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## CARDIOMETABOLIC SYNDROME AND INCREASED RISK OF HEART FAILURE

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Approximately 50 % of patients with heart failure have diastolic heart failure (HFPEF) with the major predisposing risk factors Age, inactivity, obesity, insulin resistance (IR), type-2 diabetes, and hypertension. The prognosis of HFPEF is comparable to that of systolic heart failure, but without any specific or effective treatment. This review presents a biomathematically corrected diagnostic approach for quantification of diastolic dysfunction (DD) via the age dependency of diastolic function. Pathophysiological mechanisms for DD in the cardiometabolic syndrome (CMS) are mainly based on downstream effects of IR including insufficient myocardial energy supply. The second section discusses therapeutic strategies for the control and therapy of CMS, IR and the associated DD/HFPEF with a focus on dietary therapy that is independent of weight loss but improves all manifestations of the CMS and reduces cardiovascular risk.

### Biography

Helene von Bibra studied medicine in Munich, Germany. She worked at Klinikum Großhadern, Munich, Kings College and Brompton Hospital, London, Municipal Hospital München-Schwabing and Klinikum rechts der Isar, Technical University Munich receiving the Internal medicine and the Cardiology board certifications in 1983 and 1993. In 1999, she became appl. Professor for Internal Medicine/Cardiology of the Technical University, Munich. She became appl. Professor for Internal Medicine/Cardiology of the Technical University, Munich in 1999 and continued her scientific work as visiting professor in 1997 Linköping, Sweden, from 1998 – 2002 at the Karolinska Hospital in Stockholm and then at the Municipal Hospital Bogenhausen, Munich. Member of cardiologic/diabetologic societies: ESC since 2000 as FESC, EASD, DGK, DDG.

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