

Amiloidosi cardiaca: conoscere per gestire al meglio la patologia



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Amyloidosis Research and Treatment Centre IRCCS Fondazione Policlinico San Matteo, Pavia



Initially based in the Department of Internal Medicine, in 2006 it was moved to a new, dedicated location that was renovated thanks to the generosity of patients







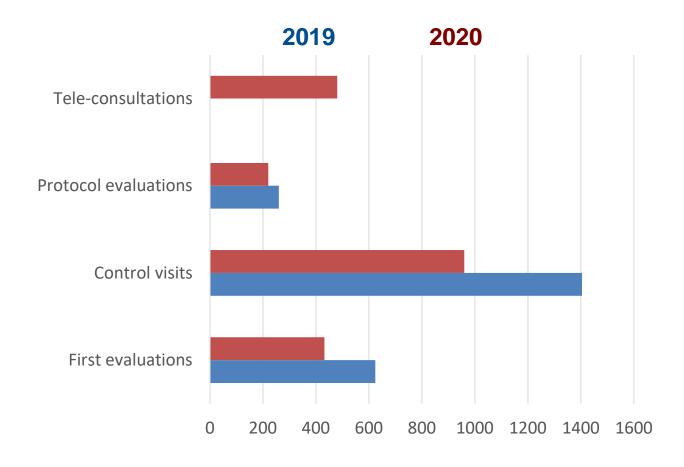
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laboratory

~400 newly diagnosed patients/year ~2500 clinical evaluations/year ~40,000 patients' samples in the biobank

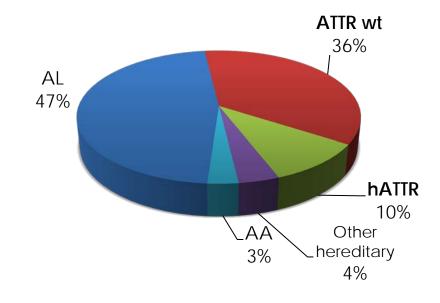


The increasing medical relevance of systemic ATTR amyloidosis

Newly diagnosed patients 2010-2015

AL 77% ATTR wt 5% hATTR 7% Other hereditary AA 6% 6%

Newly diagnosed patients in 2018-2020

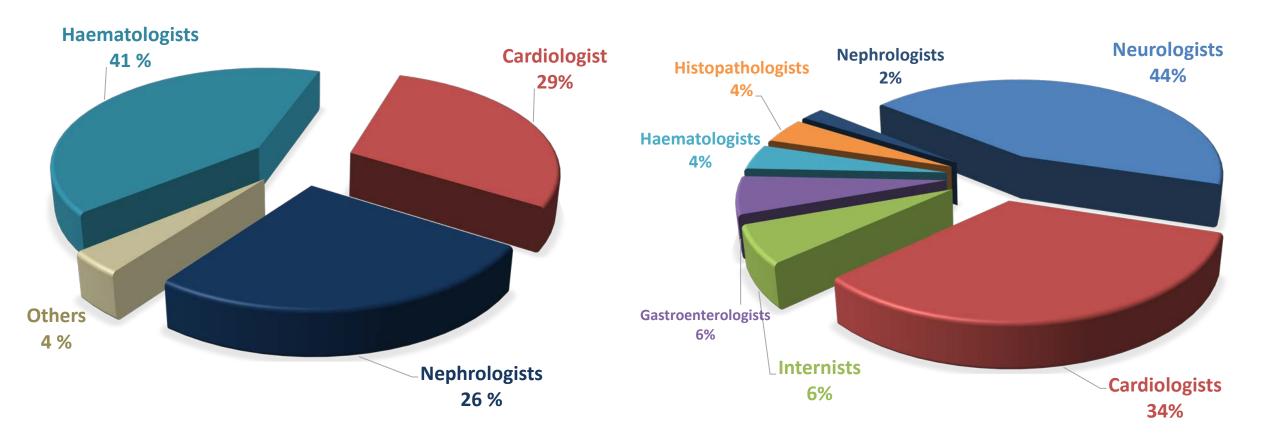


Amyloid type	Organ involvement					
	Heart	Kidney	Liver	PNS	ANS	GI
AL amyloidosis	++	++	+	+	+	+
hATTR amyloidosis	++	+	-	++	++	++
ATTRwt amyloidosis	++	-	-	±	-	-
AA amyloidosis	±	++	++	-	+	+
AApoA-I amyloidosis	+	++	++	±	-	-

