

## *HEART FAILURE*

Chronic heart failure is one of the most frequent illnesses in the elderly. Particularly endangered are older patients with long-existing hypertension, those who have had heart attacks or have coronary heart disease, strokes or diabetes mellitus.

Heart failure exists when the pumping capacity of the heart is impaired to such an extent that the body is no longer adequately supplied with blood – and consequently with nutrients and oxygen – on physical effort or, in severe cases, even at rest. Heart failure is a progressive and thus chronic disease, which frequently develops slowly and initially without symptoms. In comparison with healthy hearts, the pump capacity of the heart in chronic failure falls from 5.0 liters cardiac output per minute to 3.5 liters or less. There are three forms of heart failure: right heart failure, left heart failure and global heart failure, in which both ventricles are affected. The most frequently encountered is left heart failure.

The prognosis for heart failure is unfavorable. Only 50 percent of patients who suffer severe chronic heart failure survive for more than four years. If the disease is far advanced, a heart transplant is often the last resort. Heart failure is therefore comparable with cancer and can be referred to as a malignant disease.

Prevention is therefore all the more important, since there are various highly active medicaments available which can maintain the performance of the heart and prevent the development of the disease or at least delay it. Treatment is all the more successful, the earlier treatment is started. A prerequisite is timely diagnosis, since successful prophylaxis requires that the disease be recognised before it gives rise to symptoms such as breathlessness, edema, chronic fatigue, physical weakness etc.

For this reason, all persons who belong to risk groups for heart failure should have their cardiovascular function checked. Particularly at risk are those aged over 55 years who have additional risk factors such as coronary heart disease, heart attack or stroke, hypertension or diabetes mellitus.

In recent years, a laboratory test for the detection of heart failure has been developed. It is now possible to recognise with a high degree of reliability whether there is the danger of heart failure or whether it can be excluded. On the one hand, the existence of a functional disorder of the heart requiring treatment can be ruled out and, on the other, a stress situation of the heart can already be detected before the disease actually develops. In this case, a simple, non-stressful tablet treatment can provide effective prevention.

With the new laboratory test from Roche Diagnostics, the Elecsys proBNP test, a peptide that is formed during stress situations in the heart is determined in the blood. For this, only a small tube of blood is required. The blood collection can be carried out by the doctor without special preparation of the patient, at any time of day. A negative test result means that at present there is no treatment-requiring limitation of the cardiovascular function. A positive test, on the other hand, requires further clarification by the doctor and, if necessary, a cardiologist, even if there are no symptoms as yet. The doctor can then prescribe the most suitable prophylactic treatment.

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