

Aficamten Eliminates LVOT Obstruction in Patients With Obstructive HCM



Despite advances in reducing mortality and hospitalisation rates, individuals living with hypertrophic cardiomyopathy (HCM) often experience compromised quality of life due to symptoms like exertional dyspnoea and reduced exercise capacity. A significant contributor to these challenges in HCM patients is left ventricular outflow tract (LVOT) obstruction, which leads to elevated intracardiac pressures.

New research presented at Heart Failure 2024, a scientific congress of the European Society of Cardiology, highlighted the efficacy of aficamten in enhancing exercise capacity among HCM patients. This cardiac myosin inhibitor substantially improved peak oxygen uptake (pVO₂), symptomatic relief, and reduced LVOT pressure gradients.

Principal investigator Prof Martin Maron noted from the SEQUOIA-HCM trial that aficamten effectively and safely alleviated LVOT obstruction in obstructive HCM patients. Administered through a straightforward dosing regimen, aficamten significantly improved clinically relevant outcomes such as exercise capacity and symptomatology. The study included 282 patients across multiple countries, confirming aficamten's efficacy in enhancing pVO₂ and improving quality of life metrics compared to placebo.

HCM affects approximately 1 in 200 to 500 individuals, with a majority experiencing obstructive symptoms. Aficamten's ability to reduce LVOT gradients was initially demonstrated in phase 2 trials and further validated in this larger phase 3 trial. Results indicated that patients treated with aficamten experienced marked improvements in exercise tolerance, symptom severity, and LVOT gradients, underscoring its potential as both monotherapy and combination therapy alongside existing treatments for HCM.

The study's findings support aficamten's role in managing obstructive HCM, offering patients a promising therapeutic option to address their clinical needs effectively.

Source: [ESC](#)

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