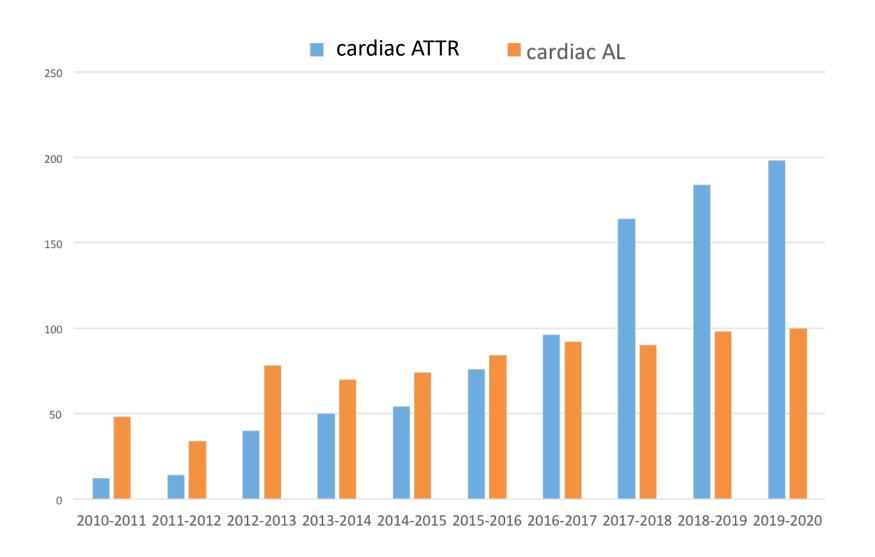
Referral pathway to Pavia centre

AL amyloidosis

Hereditary ATTR amyloidosis



The increasing medical relevance of systemic ATTR amyloidosis



Diagnostic pathway at Pavia Amyloid Centre

Abdominal fat and/or salivary gland biopsy
Organ biopsy
Amyloid typing

General and neurological examination mBMI

Liver and renal function tests

Autonomic signs and symptoms

Neurophysiological assessment



Serum and urinary immunofixation, FLC
Genetic analyses
Bone marrow analysis

ECG
Echocardiography
Cardiac biomarkers
DPD scintigraphy
CMR



Weekly multidisciplinary meeting



Treatment choice

Establish follow-up

Genetic counseing where applicable

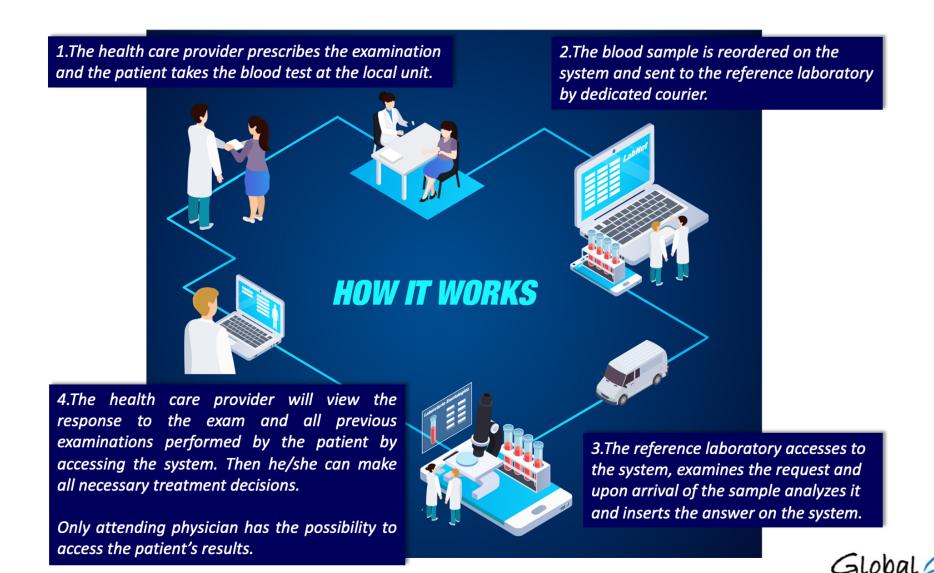
Italian Amyloidosis Study Group



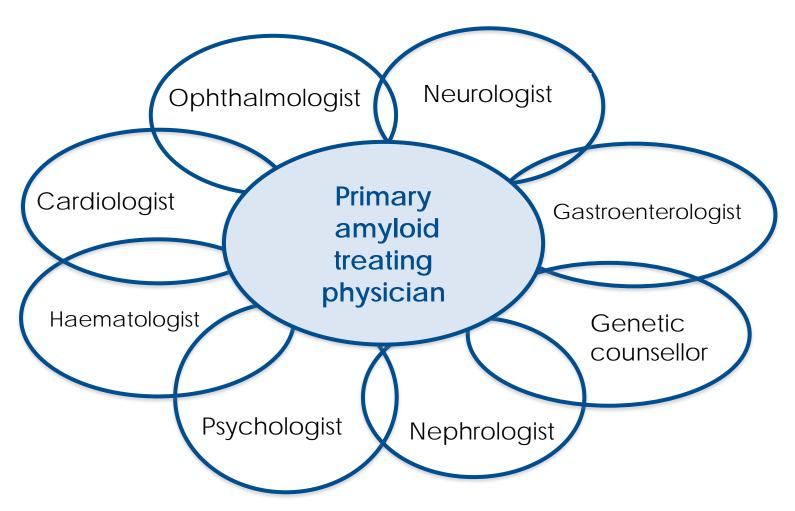
A network of > 60 clinical institutions throughout the country collaborate within the framework of the Italian Society for Amyloidosis

