

Keller DM, Straburzyńska-Migaj E, Lesiak M. Advancing treatments for transthyretin amyloid cardiomyopathy: Innovations in RNA silencing, gene editing, TTR stabilization, and degradation. *Pol Heart J*. 2025.

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SUPPORTIVE THERAPIES

Sodium-glucose co-transporter 2 inhibitors (SGLT2i) have made a breakthrough in treating heart failure. Given that diuretics represent the first line of therapy in amyloidosis, studies investigating the effect of SGLT2i on ATTR-CM were inevitable. SGLT2i therapy demonstrates good tolerability among patients with ATTR-CM [1]. Further exploration of its efficacy in this population should be pursued through randomized controlled trials.

Low-dose radiotherapy shows promise in eliciting antioxidant, anti-inflammatory, and tissue regeneration responses. While ongoing investigations focus on its application in Alzheimer's disease, the concept is also being explored in ATTR-CM [2, 3].

Trials involving these therapies, as well as additional options for supportive treatments in ATTR-CM, are summarized in *Table S1*.

Table S1. Studies of supportive therapies in the treatment of ATTR-CM

COMPLETED										
Name of the investigation al drug	NCT Numb er	Resp onsib le party	Name of the study	Form of amyloidosis	St ud y pe rio d	Ph as e	Rand omize d, doubl e-blind, placeb o- contro lled	Dose	Num ber of parti cipan ts	Prima ry outco me

Dapagliflozin [73]	-	Bern University Hospital	SGLT2 inhibitor therapy for transthyretin amyloid cardiomyopathy : early tolerance and clinical response to dapagliflozin	ATT Rv, ATT Rwt	2019-2021	-	no	10 mg/QD, orally	34	In tafamidis-treated ATTR-CM patients, initiation of dapagliflozin was well tolerated
Empagliflozin	NCT05233163	Columbia University	SGLT2 Inhibitors in Transthyretin Amyloid Cardiomyopathy	ATT Rv, ATT Rwt	2022-2023	IV	no	10 mg/QD, orally	15	SAE rate The results have yet to be published
Trimetazidine (TMZ, Vastarel)	NCT05633563	Aarhus University Hospital	CACTuS – TMZ	ATT Rwt	2021-2023	IV	yes	unknown, orally	24	Change in PCWP after 4 weeks

Dobutamine	NCT06318260	Aarhus University Hospital Skejby	DobAT-TR Haemodynamic Effects of Dobutamine in Patients With Wild-type Transthyretin Amyloid Cardio myopathy	ATT Rwt	20 24- 20 26	I/I I	no	stepwise dobutamine dosage increase every 5 minutes – 2, 3, 5, 10, 20, (40) ug/kg /min	35	Mean cardiac output increase by 10%, evaluated using thermodynamic invasive methods; assessed at each dobutamine dose level and at the end of infusion
Exercise training	NCT05797857	Brigham and Women's	Exercise Training in Transth	ATT Rv, ATT Rwt	20 23- 20 28	-	no	supervised, personalized	40	Change in peak VO2 after 12 weeks

		Hospital	Myocardial Cardiac Amyloidosis					exercise training program, two 60- minute exercise training sessions per week		
Low dose radiation therapy	NCT03397810	University Hospital, Geneva	Effect of Radiotherapy on ATTR Cardiac Amyloidosis : a Proof of Concept Study	ATTR Rv, ATTR Rwt	20 19- 20 26	-	no	10 Gy in 5 fractions of 2 Gy on 5 consecutive days	36	Changes in amyloid deposition using SUVr on 18F- Amyloid PET scans before and 12 weeks

										after low dose radioth erapy
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Abbreviations: ATTR-CM, transthyretin amyloid cardiomyopathy; PET, positron emission tomography; peak VO₂, peak oxygen consumption; PCWP, pulmonary capillary wedge pressure; SAE, serious adverse event; SUVR, standardized uptake value ratio

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