



Iron deficiency: an emerging therapeutic target in heart failure

Submitted by Emmanuel Lemoine on Tue, 02/24/2015 - 15:43

Titre Iron deficiency: an emerging therapeutic target in heart failure

Type de publication Article de revue

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Editeur BMJ Publishing Group

Type Article scientifique dans une revue à comité de lecture

Année 2014

Langue Anglais

Date 2014

Numéro 18

Pagination 1414 - 1420

Volume 100

Titre de la revue Heart

ISSN 1468-201X

Résumé en anglais

In patients with heart failure, iron deficiency is frequent but overlooked, with a prevalence of 30%-50%. Since it contributes to cardiac and peripheral muscle dysfunction, iron deficiency is associated with poorer clinical outcomes and a greater risk of death, independent of haemoglobin level. Therefore, iron deficiency emerges as a new comorbidity and a therapeutic target of chronic heart failure in addition to chronic renal insufficiency, anaemia and diabetes. In a series of placebo-controlled, randomised studies in patients with heart failure and iron deficiency, intravenous iron had a favourable effect on exercise capacity, functional class, LVEF, renal function and quality of life. These clinical studies were performed in the context of a renewed interest in iron metabolism. During the past 10 years, knowledge about the transport, storage and homeostasis of iron has improved dramatically, and new molecules involved in iron metabolism have been described (eg, hepcidin, ferroportin, divalent metal transporter 1). Recent European guidelines recommend the monitoring of iron parameters (ie, serum ferritin, transferrin saturation) for all patients with heart failure. Ongoing clinical trials will explore the benefits of iron deficiency correction on various heart failure parameters.

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DOI 10.1136/heartjnl-2014-305669 [11]

Lien vers le document <http://dx.doi.org/10.1136/heartjnl-2014-305669> [11]

Titre abrégé Heart

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