How Four Drugs Beat Heart Failure

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KEY TAKEAWAYS

- Quadruple therapy (ARNi + beta-blocker + MRA + SGLT2i) reduces CV death/hospitalisation by ~73% vs placebo in HFrEF
- SGLT2 inhibitors carry Class I, Level A recommendation in HFrEF regardless of diabetes status
- STRONG-HF: rapid co-initiation at low doses with early follow-up outperforms slow sequential titration
- Clinical inertia - not evidence gaps - is the primary barrier to optimal HFrEF management

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