- Sharing common, annually updated diagnostic and therapeutic protocols
- Making qualified care readily accessible to patients
- Facilitating enrollment in clinical trials
- Participation to other Regional/National/International networks (i.e Telethon registry, ERN-RITA, ERN-EuroBloodNet)
- Development of international clinical guidelines
- Development of regional clinical recommendations (PDTA)
- Collaboration with Patients' Advocacy Groups

The Italian Transthyretin Amyloidosis Web-Network (ITA-WebNet)



A multidisciplinary approach to patients and families



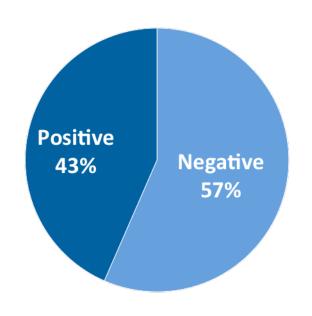
Helps patient and family intake and promotes a long-term relationship Improves adherence to treatment and motivates follow-up in asymptomatic carriers Increases staff skills and experience

Taking care of people with systemic amyloidosis

"Look out the other's window. Try to see the world as your patient sees it." — Irvin D. Yalom, The Gift of Therapy



TTR pre-symptomatic testing: Pavia experience



290 presymptomatic tests performed

- 76 (27%) siblings
- 214 (73%) offspring

Median age at PST was 47 years (range 19–86)

81/126 carriers periodically followed-up with at least one contact in the past 12 months

Once asymptomatic mutation carriers are identified, a structured follow-up will help to identify the earliest signs of the disease, allowing for prompt treatment initiation

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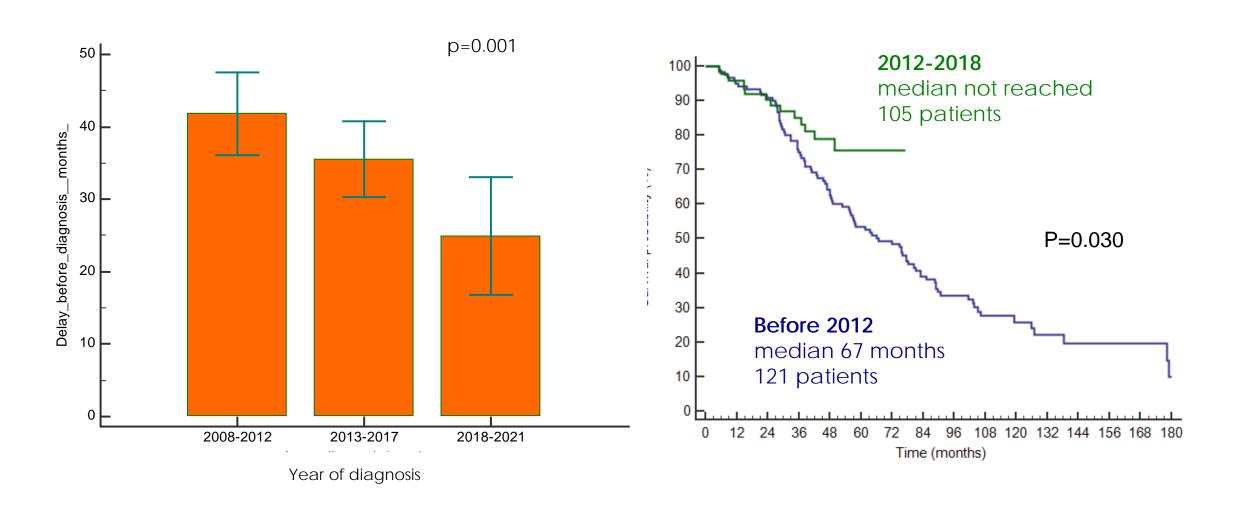




Giovanni Palladini Giampaolo Merlini

Andrea Foli Paolo Milani Alessandro Lozza Roberta Mussinelli Francesca Lavatelli Mario Nuvolone Marco Basset Francesca Benigna Stefano Perlini Paola Rognoni Simona Casarini Pasquale Cascino Margherita Bozzola Jessica Ripepi Alice Nevone Anna Carnevale Baraglia Claudia Sforzini Elona Luka Eleonora Di Buduo

Diagnostic delay (months) and survival in 281 patients with hATTR amyloidosis according to year of diagnosis



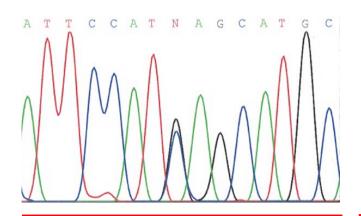
Diagnostic approach to transthyretin amyloidosis

Symptoms and signs
Abnormal NCS/Abnormal echo/MRI
Gl/renal function



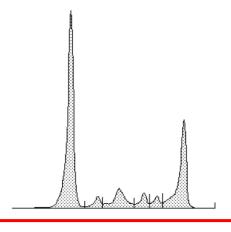


Identify the amyloid protein



TTR gene analysis

Obici and Adams JPNS 2020 Vrana et al. Blood 2009



Serum and urine immunofixation

Free light chains (FLC) measurement

Document and type amyloid deposits



