Hypertrophic Cardiomyopathy

Overview

Hypertrophic cardiomyopathy, or HCM, is a chronic disease involving thickening of the heart muscle. HCM can lead to the development of debilitating symptoms and serious complications.¹⁻²

The most frequent cause of HCM is the presence of mutations in sarcomere protein genes.³

There are two main subtypes of HCM:

- **Obstructive HCM**: When the left ventricular outflow tract (LVOT) becomes blocked or has reduced blood flow due to the heart walls becoming thick or stiff.⁴ The majority of HCM cases are obstructive in nature.
- **Non-obstructive HCM**: When the thickened heart muscle does not cause restriction of blood flow.⁵

In both obstructive or non-obstructive HCM patients, symptoms such as chest pain, shortness of breath, palpitations, and fainting may arise. These symptoms may interfere with a patient’s ability to participate in daily activities.

Complications of HCM can include atrial fibrillation, stroke, heart failure, and in rare cases, sudden cardiac death.⁶

Prevalence in the U.S.

HCM is estimated to affect anywhere from 1 in every 500 people to 1 in every 200 people.⁷,⁸⁹

HCM has been estimated to be present in ~700,000 adults in the U.S. Of this number, it is estimated that ~85% may remain undiagnosed.¹⁰

Symptoms

Common signs and symptoms of HCM can include:⁴⁵

- Chest pain or discomfort experienced during physical exertion
- Palpitations
- Shortness of breath
- Fatigue & lightheadedness
- Dizzy spells & fainting
- Fast or irregular heartbeat
- Chest pain or discomfort experienced during physical exertion
- Palpitations
- Shortness of breath
- Fatigue & lightheadedness
- Dizzy spells & fainting

HCM may affect people in different ways. For some, symptoms come and go while others may experience symptoms that can persist for a long time. Still, others may not experience symptoms right away, yet the disease may continue to progress.

Diagnosis

HCM is often inherited and is the most common form of genetic heart disease.¹¹ It can happen at any age, but patients are typically diagnosed in their midlife, and the condition is chronic.¹² Knowing one’s medical history and any signs and symptoms is an important first step in receiving an accurate diagnosis. Some tests doctors may use to diagnose and monitor HCM include:/nine.numr

- **Echocardiogram**: An echocardiogram uses sound waves (ultrasound) to see if your heart's muscle is abnormally thick.
- **Cardiac MRI**: A cardiac MRI uses powerful magnets and radio waves to create images of your heart. It gives your doctor information about your heart muscle and shows how your heart and heart valves work.

Management

Current treatment guidelines focus on symptom management.¹³ Following a HCM diagnosis, it is important for patients to work with their healthcare provider to learn more about their disease and understand different management options. The healthcare provider will work with patients to come up with the management plan that suits them.

Bristol Myers Squibb is committed to helping patients with hypertrophic cardiomyopathy and other cardiovascular diseases.

¹ The 1995 CARDIA study, a multicenter, US-population-based echocardiography study of 4111 subjects (aged 23-35) identified the prevalence of HCM as 1:500 people in the general population.
² Estimated undiagnosed range calculated using prevalence of 1:500, estimated US population (332,330,571 in May 2021), and estimated diagnosed population (~100,000).