HEART FAILURE PATIENTS,

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TALK TO YOUR DOCTOR

If you suspect that you or a loved one might have ATTR-CM (transthyretin amyloid cardiomyopathy), talk to your cardiologist as soon as possible to confirm or rule out the disease.

Remember, **Your Heart mATTRs!** When it comes to ATTR-CM, **getting the message** is all about being proactive. While overall awareness of ATTR-CM is low, advocating for yourself or a loved one with the disease, and asking your cardiologist questions can help you get many of the answers that you need.

WHAT TO BRING TO YOUR VISIT

LET YOUR CARDIOLOGIST KNOW IF YOU HAVE HEART FAILURE AND ANY OF THESE SIGNS, SYMPTOMS OR CONDITIONS:

- Heart failure with preserved ejection fraction (HFpEF)
- ___ Fatigue
- ____ Shortness of breath
- ____ Swelling (edema) in the legs and feet
- ____ Irregular heartbeat
- Heart and blood pressure medicines make you feel worse
- Diagnosed with carpal tunnel syndrome in both wrists
- Hand pain, numbness or tingling in your fingers

- Pain or numbness in your lower back or legs, which may be caused by lumbar spinal stenosis, or narrowing of the lower part of the spine
- Atraumatic biceps tendon rupture
- ____ Knee or hip replacement
- ____ Digestive issues, such as nausea, diarrhea, or constipation
 - _ Unexplained weight loss
 - ____ Lightheadedness when you stand up

While these signs and symptoms don't necessarily indicate that you have ATTR-CM or another condition, any one or combination should be mentioned to your cardiologist. The more you tell your doctor the better they can help you understand your condition.

FAMILY MEDICAL HISTORY:

ATTR-CM can be hereditary. To the best of your ability, make note of any heart-related issues associated with your relatives on either side of your family.

YOUR MEDICAL HISTORY, RECORDS AND TEST RESULTS:

You may have already seen several doctors to understand why you are feeling discomfort. If you've had any tests like an electrocardiogram (ECG) or echocardiogram (ECHO), sharing the results with your cardiologist can help. Previous heart surgeries may also prohibit certain types of testing for ATTR-CM, so be sure to note if you've had any procedures or device implantations.

LIST OF QUESTIONS:

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ATTR-CM can impact each patient differently, and your family, work, and social needs may differ. Be open about your questions or concerns.



- Based on my symptoms, medical history and family history, do you think ATTR-CM could be the cause of my heart failure?
 - Do you have experience diagnosing ATTR-CM, or can you recommend a local specialist?

Do I need additional tests to confirm my diagnosis? If so, who at your office should I speak with and will the results of my test impact my treatment plan?

- How quickly could this condition progress?
- I understand this condition expresses itself in a variety of ways. Should I seek additional specialists to be a part of my care team?
- Are there any patient support or advocacy groups you recommend for emotional and mental support or additional information on ATTR-CM?

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