

### Transcript Details

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## The Importance of Making an Accurate and Timely Heart Failure Diagnosis

### Announcer:

You're listening to ReachMD. This medical industry feature is titled "The Importance of Making an Accurate and Timely Heart Failure Diagnosis." Here is your guest, Dr. Pam Kushner.

### Dr. Kushner:

Welcome everyone. My name is Dr. Pam Kushner, I am a clinical professor at the University of California at Irvine Medicine Center, a clinical trialist, past chair of the American Academy of Family Physicians Drugs and Device Committee and a Family Medicine Doc with a private practice in Long Beach, California. Thank you for listening today to the fourth podcast in our heart failure series. Last time, you heard my colleague Dr. Nancy Albert discuss disease state awareness surrounding heart failure. Today, we will discuss how clinicians can accurately detect and diagnose heart failure.

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Today we are going to review the factors that are important to evaluate when detecting and diagnosing heart failure in patients.

Clinicians need disease state awareness in order to make an accurate heart failure diagnosis. An accurate heart failure diagnosis involves 3 components: assessing symptoms, performing a physical examination, and executing diagnostic tests.

Let's first outline the symptoms of heart failure. They include breathlessness, reduced exercise tolerance, fatigue, paroxysmal nocturnal dyspnea, swelling and orthopnea. The symptoms of heart failure may be constant or infrequent and may range from mild to severe. Having a suspicion of heart failure is always paramount, which is why we want to recognize the coexisting risk factors and comorbidities with all symptoms.

Next, let's discuss the signs that physicians often observe during examination of a patient with heart failure. When performing a physical exam, physicians often observe edema, especially in the lower extremities; pulmonary rales; distention of jugular veins; hepatojugular reflex; and abnormal or displaced heart sounds. These are all classic physical symptoms of heart failure.

I also mentioned that diagnostic tests are important to definitively diagnose heart failure.

Clinical diagnostics include performing a chest x-ray and echocardiograph to monitor heart structure and function. Laboratory diagnostic tools include measuring levels of natriuretic peptides, such as B-type natriuretic peptide, or BNP, and N-terminal-proBNP, known as NT-proBNP. These peptides are released in response to changes in pressure inside the heart. For patients in the outpatient setting without acute symptoms, the recommended cutoff values are greater than or equal to 35 picograms per milliliter for BNP and 125 picograms per milliliter for NT-proBNP. These cutoffs are a bit higher in patients with decompensated heart failure exhibiting acute symptoms, where the cutoffs are greater than or equal to 100 picograms per milliliter for BNP and greater than or equal to 300 picograms per milliliter for NT-pro-BNP. We need to note that NT-proBNP levels can be influenced by various clinical factors, including but not limited to, obesity and renal impairment, and therefore, each assessment should be individualized.

It is less important whether a clinician orders a BNP or an NT-proBNP test, but it is important to remain consistent in testing. The value of variability in the individual can be helpful as a baseline to help differentiate between an acute or chronic episode of heart failure.

I think many clinicians will agree that several challenges exist in diagnosing heart failure because patients may present with nonspecific

symptoms or may have comorbidities—such as kidney impairment, cirrhosis, lung issues, or lymphedema—that can mimic heart failure symptoms.

Additionally, some diagnostic measurements may appear normal even when heart failure is present. For example, obese patients tend to have lower circulating levels of BNP, even when in heart failure, which may result in them being sent home without a proper diagnosis. It is important for healthcare providers to also assess symptoms and perform a detailed physical examination to make an accurate heart failure diagnosis.

Thank you all for joining me today.

As we have discussed, there are several important things to consider when making an accurate heart failure diagnosis. These are vital for healthcare professionals to understand to develop individualized treatment plans and slow disease progression.

I hope you'll join my colleague Dr. Steven Green for the next chapter in our heart failure podcast series. He will discuss the guidelines for medical therapy in treating patients with heart failure.

**Announcer:**

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