# PROTOCOL: HCM MAVACAMTEN

The prescription drug, **mavacamten** (CAMZYOS), is indicated for the treatment of adults with symptomatic NYHA class II-III obstructive hypertrophic cardiomyopathy to improve functional capacity and symptoms. *In trials, 4-11% of patients had a transient decrease of LVEF < 50%*

## Inclusion Criteria

- Patient receiving mavacamten treatment for hypertrophic cardiomyopathy. Typically, echocardiographic monitoring is required at weeks 4, 8, 12, and every 12 weeks thereafter
- Patients will have an echocardiogram performed prior to drug initiation. While the patient is on mavacamten this protocol should be performed indefinitely (regardless of when their last comprehensive echo was performed)

## EIMS Data

**Procedure Components:** 2-D Limited, Color Flow Doppler, Doppler Limited, TDI (Tissue Doppler Imaging)
**Serial Study:** General, HCM
**First Finding:** Echocardiogram performed per Hypertrophic Cardiomyopathy [# month mavacamten] protocol.
**Second finding:** Last full echo performed…
**Performable: (TTE) 2D Limited with Limited Doppler**

| 2D | CFI | Doppler | 2D Measure |
|---|---|---|---|
| **Parasternal** | | | |
| LV fx & RWMA | | | LVID d/s |
| **Apical** | | | |
| *LV fx & RWMA<br>RV fx | MR (4ch) | Mitral inflow: E, A, DT<br>Medial e'<br>TR velocity (best window)<br>**LVOT MIG: rest, Vals, & squat-to-stand | LV Volumes (3D preferred, or 2D) |
| **Subcostal** | | | |
| IVC | | | |

## Caveats and Tips

- ***LV fx**: it is not necessary to analyze global longitudinal strain, but please acquire apical views with a similar depth, width, & frame rate in the event that speckle tracking strain is performed at a later date
- ****LVOT MIG**: assess at rest. If the resting gradient is <50 mmHg proceed with Valsalva, if the Valsalva gradient is <50 mmHg proceed with squat-to-stand. Amyl nitrite is not necessary
- The following **measurements must be documented in measurements or findings**: LVEF, LVOT MIG rest, LVOT MIG Valsalva/squat-to-stand (if performed)
- Image enhancement agent is typically not indicated unless unable to determine LVEF without