

## Online-Appendix

### Aktuelle Empfehlungen für die Praxis

Wallner M\*, Zhouc Q\*, Wieser M, Zirlik A, Mohacsi P

\*Geteilte Erstautorschaft

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**Tabelle S1: Symptome und Zeichen der Herzinsuffizienz** (aus: McDonagh TA, Metra M, Adamo M, Gardner RS, Baumbach A, Böhm M, et al. 2021 ESC Guidelines for the diagnosis and treatment of acute and chronic heart failure. Eur Heart J. 2021;42(36):3599–726. © the European Society of Cardiology 2021; Nachdruck mit freundlicher Genehmigung von John Wiley & Sons - Books, Genehmigung vermittelt durch Copyright Clearance Center, Inc.)

**Table 6** Symptoms and signs typical of heart failure

Symptoms	Signs
Typical	More specific
Breathlessness	Elevated jugular venous pressure
Orthopnoea	Hepatojugular reflux
Paroxysmal nocturnal dyspnoea	Third heart sound (gallop rhythm)
Reduced exercise tolerance	Laterally displaced apical impulse
Fatigue, tiredness, increased time to recover after exercise	
Ankle swelling	

**Tabelle S2: Grenzwerte von natriuretischen Peptiden** (aus: Mueller C, McDonald K, de Boer RA, Maisel A, Cleland JGF, Kozuharov N, et al. Heart Failure Association of the European Society of Cardiology practical guidance on the use of natriuretic peptide concentrations. Eur J Heart Fail. 2019;21(6):715–31. © 2019 The Authors. European Journal of Heart Failure © 2019 European Society of Cardiology; Nachdruck mit freundlicher Genehmigung von John Wiley & Sons - Books, Genehmigung vermittelt durch Copyright Clearance Center, Inc.)

**Table 2 Recommended natriuretic peptide cut-offs for acute heart failure diagnosis<sup>a 1,12,16,39</sup>**

	Cut-off levels (pg/mL)					
	NT-proBNP			BNP		
	Age < 50	Age 50–75	Age > 75	Age < 50	Age 50–75	Age > 75
<b>Acute setting, patient with acute dyspnoea</b>						
HF unlikely	<300			<100		
'Grey zone'	300–450	300–900	300–1800	100–400		
HF likely	>450	>900	>1800	>400		
<b>Non-acute setting, patient with mild symptoms</b>						
HF unlikely	<125			<35		
'Grey zone'	125–600			35–150		
HF likely	>600			>150		

BNP, B-type natriuretic peptide; HF, heart failure; NT-proBNP, N-terminal proBNP.

<sup>a</sup> Consider reducing the cut-off levels in obese patients by 50%.

**Tabelle S3: Medikamente und Dosierung** (aus: McDonagh TA, Metra M, Adamo M, Gardner RS, Baumbach A, Böhm M, et al. 2021 ESC Guidelines for the diagnosis and treatment of acute and chronic heart failure. Eur Heart J. 2021;42(36):3599–726. © the European Society of Cardiology 2021; Nachdruck mit freundlicher Genehmigung von John Wiley & Sons - Books, Genehmigung vermittelt durch Copyright Clearance Center, Inc.)

**Table 8 Evidence-based doses of disease-modifying drugs in key randomized trials in patients with heart failure with reduced ejection fraction**

	Starting dose	Target dose
<b>ACE-I</b>		
Captopril <sup>a</sup>	6.25 mg <i>t.i.d.</i>	50 mg <i>t.i.d.</i>
Enalapril	2.5 mg <i>b.i.d.</i>	10–20 mg <i>b.i.d.</i>
Lisinopril <sup>b</sup>	2.5–5 mg <i>o.d.</i>	20–35 mg <i>o.d.</i>
Ramipril	2.5 mg <i>b.i.d.</i>	5 mg <i>b.i.d.</i>
Trandolapril <sup>a</sup>	0.5 mg <i>o.d.</i>	4 mg <i>o.d.</i>
<b>ARNI</b>		
Sacubitril/valsartan	49/51 mg <i>b.i.d.</i> <sup>c</sup>	97/103 mg <i>b.i.d.</i>
<b>Beta-blockers</b>		
Bisoprolol	1.25 mg <i>a.d.</i>	10 mg <i>a.d.</i>
Carvedilol	3.125 mg <i>b.i.d.</i>	25 mg <i>b.i.d.</i> <sup>e</sup>
Metoprolol succinate (CR/XL)	12.5–25 mg <i>o.d.</i>	200 mg <i>a.d.</i>
Nebivolol <sup>d</sup>	1.25 mg <i>a.d.</i>	10 mg <i>a.d.</i>
<b>MRA</b>		
Eplerenone	25 mg <i>o.d.</i>	50 mg <i>a.d.</i>
Spiroglactone	25 mg <i>o.d.</i> <sup>f</sup>	50 mg <i>a.d.</i>
<b>SGLT2 inhibitor</b>		
Dapagliflozin	10 mg <i>o.d.</i>	10 mg <i>a.d.</i>
Empagliflozin	10 mg <i>o.d.</i>	10 mg <i>a.d.</i>
<b>Other agents</b>		
Candesartan	4 mg <i>o.d.</i>	32 mg <i>a.d.</i>
Losartan	50 mg <i>o.d.</i>	150 mg <i>a.d.</i>
Valsartan	40 mg <i>b.i.d.</i>	160 mg <i>b.i.d.</i>
Ivabradine	5 mg <i>b.i.d.</i>	7.5 mg <i>b.i.d.</i>
Vericiguat	2.5 mg <i>a.d.</i>	10 mg <i>a.d.</i>
Digoxin	62.5 µg <i>o.d.</i>	250 µg <i>a.d.</i>
Hydralazine/ Isosorbide dinitrate	37.5 mg <i>t.i.d.</i> /20 mg <i>t.i.d.</i>	75 mg <i>t.i.d.</i> /40 mg <i>t.i.d.</i>

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