Results from the Swedish Heart Failure Registry, SwedeHF; Outcome of women with previous breast cancer diagnosis.

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Breast Cancer patients with Heart Failure do not differ from other Heart Failure patients in terms of clinical presentation and mortality.

These results suggest the same management for the breast cancer patients with heart failure. However all women with heart failure should be treated with more cardiac devices and be referred to a heart failure clinic in a very early stage for increased survival.

Introduction

Despite the well-known risk of heart failure (HF) due to chemotherapy in breast cancer patients, little is known about the clinical characteristics and outcome of HF in this patient population.

The aim of this study was to describe the cardiovascular risk factors, clinical presentation, treatment, and mortality of HF in patients with a previous breast cancer (BC) diagnosis versus those without.

14 998 female patients with incident HF recorded in the Swedish Heart Failure Registry (SwedeHF) between 2008 and 2013 were studied. Differences in cardiovascular risk factors, clinical presentation, treatment, and mortality of 632 patients diagnosed with BC prior to HF were matched 1:5 on age with HF patients without BC.

Results: HF patients with a previous BC did not differ in terms of clinical presentation, cardiovascular risk factors, comorbidity burden and HF medication, from those without BC. There was a very low treatment with implantable cardioverter-defibrillator (ICD) (0.3-1.8%) and cardiac resynchronization therapy (CRT) (0.9-1.5%) in both groups. The treatment with CRT/CRT-D was significant lower (0.9-3.0% p=0.025) for BC patients despite their same survival survival after HF diagnosis as HF patients without prior BC.

The 5 years all-cause mortality and cardiovascular death was not dependent on previously BC or not but decreased significantly if the patient were referred to a heart failure clinic within 6 mounts after HF diagnosis.