

# 2021 European Society of Cardiology (ESC) Heart Failure Guidelines

## Key Messages



Natriuretic peptides, echocardiography, and MRI important for diagnosis of HF

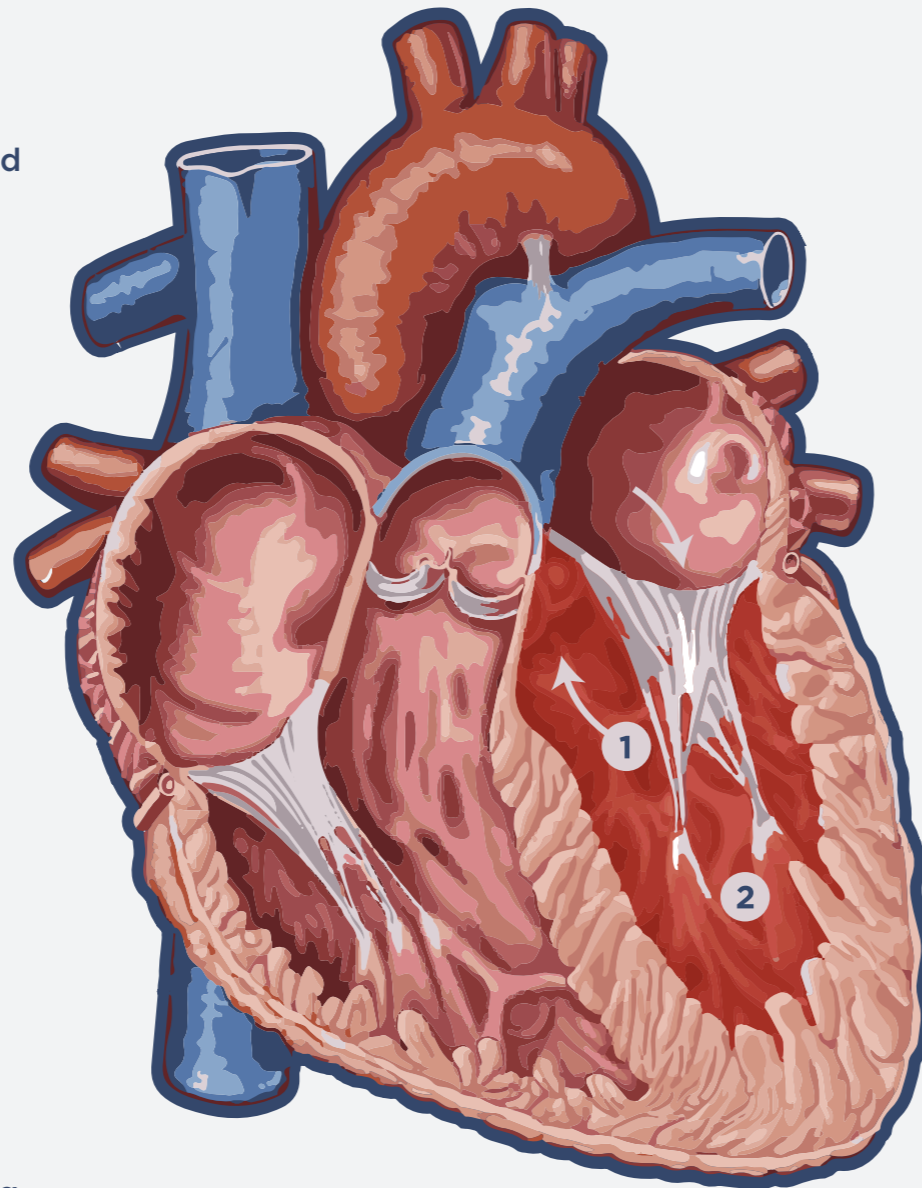


For patients with HFmrEF, ACEi or ARNi,  $\beta$ -blockers, and MRA may be considered



No specific therapies shown to reduce risk of mortality in HFpEF.


Important to diagnose and treat underlying aetiology and coexisting comorbidities.  
Diuretics recommended in congested patients



Recommended cornerstone therapies for individuals with HFpEF are ACEIs or ARNi,  $\beta$ -blockers, MRAs, and SGLT2 inhibitors

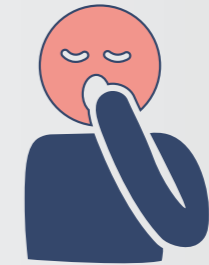


Enrolment in a multidisciplinary HF management programme recommended for all patients with HF



1 Amount of blood pumped out  
2 Amount of blood in the chamber  
HFmrEF characterised by LVEF of 41–49%

## Clinical Symptoms:



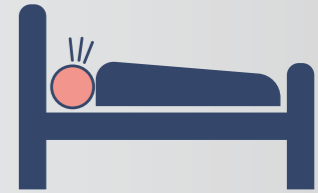
- Fatigue and lethargy



- Ankle swelling



- Dyspnoea



- Orthopnoea  
- Paroxysmal nocturnal dyspnoea

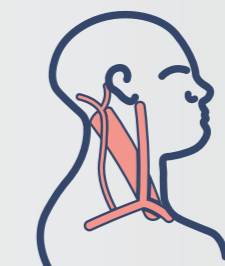
## Signs:



- Tachycardia



- Peripheral oedema



- Elevated jugular venous pressure



- Crepitations  
- S3 gallop

## Statistics

**64 M**  
cases of HF worldwide

**10 M**  
years lost because of HF-related disability

### References

1. Lippi G, Sanchis-Gomar F. Global epidemiology and future trends of heart failure. *AME Med J*. 2020;DOI:10.21037/amj.2020.03.03.
2. King M et al. Diagnosis and evaluation of heart failure. *Am Fam Physician*. 2012;85(12):1161-8.
3. McDonagh TA et al. 2021 ESC Guidelines for the diagnosis and treatment of acute and chronic heart failure. *Eur Heart J*. 2021;42(36):3599-726.
4. Shore S. 2021 ESC Guidelines for acute and chronic heart failure: key points. 2021. Available at: <https://www.acc.org/latest-in-cardiology/ten-points-to-remember/2021/08/29/18/05/2021-esc-guidelines-for-hf-esc-2021>. Last accessed: 16 March 2022.