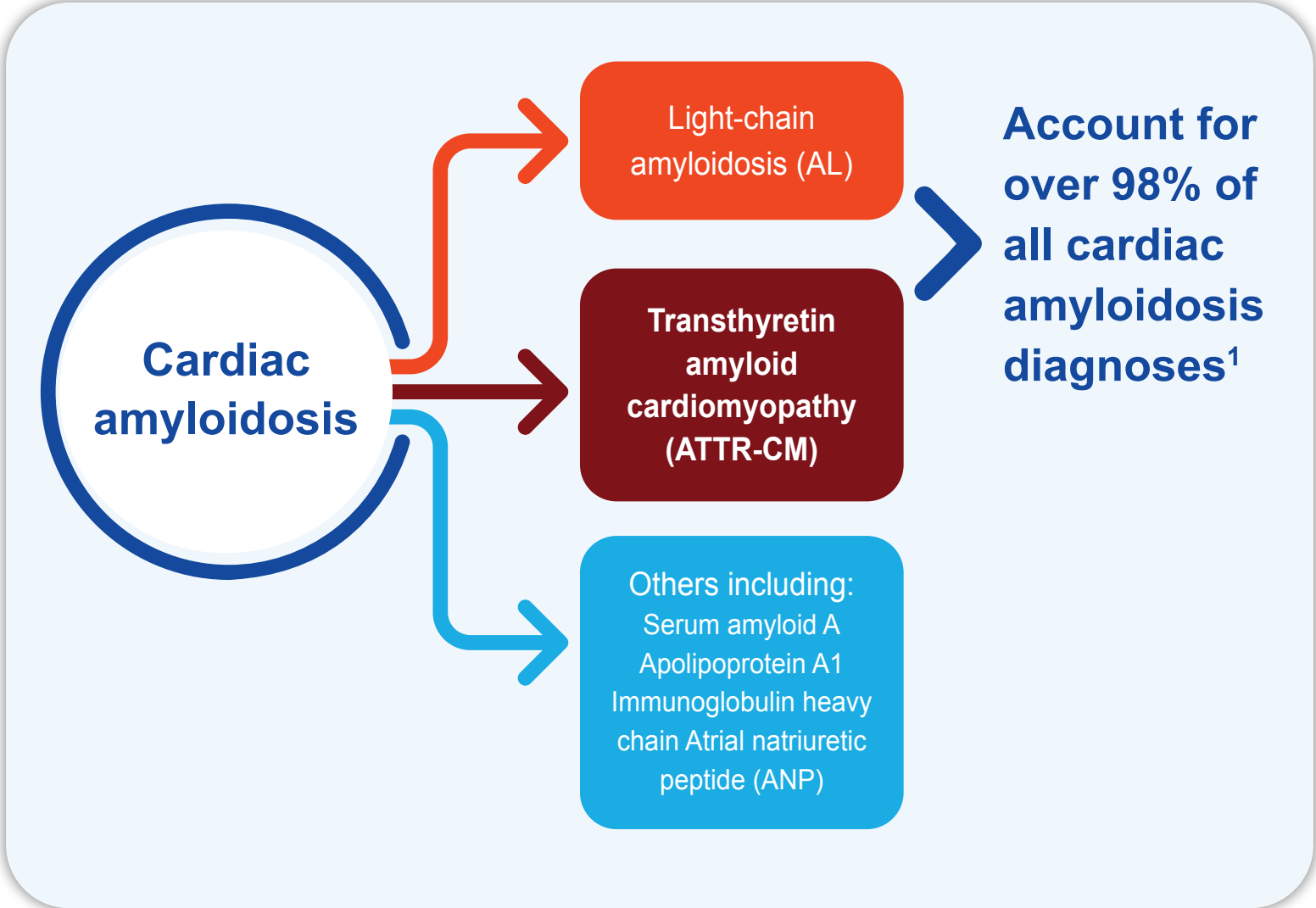


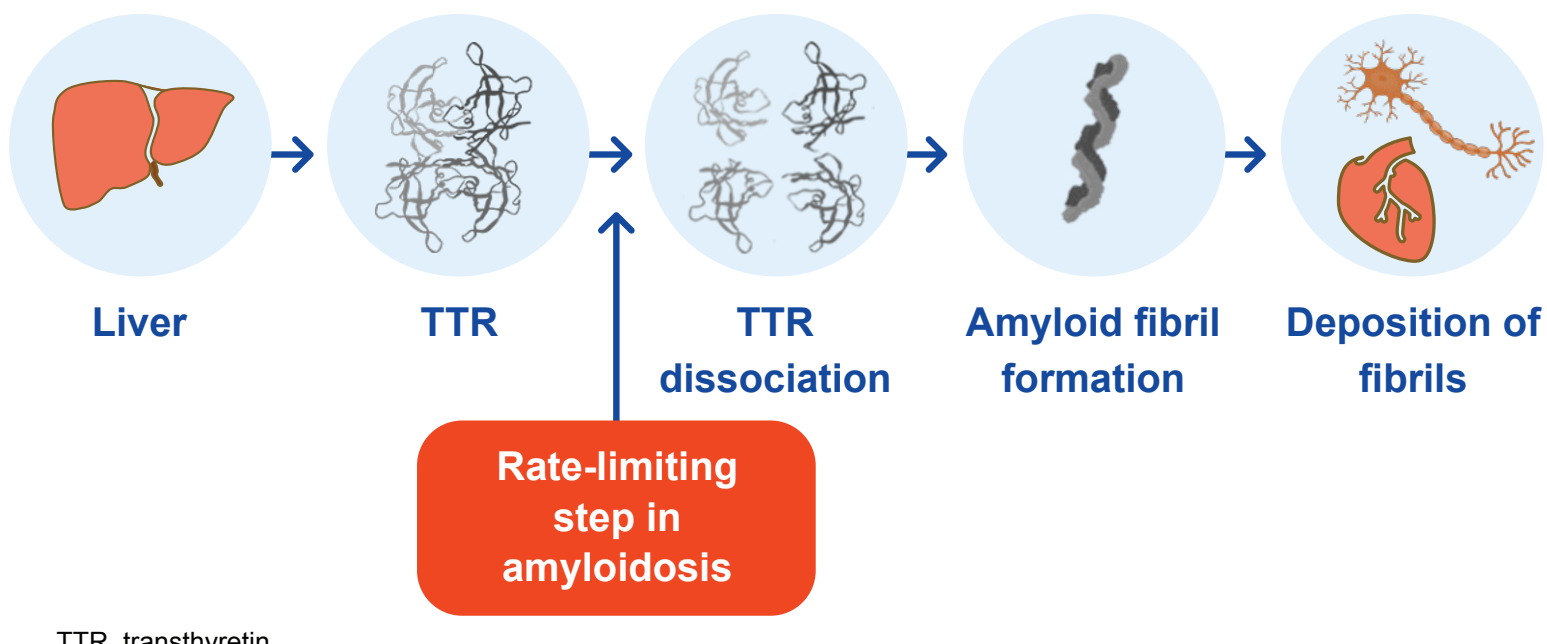
Cardiac Amyloidosis

Cardiac amyloidosis is a fatal and progressive infiltrative disease that is caused by the deposition of amyloid fibrils at the cardiac level. Although there are many different amyloid diseases, 2 types account for over 98% of all cardiac amyloidosis (CA): immunoglobulin light chain amyloidosis (AL) and Transthyretin Amyloid Cardiomyopathy (ATTR-CM)¹



ATTR-CM: pathophysiology

Transthyretin is a tetrameric plasma protein responsible for transporting thyroxine and retinol-bound protein. It is primarily synthesized in the liver. Transthyretin tends to dissociate to dimers and monomers, which misassemble into fibrils and undergo deposition²



TTR, transthyretin

Point mutations or the effect of age can increase this tendency to dissociate, giving rise to the 2 clinical forms of ATTR: Hereditary (ATTRm, <10% of cases) and wild type (ATTRwt, >90% of cases)^{2,3}. The most prevalent mutation in Israel is Ser77Tyr, among families of Jewish Yemenite descent^{4,5}.

Main Signs and symptoms of ATTR-CM^{3,5}

- Ocular**
Vitreous deposits
- Cardiovascular**
Signs of **Heart Failure** (mostly **HFpEF**):
Shortness of breath, Edema
Arrhythmias
Aortic Stenosis (mostly severe)
- Musculoskeletal/orthopedic**
Carpal Tunnel Syndrome (Mostly Bilateral)
Ruptured Biceps Tendon
Lumbar Spinal Stenosis
- Nervous**
Polyneuropathy
Dysautonomia

Video Blog: "ATTR-CM - From Suspicion to Diagnosis"

Watch the highlights of the interview with Prof. Arthur Pollak, director of the cardiac amyloidosis program, Hadassah – Hebrew University of Jerusalem

Whom to SUSPECT? According to the ESC guidelines (2021)



Stay tuned for our upcoming "RED FLAGS" Newsletter!
Which signs and symptoms should raise your SUSPICION of Cardiac Amyloidosis?

Thank you for taking time to review this information. Please reach out if you have any questions or would like to discuss further.

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