on the right medications, in the right doses, to keep the disease under control.



### The Role of Primary Care Providers

The panelists emphasized that primary care physicians are the first line of defense, and that these providers can play a key role in connecting patients with the right medications for them.

Primary care providers are also critical to preventing heart failure, as panelists made clear. Increased education at the primary care provider level could aid these critical providers in better understanding and navigating the signs and symptoms of heart failure. Better detection of the early signs of heart failure will, in turn, allow patients to be treated more effectively and referred to a specialist in a timely manner.



### Overcoming Access Barriers

When insurers' cost-cutting measures such as non-medical switching or prior authorization make it difficult for patients to access their prescribed medicine, cardiovascular health may suffer. The virtual town hall discussion made clear that health care providers and patients – not government bureaucrats or insurance company middlemen – should make decisions about the best treatment strategy for each individual patient.



### Unmet Need #3

# Understanding Vulnerabilities

The initial period after diagnosis is an extremely vulnerable one for people with heart disease. Roughly one-fourth of heart failure patients are readmitted to the hospital within 30 days of discharge.<sup>6</sup>

Virtual town hall panelists explained that, to survive that period and resume a full life thereafter, coordinated care is essential. Patients should maintain communication with their treating physician, as well as with their primary care provider and cardiologist. It's also critical that patients adhere to the medications prescribed while they were at the hospital.

The treatment regimen a physician recommends for a newly diagnosed heart failure case will depend on the type of heart failure the patient has and possibly what caused it. This is an important time to make sure the patient receives the right medications in the right doses.

**“ You have to get back with your physician soon because there is a vulnerable period after hospitalization when you can boomerang back into the hospital or go downhill.”**

**-David Lanfear, MD**

Patients should take an active role in managing their disease by cutting down on sodium in their diet, for example, staying physically fit and faithfully following their doctor's instructions. They should also keep a list of their medications, note any changes and why they were made, and encourage the sharing of information about their condition between their primary care physician and cardiologist.





# Patient Input

To conclude the virtual town hall, two heart failure patients – Tannie Coward and Lori Wood – shared their own experiences.

Both talked about the steps they take to manage their disease, including adjusting medications when necessary and searching for accurate information about heart failure, which is not always easy to do. They said online resources could be outdated and much of the information was geared toward men, including research studies whose participants are mostly male.

An educated patient is an empowered patient, the two women made clear. Their stories underscored the complexity of heart failure and the urgent need for

more patient-centered materials to guide people living with the disease. Equipping patients with current, actionable information allows them to participate in shared decision-making with their physician. It can also encourage better health outcomes and stronger adherence to treatment.

**“ I always say, sometimes you are your best advocate.”**

**-Tannie Coward**

WomenHeart Champion

Coward and Wood are both WomenHeart Champions, trained to share their stories with other women living with heart failure.



**Lori Wood**

WomenHeart  
Champion



**Tannie Coward**

WomenHeart  
Champion



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## About the Partnership to Advance Cardiovascular Health

The Partnership to Advance Cardiovascular Health works to advance public policies and practices that result in more treatment options and improved cardiovascular health for heart patients around the world.



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