Identification of Stage B Patients: Missed Opportunities

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Clinical Heart Failure Nomenclature

Initial Injury

Stage A
At Risk

Stage B

Remodeling

Stage C
Class I
Class II

Stage C
Class III
Class IV

INTERMACS
7 6 5 4

Stage D

INTERMACS
4 3 2 1
Figure 2. Kaplan-Meier curves for survival.

Lee R. Goldberg, and Mariell Jessup Circulation. 2006;113:2851-2860
Figure 1. ACC/AHA guidelines for the evaluation and management of chronic HF: evolution of HF and recommended therapy by stage.
## Recommendations for Treatment of Stage B HF

<table>
<thead>
<tr>
<th>Recommendations</th>
<th>COR</th>
<th>LOE</th>
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<tbody>
<tr>
<td>In patients with a history of MI and reduced EF, ACE inhibitors or ARBs should be used to prevent HF</td>
<td>I</td>
<td>A</td>
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<tr>
<td>In patients with MI and reduced EF, evidence-based beta blockers should be used to prevent HF</td>
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<td>B</td>
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<tr>
<td>In patients with MI, statins should be used to prevent HF</td>
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<td>Blood pressure should be controlled to prevent symptomatic HF</td>
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<tr>
<td>ACE inhibitors should be used in all patients with a reduced EF to prevent HF</td>
<td>I</td>
<td>A</td>
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<tr>
<td>Beta blockers should be used in all patients with a reduced EF to prevent HF</td>
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<td>C</td>
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<td>An ICD is reasonable in patients with asymptomatic ischemic cardiomyopathy who are at least 40 d post-MI, have an LVEF ≤30%, and on GDMT</td>
<td>IIa</td>
<td>B</td>
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<td>Nondihydropyridine calcium channel blockers may be harmful in patients with low LVEF</td>
<td>III: Harm</td>
<td>C</td>
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