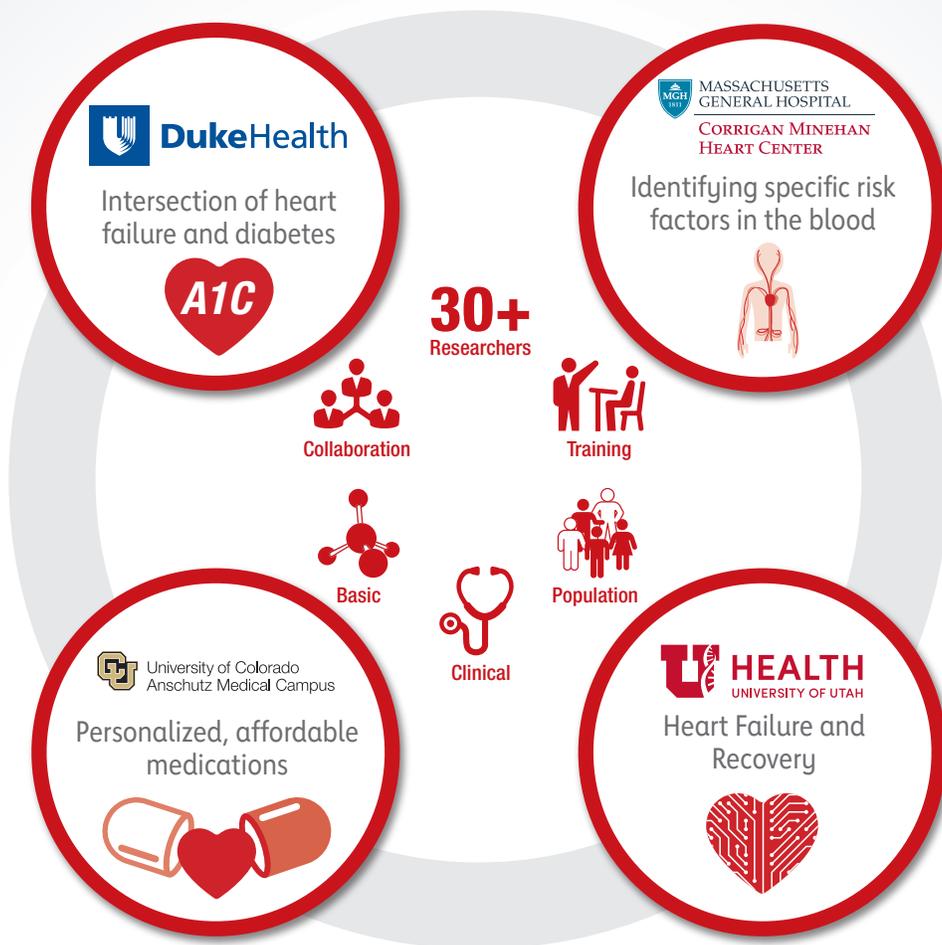


# HEART FAILURE

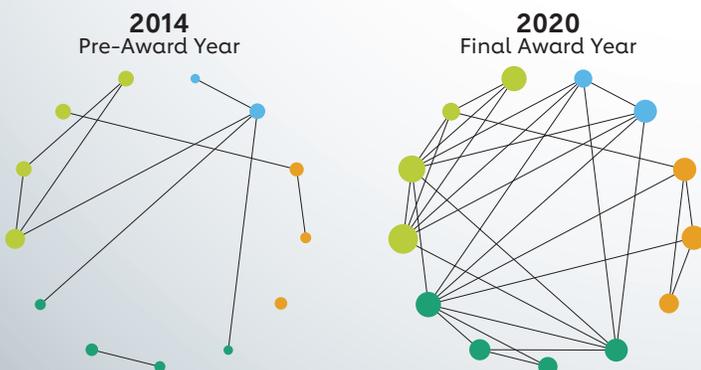
## AHA'S INVESTMENT 2016-2021

**\$15 MILLION** IN RESEARCH | **\$3.7 MILLION** TO EACH CENTER



### BY THE NUMBERS

- **\$40.15M** in funding from the NIH, VA, and Canadian Institutes of Health Research since the start of the Network
- **108** publications to date, an average of 27 per Center
- SFRN Fellows awarded over **\$1.4M** in early career funding from the NIH and AHA
- Collaborations and co-authorships between each Center increased **almost 5 fold** over the duration of the award



Note: each circle represents a researcher, and each center has a different color. The sizes of the circles represent the number of connections formed, while the arcs indicate joint publications between researchers.

- University of Utah
- Mass. Gen. Hospital
- University of Colorado
- Duke University

# TRAINING A NEW GENERATION OF MULTIDISCIPLINARY INVESTIGATORS

Over 85% remained in academia and research



## NOTABLE PUBLICATIONS



### Trends in Noncardiovascular Comorbidities Among Patients Hospitalized for Heart Failure: Insights From the Get With The Guidelines-Heart Failure Registry, *Circulation Heart Failure*, June 2018

Patients admitted in hospital for heart failure have an increasing number of non-cardiovascular comorbidities over time, which are associated with worse outcomes. Strategies addressing the additional non-cardiovascular comorbidities provide an opportunity to improve outcomes.

### Quality of life and its trajectories in heart failure with recovered ejection fraction, *JAMA Cardiology*, May 2021

It is likely for patients with heart failure with reduced ejection fraction (HFrEF) that experience a normalization of systolic function in the left ventricle to see significant improvements in health-related quality of life.



### Exercise induces new cardiomyocyte generation in the adult mammalian heart, *Nature Communication*, Apr 2018

Growth of new cardiac muscle cells can be activated by exercise in the normal and injured adult mouse heart and suggest that stimulation of existing cardiac muscle cell generation could contribute to the benefits of exercise.

### An Electronically Delivered, Patient-Activation Tool for Intensification of Medications for Chronic Heart Failure with Reduced Ejection Fraction: the EPIC-HF Trial, *Circulation*, Dec 2020

A patient activation tool, such as a brief video and check-list, delivered electronically before a cardiology clinic visit improved clinician intensification of guideline-directed medical therapies.

## NOTABLE COLLABORATIONS

- Duke University, University of Colorado Denver (UCD), and University of Utah collaboration led to a PCORnet funded project entitled "Implementation of Patient Reported Outcomes Measurement for Heart Failure Patients in PCORnet" and resulted in a manuscript published in JAHA.
- Duke, UCD, and Utah published a collaborative paper in JAHA, "Provider Perspectives on the Feasibility and Utility of Routine Patient-Reported Outcomes Assessment in Heart Failure: A Qualitative Analysis"
- Dr. Abel, Project PI from the Utah Center, and Dr. Das, Project PI from MGH Center, used preliminary data developed in the Heart Failure SFRN to apply for and to successfully compete in the Cardiometabolic & Type 2 Diabetes Mellitus Strategically Focused Research Network.
- Dr. Rosenzweig, MGH, and Dr. Bristow, UCD, established an ongoing collaboration focused on the role of IncExACT1, a specific type of long non-coding RNA, in human cardiomyopathy and heart failure.