

Weighing Different Treatments for Hypertrophic Cardiomyopathy

Decisions about treatments for **hypertrophic cardiomyopathy, or HCM**, aren't always clear-cut. There are often many things think about.

For example:



Which medications might be best.



Whether to have an implantable cardioverter defibrillator (ICD) placed.



If a procedure to get rid of some of the excess heart thickening is 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 (also called the benefits and potential risks or harms) of your treatment options. 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 different 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, 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? <i>(For example, easing shortness of breath, chest pain, easing the workload on the heart, preventing stroke if you have atrial fibrillation)</i>	What are the downsides? <i>(For example, bothersome side effects, interactions with other medications)</i>
Medication talked about:	
Medication talked about:	

Thinking about an ICD

For some people who have HCM – and are likely to have a dangerous heart rhythm – the choice about an **implantable cardioverter defibrillator, or ICD**, may be easy. For others, there may be more to consider.



What are the benefits? <i>(For example, having peace of mind, knowing if I have a dangerous heart rhythm, the device will correct it and could save me)</i>	What are the downsides? <i>(For example, fear of having a device in your body or of getting shocked, having to be careful near certain devices or when going through security)</i>

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

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?)

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. In some cases, mavacamten is an alternative to these septal reduction therapies.

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 benefits?	What are the downsides?

Alcohol septal ablation

What are the benefits?	What are the downsides?

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)

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