Feline Cardiomyopathy

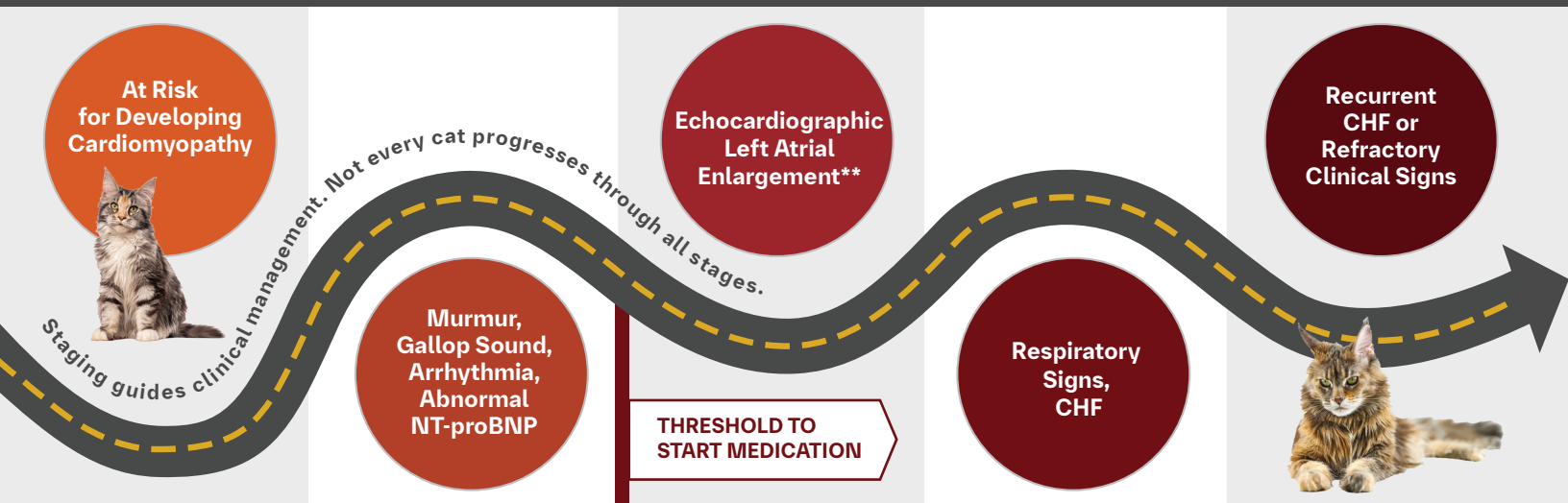
CHF Stages and Recommendations

Feline ABCDs

Feline Formulary

A | **B1** | **B2** | **C** | **D**

The length of each stage tends to shorten as the disease progresses



A

- Screening echocardiogram for predisposed breeds
- Genetic tests available for some breeds
- Client education
- Annual auscultation
- Consider annual **NT-proBNP** and echocardiographic screening

B1

- Echocardiogram to diagnose cardiomyopathy and assess left atrial size
- Blood pressure for at-risk cats*
- Resting serum thyroxine concentration (cats ≥6 years)*
- **ECG** if arrhythmias are detected at Stages B1, B2, C, or D
- Treat systemic hypertension and/or hyperthyroidism if present
- Annual re-evaluation to monitor for disease progression

B2

- Echocardiogram
- Blood pressure
- Baseline thoracic radiographs
- Laboratory screening (complete blood count, chemistry, urinalysis, thyroid assessment)
- Thromboprophylaxis therapy is recommended for Stages B2, C, and D (e.g., clopidogrel, rivaroxaban)
- Monitor sleeping respiratory rate
- Client education regarding clinical signs of **ATE** and **CHF**

C

- Thoracic **POCUS**, radiographs, and/or **NT-proBNP** assessment may help differentiate causes of respiratory distress, including **CHF**
- Echocardiogram
- Blood pressure
- Labwork, including thyroid status
- Thoracocentesis if needed, with fluid analysis
- Acute **CHF**: Oxygen, furosemide, anxiolysis, and thoracocentesis if needed
- Chronic **CHF**: Furosemide, ± **ACE** inhibitor and spironolactone if tolerated
- Thromboprophylaxis
- Treat arrhythmias as necessary
- Monitor sleeping respiratory rate (daily)
- Consultation with a cardiologist is recommended
- Sodium-reduced diet ideal, but calorie intake should be prioritized

D

- **POCUS**
- Radiographs
- Echocardiogram
- Labwork, including thyroid status** reassessment
- Blood pressure
- Furosemide ↑ (or torsemide)
- Pimobendan
- ± **ACE** inhibitor and spironolactone if tolerated
- Thromboprophylaxis
- Periodic thoracocentesis may be necessary
- Treat arrhythmias as necessary
- Consultation with a cardiologist is strongly recommended
- Appetite stimulants may be useful
- Discuss quality of life with owner

- **Diagnostics**
- **Medications**
- **Management**

ACE, angiotensin-converting enzyme; **ATE**, arterial thromboembolism; **CHF**, congestive heart failure; **ECG**, electrocardiogram; **LA**, left atrium; **LA:Ao**, left atrium-to-aortic root ratio; **NT-proBNP**, N-terminal pro B-type natriuretic peptide; **POCUS**, point-of-care ultrasound.
*Patients ≥6 years should have serum thyroxine and blood pressure monitored annually at every stage.
Long-axis **LA diameter ≥20 mm or short-axis **LA:Ao** ≥1.8 or evidence of poor **LA** function.

Fuentes VL, et al. ACVIM consensus statement guidelines for the classification, diagnosis, and management of cardiomyopathies in cats. *J Vet Intern Med.* 2020;34(3):1062-1077.