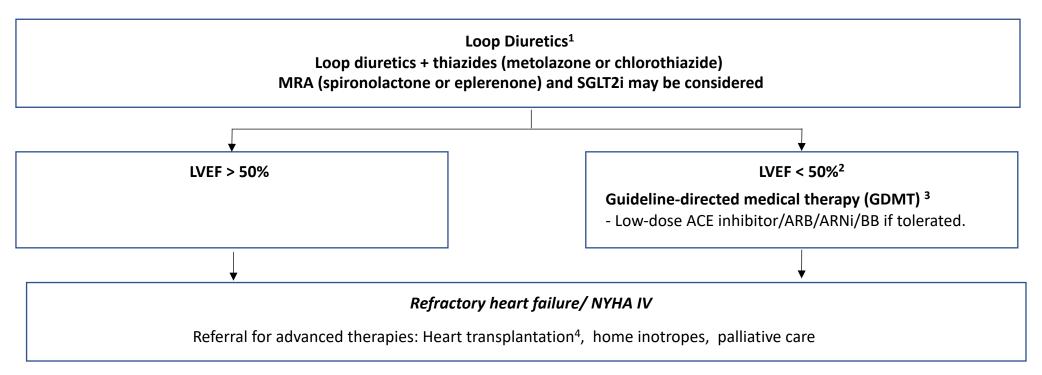


Treatment of Heart Failure in AL amyloidosis



¹Loop diuretics with higher bioavailability (torsemide or bumetanide) are recommended.

² Defibrillators can be considered in LVEF < 35%, but the benefit is unknown for primary prevention.

³Guideline-directed medical therapy (GDMT) can worsen orthostatic hypotension, fatigue and dyspnea. *GDMT is often poorly tolerated, and intolerance is associated with worse outcomes.*

⁴ Patient selection for transplantation is multidisciplinary and individualized. Contraindications for transplantation include: partial or no hematological response, multiorgan involvement, severe peripheral or autonomic dysfunction, GI involvement with malabsorption and malnutrition.

ACE, angiotensin-converting enzyme inhibitor; ARB, angiotensin receptor blocker; ARNi, angiotensin receptor/neprilysin inhibitor; ATTR, transthyretin amyloidosis; BB, beta blocker; MRA, mineralocorticoid receptor antagonists; LVEF, left ventricular ejection fraction; NYHA, New York Heart Association; SGLT2i, sodium/glucose cotransporter-2 inhibitors.