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Guidelines

Summary of the 2016 ESC Position Paper on cancer treatments and cardiovascular toxicity developed under the auspices of the ESC Committee for Practice Guidelines

Prepared by the Czech Society of Cardiology[☆]

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ABSTRACT

Advances in cancer treatment have led to improved survival but have also increased morbidity and mortality due to direct side-effects of the treatment on cardiovascular function. This document reviews the different steps in cardiovascular monitoring and decision-making before during and after cancer treatment with potential cardiovascular side-effects.

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Abbreviations: CVD, cardiovascular disease; HER2, human epidermal growth factor receptor 2; HF, heart failure; T-DM1, trastuzumab, pertuzumab, trastuzumab-emtansine; TKI, lapatinib; LV, left ventricular; ACE, angiotensin-converting enzyme (ACE) inhibitors; VEGF, vascular endothelial growth factor; LVEF, left ventricular ejection fraction; MI, myocardial infarction; ECG, electrocardiography; CTRCD, cancer therapeutics-related cardiac dysfunction; CMR, cardiovascular magnetic resonance; CAD, coronary artery disease; ARB, angiotensin II receptor blockers; VTE, venous thromboembolism; LMWH, low molecular weight heparin; VKA, vitamin K antagonist; INR, international normalized ratio; NOAC, non-VKA oral anticoagulant; VHD, valvular heart disease; PAD, peripheral artery disease; BNP, B-type natriuretic peptide.

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Cardio-oncology
Myocardial dysfunction
Arrhythmias ischaemia
Early detection
Surveillance
Cancer therapy



ČESKÁ KARDIOLOGICKÁ SPOLEČNOST
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