

## Weighing different treatments for HCM

Decisions about treatments for hypertrophic cardiomyopathy, or HCM, aren't always clear-cut. For example, which medications might be best, whether or not to have an implantable cardioverter defibrillator (ICD) placed, or if a procedure to get rid of some of the excess heart thickening is even an option for you and, if so, which type of procedure might be the better choice for you.

**Use this worksheet to write down the pros and cons. Include anything you think is important for your care. Talk it over with your health care team, too.**





## Decisions about medications

**Beta blockers** and **calcium channel blockers** are used to help ease the symptoms of HCM. Keep in mind that there are many beta blockers. If one doesn't work for you, there are others you can try.

For patients who have symptoms from obstructive HCM, **mavacamten** is an option. It may improve exercise capacity and help lessen symptoms.

Other medications also may be needed. For example, if you have atrial fibrillation and HCM, being on a **blood thinner** to prevent blood clots that could lead to a stroke is important. But there are several options.

### What are the benefits?

*(For example, easing shortness of breath, chest pain, easing the workload on the heart, preventing stroke if you have atrial fibrillation)*

### What are the downsides?

*(For example, bothersome side effects, interactions with other medications)*

### Medication talked about:

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## Thinking about an ICD

For some people who have a dangerous heart rhythm, the choice about an implantable cardioverter defibrillator may be easy. For others, there may be more considerations.

### What are the benefits?

*(For example, peace of mind, knowing if I have a dangerous heart rhythm, the device will correct it and save me)*

### What are the downsides?

*(For example, fear of having it put in or of getting shocked, the need to avoid strong magnetic fields at airport screening or if an MRI is suggested, perhaps not being able to drive if you are a commercial driver)*

- Are there other things that are important to you that factor into your decision?

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- What questions do you have? (For example, how is the ICD implanted, should it be inserted under the skin or with leads that go through the vein and into the heart, are there things I can't do, can it be removed and what are the risks with that)

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## Considering a myectomy or alcohol septal ablation

For some patients with obstructive HCM (when the thickened area in the heart blocks or reduces blood flow), a myectomy or alcohol septal ablation may be recommended to help remove or reduce the excess thickening in the heart and relieve symptoms.

Sometimes the choice is clear, but other times it's not. For example, a myectomy would usually be a better choice for someone who is younger, has extensive disease with a very thick heart, or who needs surgery on a valve or to open a coronary artery.

On the other hand, an alcohol septal ablation is often advised for older adults or people who aren't good candidates for surgery. You also need the right anatomy for an ablation. These procedures should ideally be discussed with and performed by an HCM expert.

Spend some time talking with your care team about each option, or the one that has been recommended for you. Ask questions so that you understand the pros and cons.

### ▶ Myectomy

**What are the upsides?**

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**What are the downsides/risks?**

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### ▶ Alcohol septal ablation

**What are the upsides?**

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**What are the downsides/risks?**

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- What questions do you have to help you make a decision? (For example, possible complications, what does life look with or without having the procedure)

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- Are there other things that factor into your decision? (For example, an upcoming trip or family event)

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