STEP-HFpEF trial #ESCCongress

Once-weekly semaglutide in people with HFpEF and obesity

Conclusion



Semaglutide improves heart failure-related symptoms and physical function and results in greater weight loss compared with placebo in patients with heart failure with preserved ejection fraction (HFpEF) and obesity.

Impact on clinical practice



The results indicate that obesity is not simply a comorbidity in patients with HFpEF but a root cause and a target for therapeutic intervention.

Study objectives



The STEP-HFpEF trial tested the hypothesis that treatment with semaglutide can significantly improve symptoms, physical limitations and exercise function, in addition to weight loss, in patients with HFpEF and obesity.

Study population

HFpEF patients

- left ventricular ejection fraction ≥45%
- body mass index ≥30 kg/m2
- HF symptoms
- functional limitations (New York Heart Association functional class II-IV and Kansas City Cardiomyopathy Questionnaire Clinical Summary Score [KC-CQ-CSS] <90 points)

Where?

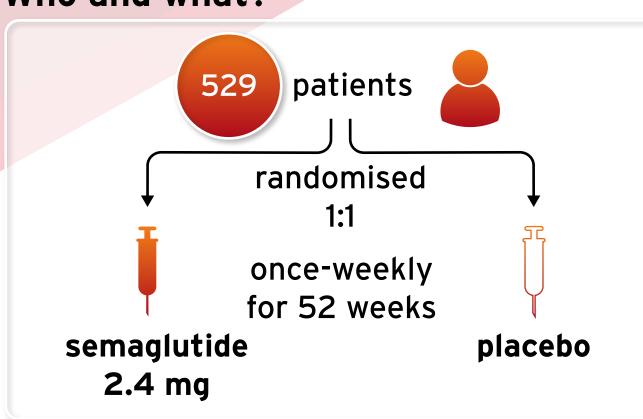


13 countries in Asia, Europe, North America and South America



96 sites

Who and what?



Primary endpoints

change from baseline to week 52 in KCCQ-CSS

mean change

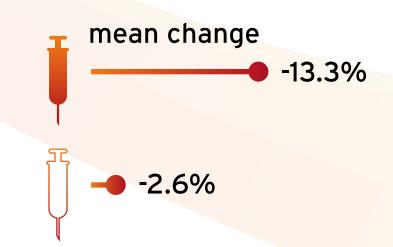
16.6

points

8.7 points

estimated treatment difference 7.8 points 95% CI 4.8 to 10.9 p<0.001

change from baseline to week 52 in body weight



estimated treatment difference -10.7% 95% CI -11.9% to -9.4% p<0.001

Serious adverse events

