

Just in time

<b>Questions from Heart Failure lecture attendees, answers provided by Dr. Chet Patel</b>	
<b>Question</b>	Is Ivabradine indicated for use in conjunction with other medications or in place of any of current therapy?
<b>Answer</b>	Indication is primarily for use as an adjunct to therapies and when heart rate remains elevated despite the use of blockers.
<b>Question</b>	Is echocardiogram required to distinguish HFpEF from HFrEF?
<b>Answer</b>	Yes. The echocardiogram will show whether the left ventricular ejection fraction is reduced to distinguish between the two diagnoses.
<b>Question</b>	Is one of the medications you mention (Ivabradine or Entresto) better than the other?
<b>Answer</b>	They have not been studied in comparison and would likely be used in slightly different patient populations.
<b>Question</b>	What is the criteria (when) to initiate the use of Entresto?
<b>Answer</b>	Entresto can be used in place of ace inhibitors or angiotensin receptor blockers for patients with heart failure (reduced ejection fraction) and NYHA class II or III symptoms. Patients who tolerate ace inhibitors and angiotensin receptor blockers from a blood pressure standpoint are the easiest to transition.