

Managing Acute Heart Failure And Cardiogenic Shock

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KEY TAKEAWAYS

- ° High-dose IV diuretics targeting full decongestion (NTproBNP trending down, less than 1000 pg/mL at discharge) reduces readmission
- ° STRONG-HF: rapid GDMT initiation during/after ADHF with early close follow-up reduces 180-day death and readmission
- ° DanGer Shock 2024: early Impella in MI cardiogenic shock improves 180-day survival; timing is critical - early beats late escalation
- ° CardioMEMS remote PA pressure monitoring reduces HF hospitalisation by 37% in NYHA Class III (CHAMPION)

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REFERENCES

1. Felker GM et al. DOSE. N Engl J Med. 2011;364:797-805
2. Mebazaa A et al. STRONG-HF. Lancet. 2022;400:1938-1952
3. Thiele H et al. IABP-SHOCK II. N Engl J Med. 2012;367:1287-1296
4. Moller JE et al. DanGer Shock. N Engl J Med. 2024;390:1304-1315
5. Abraham WT et al. CHAMPION. Lancet. 2011;377:658-666

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