

# 2023 Focused Update of the 2021 ESC Guidelines for the Diagnosis and Treatment of Acute and Chronic Heart Failure

## Recommendations for the management of iron deficiency in patients with heart failure

Recommendations	COR	LOE
Intravenous iron supplementation is recommended in symptomatic patients with HFrEF and HFmrEF, and iron deficiency, to alleviate HF symptoms and improve quality of life.	I	A
Intravenous iron supplementation with ferric carboxymaltose or ferric derisomaltose should be considered in symptomatic patients with HFrEF and HFmrEF, and iron deficiency, to reduce the risk of HF hospitalization.	IIa	A

# Patients Prefer Quality of Life

## The Impact of Heart Failure on Patients and Caregivers: A Qualitative Study

*“Because the physical symptoms of HF can be so debilitating and incapacitating, several patient-preference studies have shown that HF patients value symptom stabilization or improvement (especially with respect to dyspnea, fatigue, and physical functioning) over outcomes such as hospitalization and increased risk of mortality.”*

# Definition of Iron Deficiency in Patients with Heart Failure

Study Name	ESC Current Definition	IRONMAN
Diagnosis	Acute HF (EF < 50%)	Chronic HF ( $\leq$ 45%)
Definition of Iron Deficiency	Serum ferritin <100 ng/mL or serum ferritin 100-299 ng/mL with TSAT <20%	Transferrin saturation (TSAT) <20% and/or ferritin <100 ug/L
Study Arm	Ferric carboxymaltose	Ferric derisomaltose

# Select Large and/or Ongoing HFrEF Trials

Study Name	AFFIRM-AHF	IRONMAN	HEART-FID	FAIR-HF-2
# of Patients	1,132	1,300	3,014	1,200
Diagnosis	Acute HF EF < 50%	Chronic HF EF < 45%	Chronic HF EF ≤ 40%	Chronic HF EF ≤ 45%
Blinding	Double blind	Open label	Double blind	Double blind
Study Arm	<b>Ferric carboxymaltose</b>	<b>Ferric derisomaltose</b>	<b>Ferric carboxymaltose</b>	<b>Ferric carboxymaltose</b>
Duration	52 weeks	120 weeks	Event driven + 12 mos last patient	Event driven + at least 12 mos f/u
Primary Endpoint	HF hospitalizations + CV death	CV death or HF hospitalizations	All-cause mortality + total HF hospitalizations through 12 mos and 6- month 6MWD	HF hospitalizations + CV death
Anticipated Completion Date	<b>Completed</b>	<b>Completed</b>	<b>Completed</b>	<b>May 2024</b>

# Quote by Marco Metra, MD

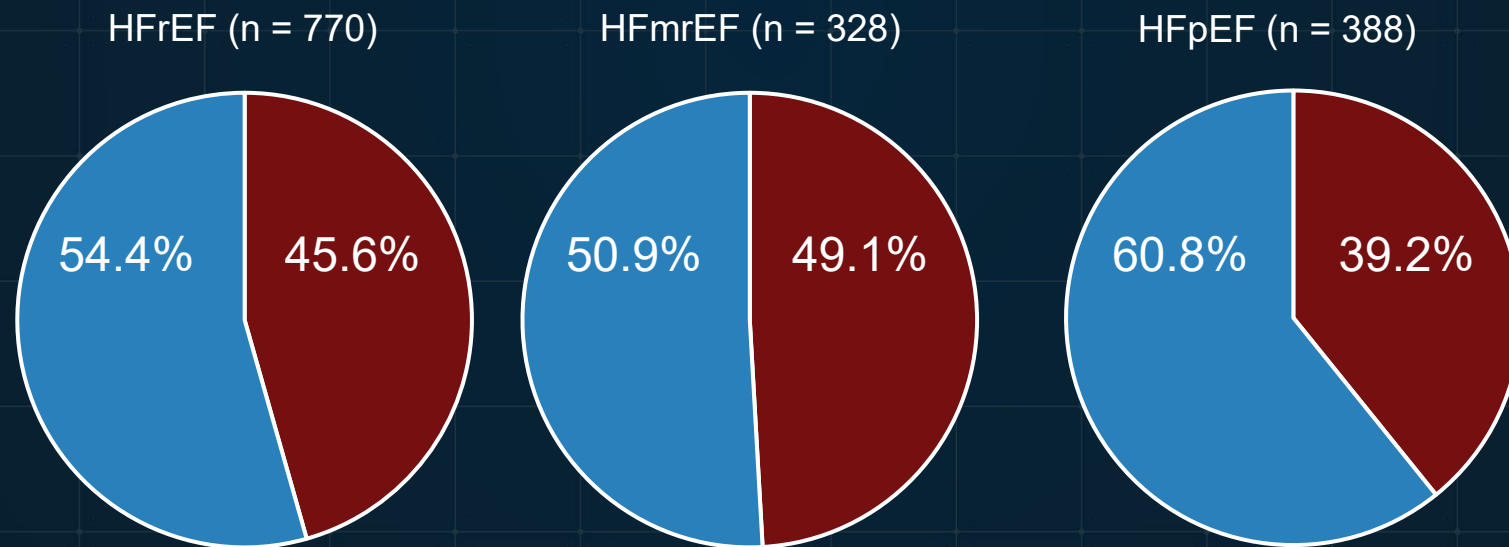
“...treat iron deficiency in patients with heart failure to improve symptoms and quality of life and to reduce heart failure hospitalizations.”

# High Prevalence of Iron Deficiency in Patients with Chronic Heart Failure Across the EF Spectrum

ID prevalence 55% overall –  
Highest in HFpEF

Overall (n = 1,486)

ID+  
ID-



AHF, acute heart failure; EF, ejection fraction; HFmrEF, heart failure with mildly reduced ejection fraction; HFpEF, heart failure with preserved ejection fraction; HFrEF, heart failure with reduced ejection fraction; ID, iron deficiency.

Lindberg F, et al. *Eur J Heart Fail.* 2023;25(8):1270-1280.

# Quote by Gianluigi Savarese, MD

We should  
screen,  
diagnose,  
treat.

# Take Home Message Quote by Giuseppe Rosano, MD

“It is important to have this update of the guidelines, but what also is important is that these recommendations are in keeping with the new data that have emerged.”