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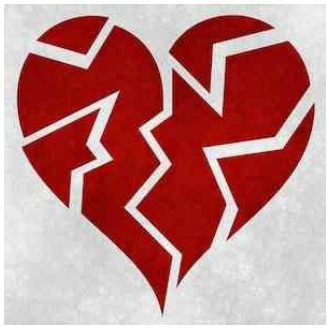
New Heart Failure Therapy Increases Life Expectancy



According to new research from Brigham and Women's Hospital, heart patients with reduced ejection fraction and treated with sacubitril-valsartan can have increased life expectancy of one and a half to two years as compared to those who are treated with enalparil. The findings are published in the *New England Journal of Medicine*.

Heart failure is the leading cause of hospitalisation for Americans over the age of 65. Approximately one million hospitalisations in the US are due to this condition. Of the six million Americans who have heart failure, approximately half have reduced ejection faction putting them at a greater risk for further cardiac events and death.

During this analysis, the researchers examined data from 8,399 patients in the PARADIGM-HF study, the largest study of its kind in heart failure. They measured the estimated lifetime benefits of treatment with sacubitril-valsartan and derived expected survival times by using data from the start of the study and the age at the time the cardiovascular event took place. The duration of event-free survival was also estimated using long-term follow up data.

The analysis showed that the benefits of sacubitril-valsartan were similar across a wide range of ages. In particular, patients within the age group of 45-75 years had a projected benefit of one to two years of increased life expectancy, free from heart failure hospitalisation as compared to patients who were treated with enalapril.

"These results help both patients and their physicians understand the impact of switching from the standard of care to sacubitril-valsartan, in terms of a benefit that they can easily understand," said Scott D. Solomon, MD, senior author and director of Non-Invasive Cardiology at Brigham and Women's Hospital (BWH) and Professor of Medicine at Harvard Medical School. "Patients want to know how much longer they are going to live, rather than how much their risk will be reduced."

Source: New England Journal of Medicine

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