Semaglutide For Obese Heart Failure Patients

Written by The Life Science Feed Editorial Team · Published 1 June 2026 · Edited by James Carter

KEY TAKEAWAYS

- Obesity is causal in HFpEF via epicardial fat - directly drives cardiac inflammation and fibrosis
- STEP-HFpEF: semaglutide improved KCCQ +16 pts, 6MWD +21m, weight -13.3% vs placebo; Class IIa ESC recommendation
- SGLT2 inhibitors and GLP-1 agonists are mechanistically complementary in HFpEF
- Metabolic cardiomyopathy paradigm: treating the systemic environment, not just the haemodynamics

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