

EXPERT CONSENSUS DECISION PATHWAY

2017 ACC Expert Consensus Decision Pathway for Optimization of Heart Failure Treatment: Answers to 10 Pivotal Issues About Heart Failure With Reduced Ejection Fraction

A Report of the American College of Cardiology Task Force on Expert Consensus Decision Pathways

Heart Failure Pathway Writing Committee

Clyde W. Yancy, MD, MSc, MACC, *Chair*
 James L. Januzzi, Jr, MD, FACC, *Vice Chair*

Larry A. Allen, MD, MHS, FACC
 Javed Butler, MD, MBA, MPH, FACC
 Leslie L. Davis, PhD, RN, ANP-BC
 Gregg C. Fonarow, MD, FACC
 Nasrien E. Ibrahim, MD, FACC

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 Thomas M. Maddox, MD, MSc, FACC
 Frederick A. Masoudi, MD, MSPH, FACC
 Shweta R. Motiwala, MD
 J. Herbert Patterson, PHARM D
 Mary Norine Walsh, MD, FACC
 Alan Wasserman, MD, FACC

Task Force on Expert Consensus Decision Pathways

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 Karol E. Watson, MD, FACC
 Dharam Kumbhani, MD, SM, FACC
 Barbara S. Wiggins, PHARM D, FACC

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This document was approved by the American College of Cardiology Clinical Policy Approval Committee in November 2017.

The American College of Cardiology Foundation requests that this document be cited as follows: Yancy CW, Januzzi JL Jr, Allen LA, Butler J, Davis LL, Fonarow GC, Ibrahim NE, Jessup M, Lindenfeld J, Maddox TM, Masoudi FA, Motiwala SR, Patterson JH, Walsh MN, Wasserman A. 2017 ACC expert consensus decision pathway for optimization of heart failure treatment: answers to 10 pivotal issues about heart failure with reduced ejection fraction: a report of the American College of Cardiology Task Force on Clinical Expert Consensus Decision Pathways. *J Am Coll Cardiol* 2017;71:XXX-xxxx.

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5. DESCRIPTION AND RATIONALE:**ANSWERS TO 10 PIVOTAL ISSUES IN HF**

1. How to Initiate, Add, or Switch to New Evidence-Based Guideline-Directed Therapy for HFrEF ■
2. How to Achieve Optimal Therapy Given Multiple Drugs for HF Including Augmented Clinical Assessment That May Trigger Additional Changes in GDMT (e.g., Imaging Data, Biomarkers, and Filling Pressures) ■
3. When to Refer to an HF Specialist ■
4. How to Address Challenges of Care Coordination ■
5. How to Improve Adherence ■
6. What Is Needed in Specific Patient Cohorts: African Americans, the Frail, and Older Adults ■
7. How to Manage Your Patients' Cost of Care for HF ■
8. How to Manage the Increasing Complexity of HF ■
9. How to Manage Common Comorbidities ■
10. How to Integrate Palliative Care and Transition to Hospice Care ■

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PREFACE

The American College of Cardiology (ACC) develops a number of policy documents to provide members with guidance on clinical topics. Although clinical practice guidelines remain the primary mechanism for offering evidence-based recommendations, such guidelines may contain gaps in how to make clinical decisions, particularly when equipoise is present. Expert Consensus Documents are intended to provide guidance for clinicians in areas where evidence may be limited or new and evolving, or where insufficient data exist to fully inform clinical decision making. These documents

therefore serve to complement clinical practice guidelines, providing practical guidance for transforming guideline recommendations into clinically actionable information.

To re-evaluate the clinical documents published by the ACC, an ACC Presidential Task Force was formed in 2014 to examine the processes of ACC's clinical documents. The main recommendation of the Task Force was a new focus on concise decision pathways and/or key points of care, instead of the traditional longer documents. The Task Force also established criteria for identifying high-value clinical topics to be addressed, as well as an innovative approach to collecting stakeholder input through a roundtable or think tank meeting. To complement the new focus on brief decision pathways and key points, Expert Consensus Documents were rebranded "Expert Consensus Decision Pathways" (ECDPs).

Although ECDPs have a new format, they maintain the same goal of Expert Consensus Documents: to develop policy based on expert opinion in areas where important clinical decisions are not adequately addressed by available data. ECDPs are designed to complement existing or newly published guidelines and bridge the gaps in clinical guidance that remain. In some cases, topics covered by ECDPs will be addressed subsequently by ACC/American Heart Association (AHA) guidelines as the evidence base evolves. The writing groups are charged with developing algorithms that are more actionable and can be implemented into tools or apps to accelerate the use of these documents at point of care. Decision Pathways are intended not to provide a single correct answer, but to encourage clinicians to ask certain questions and consider important factors as they come to their own decision on a treatment plan to be recommended and discussed with their patients. There may be multiple pathways that can be taken for treatment decisions, and the goal is to help clinicians make a more informed decision.

*James L. Januzzi, Jr, MD, FACC
Chair, ACC Task Force on Expert Consensus Decision Pathways*

ABSTRACT

The 2017 ACC/AHA/Heart Failure Society of America (HFSA) heart failure (HF) guidelines (1) reflect a focused update of the ACC/AHA 2013 HF guidelines (2) and include guidance based on new evidence supporting novel drug therapies, a new treatment algorithm replete with more options for care than before, an updated approach to prevention, and important updates regarding various forms of HF and important comorbidities. The care of patients with HF is more involved than ever. Current care for the patient with HF with reduced ejection fraction (EF)

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