After admission to the hospital, 1 out of 3 patients will die within one year and the majority of patients will die within 5 years.

**Patients with HF need MEDICAL ATTENTION + ONGOING TREATMENT.**

HF can happen either when the heart muscles are too weak or too stiff to function properly. The causes of damage to the heart muscles are many and varied.

**CORRECT IDENTIFICATION**

Both the public and health professionals have a very low awareness of HF – Europeans identify the symptoms as followed:

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Public Awareness</th>
<th>Health Professionals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Failure</td>
<td>3%</td>
<td>28%</td>
</tr>
<tr>
<td>Heart Attack</td>
<td>28%</td>
<td>48%</td>
</tr>
<tr>
<td>Stroke</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**WITHOUT PREVENTION, THE NUMBER OF HF CASES IS EXPECTED to ×3 by 2030**

HF accounts for 5% of all acute hospital admissions in Europe.

**THE VALUE OF SCREENING AND EARLY DIAGNOSIS**

- **EARLY DIAGNOSIS AND RECOGNITION** of heart failure are key to ensure patients receive the best available treatment as early as possible. Time is also critical when patients have an acute episode of heart failure. A delay to hospital treatment as little as 4-6 hours after acute onset of heart failure symptoms, can increase a patient’s risk of death.

- **A STUDY IN IRELAND** sought to determine the efficacy of a screening program using brain-type natriuretic peptide (BNP) and collaborative care in an at-risk population. The overall incidence of newly onset heart failure was reduced by 50% and improved outcomes for participants were delivered at no extra cost.

- In some of the patients with HF, the risk of developing heart failure can be reduced by as much as 80% through the adoption of HEALTHIER LIFESTYLES and treatment of cardiovascular risk factors.

**POLICY RECOMMENDATIONS**

- Promote PUBLIC AWARENESS PROGRAMMES to help people recognise signs and symptoms of heart failure and understand the importance of seeking early diagnosis and care.

- Encourage the development and use of heart failure EDUCATION PROGRAMMES for appropriate healthcare professionals.

- Set up a strong INFORMATION SYSTEM to ensure information sharing between providers and across levels of care.

- Ensure patient TIMELY ACCESS TO DIAGNOSTIC SERVICES AND TREATMENT of heart failure, through appropriate reimbursement procedure in all relevant settings.

**AFFECTED ADULTS IN EUROPE**

>15 Millions

Heart Failure (HF) occurs when the heart is unable to pump enough blood to meet the body’s needs for oxygen and important nutrients. This means that the body is unable to function normally, often causing great suffering and disability.

**BURDEN FOR HEALTHCARE SYSTEMS**

- An estimated 1 in 4 will be readmitted to the hospital within one month.

- Heart Failure (HF) is the leading cause of hospitalisation in people over the age of 65.

- HF is the leading cause of hospitalisation in people over the age of 65.}

**AFFECTED WITH HF IN OUR LIFETIME**

HF accounts for 5% of all acute hospital admissions in Europe.

**POWER OF KNOWLEDGE: IMPROVING CARE OF PATIENTS WITH HEART FAILURE**

Sources: OECD, HFPN, ESCARDIO