

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/programs/heart-matters/equitable-care-for-attr-cm-improving-early-diagnosis-in-high-risk-groups/36142/>

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Equitable Care for ATTR-CM: Improving Early Diagnosis in High-Risk Groups

Announcer:

You're listening to *Heart Matters* on ReachMD. On this episode, we'll hear from Dr. Kevin Alexander, who's an Assistant Professor of Medicine at Stanford University School of Medicine. He'll be discussing how we can improve the timely detection of ATTR-CM in high-risk populations. Here's Dr. Alexander now.

Dr. Alexander:

I think all of us as clinicians can take a few practical steps to help improve the early detection of ATTR-CM in high-risk populations. First of all, I think we have to meet patients where they are. And what I mean by that is, if we wait for people to be referred to us to do the initial diagnostic workup, a lot of times that can be too late. And so I think that setting up partnerships with community practices to help facilitate diagnostic testing in the local community is important. I think there's a role for telemedicine, to be able to speak to these patients before they come to our centers. And then third, I think that as we start to use automation for diagnosis, for not just ATTR-CM but other diseases, this will also be beneficial for high-risk populations. So using AI and machine learning for screening, ECGs and echocardiograms, and other clinical information for patients that are at risk of having ATTR-CM will also help to improve equity and access to care as it relates to ATTR-CM diagnosis.

I think collaboration among healthcare providers will be really important to reduce diagnostic disparities for ATTR-CM. There's the collaboration between Amyloid Centers of Excellence and community practices to meet patients where they are and to start the initial diagnostic workup closer to home for patients. But across specialties, many of these patients, particularly hereditary ATTR patients, might have extra-cardiac manifestations, such as neuropathy and gastrointestinal symptoms, and patients may be seen by multiple specialists before arriving at the diagnosis. And so I think improving communication across specialties and removing silos of care will be very important for accelerating the time to diagnosis this.

In terms of making the diagnosis of ATTR-CM more equitable from a system standpoint, I think that for large healthcare systems, really leveraging the multidisciplinary care across specialties and committing resources to allowing patients to see multiple specialists as needed. So, for example, coordinating, say, neurology and cardiology visits on the same day or at the same location can be helpful for patients so that they don't have to go to different places at different times to get different aspects of their care.

I think from a policy standpoint, one thing that could be helpful is expanding the use of telemedicine so that we can get into these communities where maybe the patients have limited means to see us physically, but a lot of times we can help to guide care remotely via telemedicine, particularly if we're partnering with local medical practices. And so I think for rare disease or uncommon disease, telemedicine can be a powerful tool to help us make early diagnosis more equitable.

Announcer:

That was Dr. Kevin Alexander talking about strategies to make early ATTR-CM diagnosis more equitable. To access this and other episodes in our series, visit *Heart Matters* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!