

Diabetes and Heart Failure

People with diabetes have a two-fold risk of developing heart failure (HF)

Stages of Heart Failure

STAGE

A
At risk for HF

People at risk of HF, but do not have symptoms nor structural/functional heart disease. This includes all people with diabetes, hypertension, obesity, ASCVD

B
Pre-HF

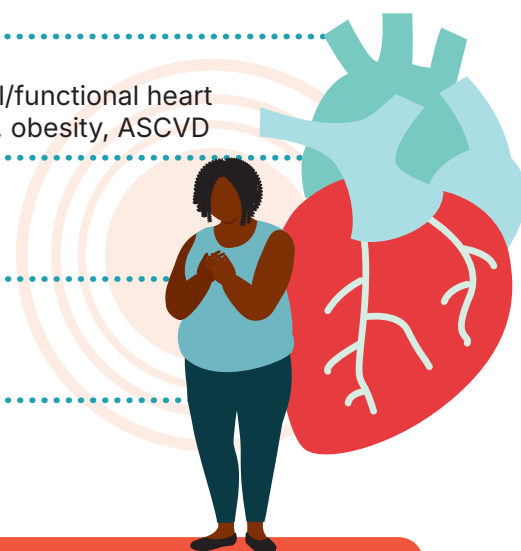
People without current or prior symptoms of HF, but have structural heart disease or increased filling pressures

C
Symptomatic HF

People with current or prior symptoms of HF

D
Advanced HF

People with HF symptoms that interfere with daily life or lead to repeated hospitalizations



All people with diabetes fall under HF stage A

- Preventing and/or delaying the progression of HF stage B is key for people living with diabetes.
- For those at increased risk for stage B HF, consider screening them with natriuretic peptide testing like BNP or NT-proBNP → If elevated → echocardiography is recommended to evaluate for stage B HF.

In people with type 2 diabetes and HF stage B or higher:

SGLT inhibitor use is recommended to reduce risk for HF hospitalization in addition to cardio-renal benefits

Treatment with ACE inhibitors/ARBs and β -blockers are recommended to reduce the risk for progression to stage C

If kidney disease is present: finerenone is recommended to reduce the risk of HF hospitalization

An interprofessional approach that includes a cardiovascular disease specialist is recommended to reduce the risk for progression to stage C

ACE inhibitors: angiotensin converting enzyme inhibitors
ARB: angiotensin receptor blocker

BNP: B-type natriuretic peptide
HF: heart failure

NT-proBNP: N-terminal pro-BNP
SGLT inhibitor: sodium-glucose cotransporter (SGLT) inhibitor

Learn more at [Professional.Diabetes.org](https://www.professional.diabetes.org) | 1-800-DIABETES (1-800-342-2383)