

SGLT2 Inhibitors in Heart Failure: A Real-World Analysis of Eligibility and Prescribing Barriers in Internal Medicine

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Background and Aims: SGLT2 inhibitors have demonstrated significant cardiovascular benefits in patients with heart failure, regardless of diabetic status. Despite guideline recommendations, their uptake in Internal Medicine settings remains suboptimal. This study aimed to assess the proportion of eligible patients and explore clinicians' concerns limiting prescription.

Materials/Patients and Methods: We retrospectively reviewed all admissions for acute heart failure in our Internal Medicine Unit from December 2024 to May 2025. Eligibility for SGLT2 inhibitors was assessed based on ESC 2023 guidelines and drug labeling. An anonymous questionnaire was distributed to physicians at some Internal Medicine Units in Campania to identify perceived obstacles and risks [1, 2].

Results: Out of 85 patients, 60 (70.8%) met criteria for SGLT2 inhibitor therapy. However, only 25 (41.1% of eligible patients) received a prescription at discharge. Main concerns reported by clinicians included risk of worsening renal function (65%), hypotension (50%), genital infections (35%), and ketoacidosis (20%).

Discussion: Our data confirm a significant gap between eligibility and real-world use of SGLT2 inhibitors in heart failure. Clinicians' concerns, often not aligned with current evidence, may limit appropriate use. Targeted education and shared care protocols may help overcome these barriers and optimize patient outcomes.

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