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The Rescue: Treating Confirmed ATTR CLINICAL COMPANION TOOL

Key Concepts for Treatment

- Treatment combines supportive care for cardiac amyloidosis (CA), often in conjunction with other medical specialties to manage extracardiac manifestations, and disease-modifying/targeted therapies that are approved or in clinical trials¹
- · A multidisciplinary team and network approach to care ensures the best outcomes for patients
- Tafamidis and acoramidis are FDA-approved transthyretin stabilizers to treat ATTR-CM
- The treatment paradigm is shifting from reduction to removal of amyloid deposits
- Several therapies are in development, including antibodies that can remove amyloid deposits, and your patient may benefit from participation in a clinical trial
- Earlier treatment initiation, combined with appropriate patient selection and expectations, ensures better outcomes

Cardiac Amyloidosis

Targets of therapy

	Block Protein Synthesis	Stabilize Tetramer	Remove Fibrils
Mechanism of Action	 Gene silencing using small interfering RNA (siRNA) or antisense oligonucleotides Gene editing using CRISPR Cas 9 	Stabilizes the tetramer, thereby reducing the availability of monomers for amyloidogenesis	Antibody-mediated phagocytosis removes ATTR amyloid deposits
Therapies: Approved and In Development	siRNA Patisiran*2 Vutrisiran*3 Antisense Inotersen*4 Eplontersen*5 CRISPR Cas 9 NTLA-20016	 Tafamidis**⁷ Diflusinal⁸ Acoramidis**⁶ 	 NNC6019¹⁰ NI1006 (ALXN2220)^{11,12} AT-02¹³

^{*}FDA-approved for ATTR-PN; **FDA-approved for ATTR-CM

Current as of Jan. 30, 2025





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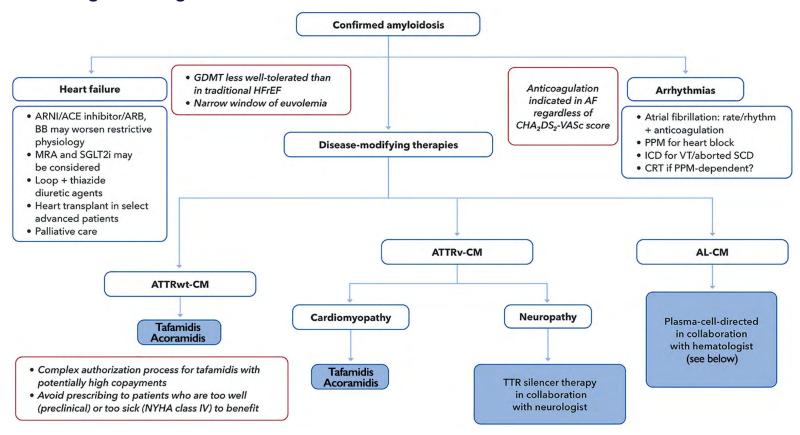
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Management algorithm¹



AF, atrial fibrillation; ARNI/ACE inhibitor/ARB, renin-angiotensin system inhibitors; AL-CM, amyloid monoclonal immunoglobulin light chain; ATTR, amyloid transthyretin; ATTRv-CM, variant transthyretin amyloid cardiomyopathy; ATTRwt-CM, wild-type transthyretin amyloid cardiomyopathy; BB, beta-blocker; CRT, cardiac resynchronization therapy; HFrEF, heart failure with reduced ejection fraction; GDMT, guideline-directed medical therapy; ICD, implantable cardioverter-defibrillator; MRA, mineralocorticoid receptor antagonists; NYHA, New York Heart Association; PPM, permanent pacemaker; SCD, sudden cardiac death; SGLT2i, sodium glucose cotransporter 2 inhibitor; TTR, transthyretin; VT, ventricular tachycardia.





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AL Amyloidosis

Light chain amyloidosis (AL) most commonly results from clonal plasma cell disorder and, therefore, treatments include chemotherapy and immunotherapy agents similar to those used for myeloma.

Targets of therapy^{14,15}

Therapies approved and in development:

Reduction in Ligh	t Chain Production	Inhibition of Amyloid Fibril Formation	Removal of Light Chain Amyloid Deposits
BortezomibCarfilzomibDaratumumabElotuzumabIsatuximab	IxazomibLenalidomidePomalidomideVenetoclax	Doxycycline	Anti-fibril antibodies Anselamimab (CAEL-101) Birtamimab

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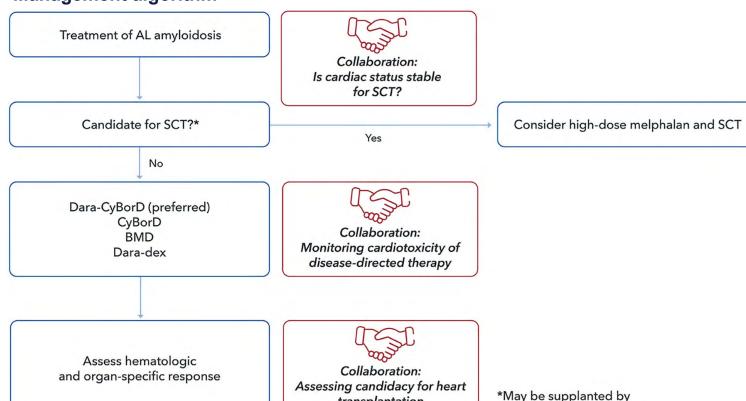
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Dara-CyBorD as first-line therapy

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Management algorithm¹



AL, light-chain amyloidosis; BMD, bortezomib-melphalan-dexamethasone; CyBorD, cyclophosphamide, bortezomib, and dexamethasone; Dara, daratumumab; dex, dexamethasone; SCT, stem cell transplantation

transplantation





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