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Could your patient with
unexplained heart
disease have
undiagnosed Fabry
disease?
When to Rule Out Fabry



CFA

CANADIAN
FABRY
ASSOCIATION



Have you considered Fabry disease as a possible cause?

Fabry disease is an X-linked lysosomal storage disorder, which can affect both men and women.¹

A mutation of the α -galactosidase A (α -Gal A) gene on the X chromosome causes α -Gal A deficiency.²

Deficiency in α -Gal A results in progressive accumulation of the glycolipid Gb3 in lysosomes, causing widespread organ damage and premature death.^{3,4}

The heart in Fabry disease

Cardiac involvement is common in Fabry disease, affecting 69% of male and 65% of female patients.⁴ Cardiac disease is the leading cause of death in Fabry disease.^{5,6}

The prevalence of cardiac signs and symptoms increases with age in patients with Fabry disease.⁷

Of 42 patients enrolled in the Fabry Outcome Survey whose deaths were reported between 2001 and 2007, cardiac disease was the main cause of death (where known) in both male (34%) and female (57%) patients.⁶



Common cardiac manifestations include:^{8,9}

- > Left ventricular hypertrophy (LVH)
- > Hypertrophic cardiomyopathy (HCM)
- > Conduction defects
- > Arrhythmias
- > Valvular abnormalities
- > Coronary artery disease
- > Heart failure

There are two forms of cardiac involvement in Fabry disease:

1 Classic

Cardiac manifestations occur alongside other signs and symptoms of Fabry disease.⁴

The predominant symptoms of cardiac involvement are dyspnea as a result of cardiac failure caused by LVH, chest pain, palpitations, and syncope, depending on the cardiac tissue involved.¹⁰

2 Cardiac variant

Manifestations are predominantly cardiac with residual levels of α -Gal A activity.^{11,12}

Cardiac manifestations typically present later in life and are limited to the heart, usually as LVH.⁵⁻⁷ LVH was reported to begin at a mean age of 28.7 years for men and 34.1 years for women.⁶

1/20–25*

patients with unexplained LVH† or HCM could have Fabry disease^{13,14}

LVH is a common cardiac manifestation of Fabry disease¹⁵

The international Fabry Outcome Survey of untreated patients observed LVH in:



53%
of males
(mean age of 45 years)⁷



33%
of females
(mean age of 54 years)⁷

Fabry disease and earlier diagnosis

Fabry disease presents a diagnostic challenge that can be attributed to two main factors:

1

It is rare, affecting approximately 1 in 40,000 males¹⁶ and 1 in 20,000 females.¹⁷



1 in 40,000¹⁶



1 in 20,000¹⁷

2

The clinical presentation of Fabry disease is phenotypically heterogeneous: organ involvement can range from a classic clinical picture with multiple organ manifestations to an isolated organ being affected, e.g. the heart.¹⁸

An analysis of Fabry disease patients revealed that over 25% were initially misdiagnosed, with a mean time of over 13 years[‡] between onset of symptoms and diagnosis.⁴

*The prevalence of Fabry disease was 4% (1 in 25) in a cohort of men (N=100) with unexplained LVH¹³ and 5% (1 in 20) in a cohort of patients (N=141) with unexplained HCM¹⁴

†Unexplained = not caused by hypertension/valve disease, etc. Sarcomeric causes were excluded.

‡Mean delay was 13.7 years in males and 16.3 years in females.⁴

Could your HCM patient have Fabry disease?

Fabry disease is common among patients with LVH, and studies have estimated that 3%–12% of patients with unexplained LVH have Fabry disease.^{11,16,19}

Fabry disease should therefore be considered in patients with unexplained LVH, such as those without hypertension or aortic valve pathologies, or in patients with LVH considered disproportionate with treatment-controlled hypertension.¹⁵

Patients > 30 years of age with LV wall thickness > 12 mm (males) or > 11 mm (females)^{15,20–23}

NO

Patient presents with other cardiac signs and symptoms (arrhythmias, angina, valvular abnormalities, or dyspnea), and one or more of the following:^{7,15,21,24–33}

- History of stroke/transient ischemic attack < 55 years of age³⁴
- Reduced eGFR or proteinuria¹⁵
- Neuropathic pain, most common in extremities (acroparesthesia)^{15,22}
- Family member(s) with end-stage renal disease by the age of 50 years or who died of kidney failure, heart failure, stroke, or sudden cardiac death by the age of 60 years.¹⁵

YES

Test for Fabry disease

YES

What to do next if you suspect that your patient has Fabry disease: RULE OUT FABRY.

Refer to your local metabolic/genetics clinic or treatment centre for a comprehensive assessment and/or to order a free screening test.

To order your free Fabry disease screening test, visit **dbskit.ca** or contact your local Takeda representative.

For more information on Fabry disease and available patient resources, please visit the Canadian Fabry Association at: **www.fabrycanada.com**.

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