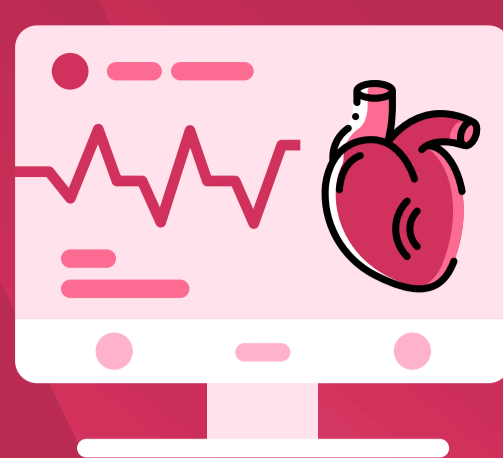


What the 2022 ADA Consensus recommends for

Screening & Diagnosis of Heart Failure in Pre-Diabetic and Diabetic Patients



The burden of CVD in Diabetic Patients in APAC

3-4 in 10



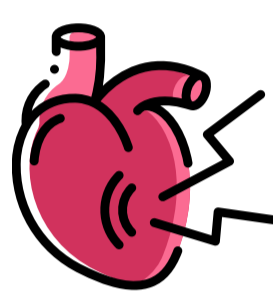
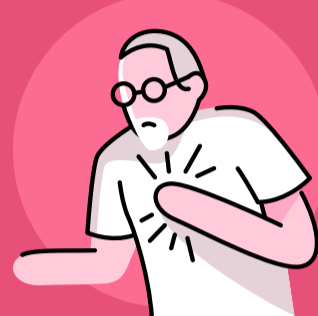
Prevalence of Cardiovascular Disease (CVD) among Type 2 diabetes mellitus (T2DM) patients¹



200%

T2DM is associated with a twofold increased risk of CVD vs non-T2DM patients¹

Pre-Diabetic and Diabetic Patients at risk of Heart Failure



STAGE A

High risk for HF

Obesity

Hypertension

Hyperlipidemia

Diabetic Kidney Disease

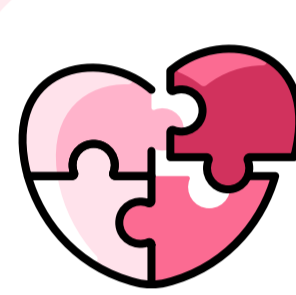
Coronary Artery Disease

Sex

Social Determinants of Health

Duration Of Diabetes

Uncontrolled Hypertension



STAGE B

Cardiac Structural Abnormality/ Dysfunction

LV systolic dysfunction

LV diastolic dysfunction

LV hypertrophy

Chamber enlargement

Valvular disease

Increased filling pressures OR Elevated biomarkers

Biomarkers

- NT-proBNP (≥ 125 pg/mL)
- BNP (≥ 50 pg/mL)
- High Sensitive Cardiac Troponin (> 99 th per-centile upper reference limit)



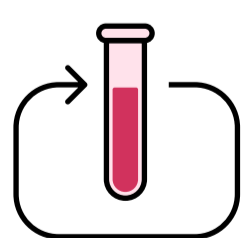
Normal



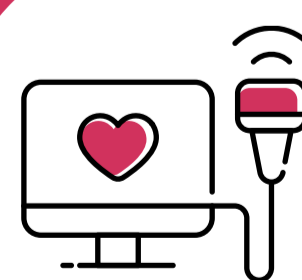
Elevated



Repeat
in at least 1 year



Imaging
(CXR, Echocardiogram)



By utilising cardiac biomarkers, identifying high-risk and early-stage heart failure in patients with T2DM enables timely intervention to prevent or delay the advancement of heart failure.²

Reference:

¹ Consensus Recommendations by the Asian Pacific Society of Cardiology: Optimising Cardiovascular Outcomes in Patients with Type 2 Diabetes

² Modified from 2022 ADA ACC consensus <https://doi.org/10.2337/dci22-0014>