



BRIGHAM AND
WOMEN'S HOSPITAL

| Heart & Vascular Center |

Chronic Heart Failure: Guideline Driven Care Case Discussion

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A Case

A 65 year old woman with coronary heart disease, previous CABG, atrial fibrillation, previous ICD implantation, and EF 30% presents for routine follow up after recent hospitalization for decompensated heart failure. Since discharge she is feeling better, but remains short of breath with moderate exertion such as walking up an incline.

Her current medications include aspirin 81 mg daily, metoprolol succinate 200 mg daily, valsartan 160 mg bid, spironolactone 25 mg daily, rivaroxaban 20 mg daily, and furosemide 40 mg daily.

On exam her BP is 105/75 mm Hg and HR is 55 bpm. Jugular venous pressure is 7 cm H2O, Chest is clear to auscultation, abdomen is soft without hepatomegaly, and extremities are warm without edema.

ECG reveals atrial fibrillation with ventricular rate 75 bpm evidence of old inferior MI.

Question

Which of the following is the most appropriate intervention?

- A. Add ivabradine 5 mg twice daily**
- B. Add rosuvastatin 40 mg daily**
- C. Replace valsartan with sacubitril/valsartan 49/51 mg bid**
- D. Add digoxin 0.125 mg daily**
- E. Exchange metoprolol succinate for carvedilol 12.5 mg bid**
- F. Make no changes**

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Thank You!



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