Transcript Details
This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: https://reachmd.com/clinical-practice/cardiology/hypertrophic-cardiomyopathy-moving-from-monitoring-to-action-in-the-era-of-myosin-inhibitors/56461/

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Hypertrophic Cardiomyopathy: Moving From Monitoring to Action in the Era of Myosin Inhibitors

Dr. Rossano:
Hello. From ACC Scientific Sessions 2026 in New Orleans, I'm Dr. Joe Rossano.

Hypertrophic cardiomyopathy, or HCM, has traditionally been managed by monitoring symptoms and escalating treatment as the disease progresses. But emerging clinical data from SCOUT-HCM and other myosin inhibitor trials are expanding how we think about treating this disease across the HCM spectrum. I'm going to quickly review why identifying eligible patients for cardiac myosin inhibitors and taking a more proactive approach to treatment may help improve outcomes in our HCM patients.

HCM has traditionally been managed reactively, with treatment escalation occurring only after symptoms significantly worsen. The era of cardiac myosin inhibitors is changing how we think about treatment, shifting focus towards therapies that target the underlying disease pathophysiology.

Data from SCOUT-HCM and other myosin inhibitor trials like MARVEL-HCM are helping to expand how we think about treatment across the HCM spectrum.

Data just published here at ACC 2026 for MARVEL-HCM find that a substantial proportion of symptomatic HCM patients exhibit only provocable LVOT obstruction. Mavacamten demonstrated important clinical and hemodynamic benefits in these patients, underscoring the importance of routine measurements of provocable gradients to uncover a latent obstruction, thereby optimizing therapeutic strategies and improving symptoms in these patients.

These data are meaningful because they expand how we think about identifying treatable patients in obstructive hypertrophic cardiomyopathy. In a real-world cohort, patients with only provocable LVOT gradient still appear to derive meaningful benefit from mavacamten, including lower gradients, improved functional class, without new safety concerns. And for practicing clinicians, this underscores the value of provocative testing and not only relying on resting gradients.

Clinicians should proactively identify patients with symptomatic obstructive HCM who may be eligible for disease-targeted therapies. Timely evaluation, imaging, and referral to experienced HCM centers are essential for appropriate patient selection. This is a call to action: avoid unnecessary delays, identify and treat eligible patients sooner in the era of myosin inhibitors.

From ACC 2026, I'm Dr. Joe Rossano, and thank you for watching.