ENTRESTO – INOVATIVE HEART FAILURE TREATMENT  
  
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INTRO  
Hear failure (HF) is a clinical syndrome characterized by typical symptoms (e.g. breathlessness, ankle swelling) that may be accompanied by signs (e.g. elevated jugular venous pressure, etc) caused by a structural and/or functional cardiac abnormality, resulting in a reduced cardiac output at rest or during stress.  
  
 The prevalence of HF is approximately 1–2% of the adult population in developed countries, rising to ≥10% among people 70 years of age.  
  
  
MATERIAL AND METHODS  
  
HF is diagnosed by means of detailed history, physical examination, ECG, echocardiography, blood analysis, urine and serum electrolytes. The plasma concentration of natriuretic peptides (NPs) can be usedas an initial diagnostic test.  
The goals of treatment in patients with HF are to improve their clinical status, functional capacity and quality of life, decreasing hospital admission and reduce mortality. Neuro-hormonal antagonists (ACEIs, MRAs and beta-blockers) have been shown to improve survival in patients with heart failure with reduced ejection fraction (HFrEF) and are recommended for the treatment of every patient with HFrEF.  
  
A new study was conducted for combined use of angiotensin receptor inhibitor (Valsartan) and neprilysin inhibitor (Sacubitril), which showed superiority of the new medication over ACE-inhibitors in reducing hospitalization and cardiovascular mortality in patients with HFrEF.  
  
  
RESULTS  
  
In our retrospective study from 2018 and 2019, we analyzed the results after treatment HF conservatively (ACEIs, MRAs and Beta-blockers) with the results after treatment of HF with the new medicine Entresto (Sacubitril/Valsartan).

CONCLUSION  
  
The results showed improvement of clinical status and quality of life in patients treated with Entresto, compared with the control group on conventional therapy for HFrEF. This determines the increasing use of Entresto in clinical cardiology.