

Abstract No. **37**

Category: **Heart Failure and Cardiomyopathies**

Title: **Clinical Outcome of Uptitration of Renin-Angiotensin-Aldosterone Inhibitors and Beta-blockers in Patients With Heart Failure With Reduced Ejection Fraction**

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Abstract:

Background: Multiple trials have shown that renin angiotensin aldosterone system inhibitors (RAASI) and beta-blockers reduce the risk of mortality and hospitalization in patients with heart failure with reduced ejection fraction (HFREF). However, in clinical practice, there is a small number of patients reaching the same doses studied in trials

Methods: Through a prospective study, we identified patients with HFREF, in our Heart Failure Clinic (of our Hospital Dr. Arnulfo Arias Madrid) between February and August 2017, and we followed them until November 2018. High doses were defined as equal to, or greater than 50%; and low doses as less than 50%, for both RAASI and beta-blockers.

Results: we identified 54 patients; 35.8% reached high doses of RAASI and 37.7% achieved high doses of beta-blockers. Heart failure (HF) hospitalization rate in high-dose versus low-dose RAASI group was 0% versus 25% (p: 0.024), and 0% versus 27.3% in high-dose versus low-dose beta-blocker group (p: 0.010).

Conclusions: Management with high doses of RAASI and beta blockers reduces the risk of HF hospitalization in patients with HFREF, compared with low doses.