

Iron could reduce hospitalisation and help ease symptoms for people with failing hearts

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Iron supplement injections could ease the disabling symptoms of heart failure, if a clinical study – known as IRONMAN – proves successful. The trial was officially launched at the British Cardiovascular Society Conference in Manchester.

The UK-wide study, funded by a £1.7m grant from the British Heart Foundation (BHF), could determine if iron supplements can reduce hospitalisation in heart failure patients, and improve their ability to exercise without becoming breathless and fatigued. The trial is being coordinated by the University of Glasgow and Greater Glasgow and Clyde Health Board.

Over half a million people in the UK are living with heart failure, a condition where the heart muscle doesn't pump effectively. This can leave people disabled and unable to carry out everyday tasks such as climbing the stairs or walking to the shops.

The most common cause of heart failure is a heart attack, which causes irreparable damage to the heart and leads to heart failure. The condition can involve sudden worsening of symptoms, requiring hospitalisations, which are often prolonged. Living with heart failure also carries an ongoing risk of early death as well as the day-today impact of life-limiting symptoms.

There is currently no cure for heart failure and in severe cases the only available option is heart transplantation, for which there is an ever



growing waiting list and a risk of transplant rejection.

Many people with heart failure have low levels of usable iron in the blood, and this is associated with worse symptoms. Iron is vital for many processes in our bodies to work, including enabling cells to function correctly.

This clinical trial is recruiting patients across the UK who suffer from chronic heart failure and iron deficiency.

Previous smaller studies have shown that intravenous iron can be beneficial to patients with heart failure in the short term, making them feel better and increasing exercise capacity. The new study is looking at the effect of iron supplement injections on life expectancy and hospitalisation over a longer period in a much larger patient group. The researchers will recruit around 1,300 patients over 2 years across over 50 UK sites.

Dr Paul Kalra, Consultant Cardiologist from Portsmouth Hospitals NHS Trust and Honorary Senior Lecturer at the University of Glasgow who is leading the study said:

"We have already made massive progress in treatments for heart failure, but despite this outcomes remain poor. People have a poor quality of life and a shorter life expectancy.

"If successful, this British Heart Foundation-funded trial could improve <u>life expectancy</u> and quality of life in people living with heart failure."

Professor Ian Ford, Study Director from the University of Glasgow said: "Emergency admission to hospital is a common feature of heart failure and places significant burdens on the health services. Any treatment that can reduce the frequency of heart failure admissions could have



significant benefits for patients and could help to reduce NHS costs."

Professor Peter Weissberg, Medical Director at the British Heart Foundation, said:

"We are funding research into regenerative medicine to find ways to mend broken hearts, but these treatments could be 10 to 20 years away. However, this trial offers hope for a new and simple treatment that might reduce the debilitating symptoms of heart failure.

"Only by undertaking a properly conducted clinical trial such as this will we be able to determine whether iron really has lasting beneficial effects for patients in heart failure".

"The British Heart Foundation is determined to improve the lives of people affected by heart failure through our Mending Broken Hearts Appeal, which has funded over £25 million of research into heart failure since 2011. We have only been able to do this through the enormous generosity of the UK public and we hope that will continue so we can achieve our goal of beating heart failure and greatly improving people's lives."

Provided by University of Glasgow

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