RESPONDER-HF Trial

Patient Identification Tip Card

Atrial shunt therapy for HF patients with EF ≥40%

KEY PATIENT CHARACTERISTICS

- Age ≥ 40 years old
- NYHA Class II, III, or ambulatory IV HF with:
  - ≥1 HF hospitalization, IV or ↑ oral diuretics (past 12m); OR
  - Normal or modestly elevated BNP / NT-proBNP (past 6m)
- Ongoing stable HF GDMT & comorbidity management
- Echocardiographic evidence of diastolic dysfunction
- BMI <45 kg/m^2

NO current/history of the following:

- Implanted pacemaker, ICD, or CRT
- Hemodynamically significant valve disease
  (≥3+ MR, >mild MS, grade ≥2+ TR, ≥2+ AR, >moderate AS)
- Stroke, TIA, DVT or PE (past 6m)
- RV dysfunction >mild or TAPSE <1.4 cm
- On dialysis or eGFR <25ml/min/1.73 m^2

NOTE: Invasive hemodynamic evaluation required to determine trial eligibility

For more information please contact:

COMMON SIGNS THAT EXERTIONAL DYSPNEA IS DUE TO HFpEF
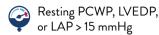
Resting PCWP, LVEDP, or LAP > 15 mmHg

Chart notes include: "shortness of breath", "heart failure", "fluid overload", "diuresis", "edema"

LA enlargement
Septum bowing into RA
LV hypertrophy

H_2FPEF Score of **3+** (see below)

H_2FPEF SCORING MODEL[1]
Sum points to identify HFpEF among patients with exertional dyspnea.

	Clinical Variable	Values	Points
H_2	**H**eavy	Body mass index > 30 kg/m^2	+2
	Hypertensive	On > 2 anti-hypertensives	+1
F	Atrial **F**ibrillation	Paroxysmal or Persistent AF	+3
P	**P**ulmonary Hypertension	RVSP > 35 mmHg	+1
E	**E**lder	Age > 60 years	+1
F	**F**illing Pressure	E/e′ > 9	+1

A score of	3	4	5	6+
Indicates a HFpEF probability of	>50%	>70%	>80%	>90%

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1. Reddy YNV, et al. *Circulation*. 2018;138(9):861-870.