

University of Groningen

Novel insights into heart failure with preserved ejection fraction

Lam, Carolyn Su Ping

IMPORTANT NOTE: You are advised to consult the publisher's version (publisher's PDF) if you wish to cite from it. Please check the document version below.

Document Version

Publisher's PDF, also known as Version of record

Publication date:

2016

[Link to publication in University of Groningen/UMCG research database](#)

Citation for published version (APA):

Lam, C. S. P. (2016). *Novel insights into heart failure with preserved ejection fraction*. University of Groningen.

Copyright

Other than for strictly personal use, it is not permitted to download or to forward/distribute the text or part of it without the consent of the author(s) and/or copyright holder(s), unless the work is under an open content license (like Creative Commons).

The publication may also be distributed here under the terms of Article 25fa of the Dutch Copyright Act, indicated by the "Taverne" license. More information can be found on the University of Groningen website: <https://www.rug.nl/library/open-access/self-archiving-pure/taverne-amendment>.

Take-down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

Downloaded from the University of Groningen/UMCG research database (Pure): <http://www.rug.nl/research/portal>. For technical reasons the number of authors shown on this cover page is limited to 10 maximum.

Novel insights into heart failure with preserved ejection fraction

Thesis by: Carolyn S.P. Lam

1. Heart failure with preserved ejection fraction (HFpEF) constitutes a significant public health burden worldwide, and represents one of the greatest unmet needs in cardiology today.
2. As a condition mainly affecting elderly women, the burden of HFpEF is increasing to epidemic proportions in aging societies, where it is becoming the predominant form of heart failure.
3. HFpEF is more than a conglomeration of age-related comorbidities.
4. HFpEF is not just “diastolic heart failure”; the pathophysiology of HFpEF goes beyond left ventricular diastolic dysfunction, and also involves systolic, vascular, pulmonary, and even non-cardiovascular organ system dysfunction.
5. Recognition of the heterogeneity of HFpEF is critical for the design of clinical trials in HFpEF.
6. It is easy to get a thousand prescriptions but hard to get one single remedy. (Chinese proverb)
7. The inferior doctor treats actual sickness; the mediocre doctor attends to impending sickness; the superior doctor prevents sickness. (Chinese proverb)
8. The woman who tells her age is either too young to have anything to lose or too old to have anything to gain. (Chinese proverb)