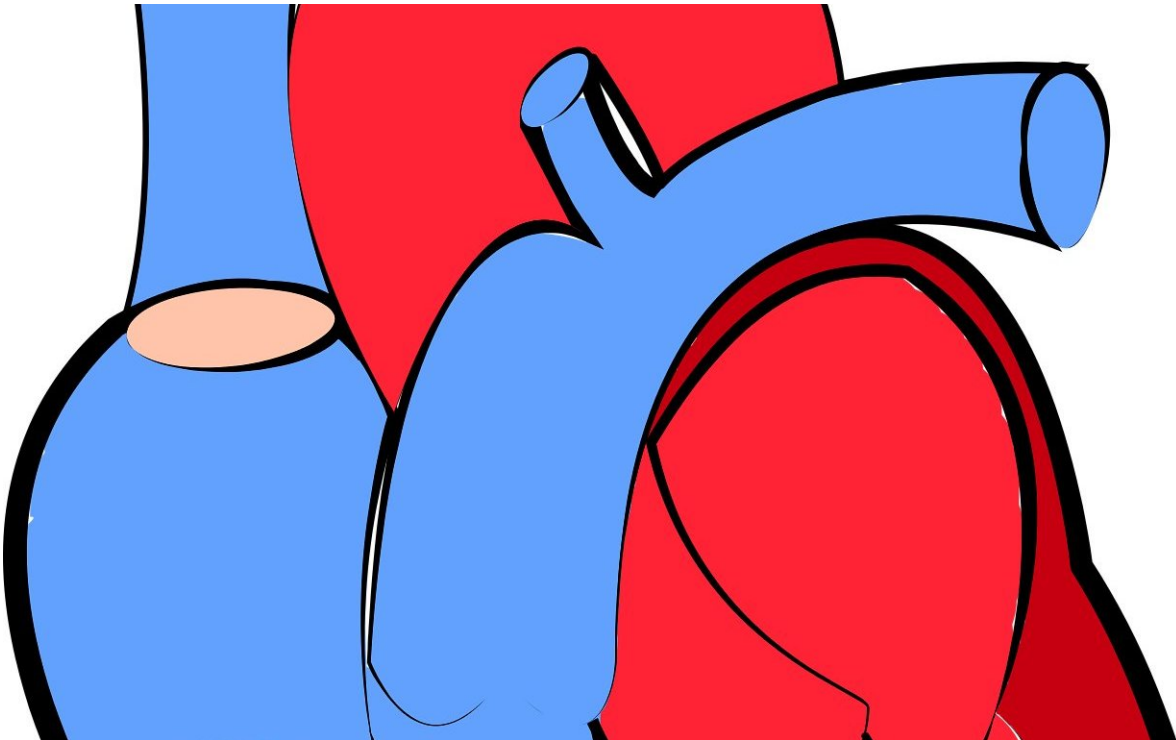


Heart failure risk factors need a closer look

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Assessing the risk of heart attack and stroke is a common practice among doctors and their patients; however, the risk factors for heart failure are not as clearly laid out or considered. A group of Baylor College of Medicine cardiologists are working together to bring awareness to the need for including heart failure risk factors in overall cardiovascular disease evaluations with the goal of preventing what could

become the most costly cardiovascular disease in the coming years.

Their commentary is published in the latest edition of *Circulation*.

Heart failure is a form of [heart](#) disease and develops gradually over time as heart muscle becomes inefficient and leads to symptoms such as shortness of breath. It can result from a [heart attack](#) (a blockage of blood flow to [heart muscle](#)) but also from many other factors such as chronic uncontrolled [high blood pressure](#).

"After the onset of symptoms of [heart failure](#), the outcome remains poor despite the advance in therapies. That is why identifying [risk factors](#) early and focusing on prevention is critical," said Dr. Vijay Nambi, staff cardiologist at the Houston Veterans Affairs Hospital and associate professor of medicine—atherosclerosis and vascular medicine at Baylor.

Nambi, who is first author on the commentary, said reviewing and mirroring successful strategies that have helped prevent [atherosclerotic cardiovascular disease](#) can help guide the efforts in preventing heart failure.

"There are risk scores to assess the risk of heart failure but they are not used regularly and are not included in the risk scores that are commonly used," he said.

Identifying certain biomarkers and advanced imaging techniques are ways to assess those at higher risk for heart failure with greater precision but the focus is more commonly on managing heart failure once it has been diagnosed rather than preventing it once risk factors have been identified.

Nambi, who also is a cardiologist with the Michael E. DeBakey VA Medical center, said more research is needed to understand exactly how

the risk factors lead to the development of heart failure and whether targeting those risk factors might prevent the onset of heart failure.

"Including heart failure along with heart attack and stroke in the overall cardiovascular risk assessment scores may help direct overall and disease specific preventive strategies," Nambi said. "If a person learns they are at higher risk for [cardiovascular disease](#), they could then try lifestyle changes to lower that risk while also being treated for disease-specific factors such as high blood pressure or high cholesterol levels."

Nambi said there is currently no specific treatment to prevent heart failure; however, focusing on identifying those who are at higher risk of this disease is a starting point. This will lead to more clinical trials specific to heart failure, resulting in the development of more aggressive treatment risk factors or novel preventative options.

"This commentary is a collaborative effort that includes those who specialize in preventative care, heart failure treatment and research. Collaboration among groups of healthcare providers and researchers is what is needed as we move forward to incorporate heart failure into preventative efforts."

More information: Vijay Nambi et al. Prevention of "Failure", *Circulation* (2018). [DOI: 10.1161/CIRCULATIONAHA.117.030645](https://doi.org/10.1161/CIRCULATIONAHA.117.030645)

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