Testing for B-Type Natriuretic Peptide in the Diagnosis and Assessment of Heart Failure: What are the Nuances?

Supplement 5 to Volume 71, June 2004

Supplement Editor

JAMES B. YOUNG, MD
Cleveland Clinic

B-TYPE NATRIURETIC PEPTIDE (BNP) has recently assumed a prominent role in the management of heart failure, owing to its emergence as a therapy in the form of the biologic agent nesiritide and its recognition as a useful diagnostic biomarker for the disease, particularly in the emergency room.

The usefulness of BNP as a biomarker in the acute care setting has prompted growing interest in the peptide's potential roles as a diagnostic and prognostic marker in the outpatient setting. To explore these roles, the *Cleveland Clinic Journal of Medicine* convened a roundtable discussion in March 2004 among a panel consisting of cardiologists with expertise in BNP as well as internists who are now assessing what BNP testing can bring to their practice. The aims were to begin to define the role of BNP testing in the outpatient setting and, in the words of roundtable moderator James Young, MD, "to try to reach consensus about what we know and what we don't know."

The transcript of that discussion follows. Tables and figures within the transcript were included by consensus of the panel.

Disclosures

The following panelists reported that they have a relationship that, in the context of this supplement, could be perceived as a potential conflict of interest:

- *James B. Young, MD,* reported that he has received grant/research support from Biosite Inc.
- *Gary S. Francis, MD,* reported that he serves on an advisory board to Biosite Inc.
- *Alan Maisel, MD,* reported that he has received grant/research support from, serves as a consultant to, and is on the speakers' bureau of Biosite Inc. He also reported that he is on the speakers' bureau of Scios Inc.
- *Franklin Michota, MD,* reported that he serves as a consultant to Scios Inc.

(*Natalie G. Correia, DO,* reported that she has no relationships that could be perceived as a potential conflict of interest in the context of this supplement.)

Topics and editors for supplements to the *Cleveland Clinic Journal of Medicine* are determined by the *Journal*'s editor-in-chief and staff. Supplement editors are chosen for their expertise in the topics discussed and are responsible for the scientific quality of supplements, including the review process. The *Journal* ensures that supplement editors and authors fully disclose any relationships with industry, including the supplement underwriter. For complete guidelines on grant-supported supplements to the *Journal*, go to **www.ccjm.org/pdffiles/guidelines.pdf.**

Roundtable Panelists

James B. Young, MD
Roundtable Moderator and Supplement Editor
Chairman, Division of Medicine
Head, Section of Heart Failure, Department of Cardiovascular Medicine
Cleveland Clinic Foundation
Cleveland, Ohio

Natalie G. Correia, DO
Associate Director, Internal Medicine Residency
Staff, Department of General Internal Medicine
Cleveland Clinic Foundation
Cleveland, Ohio

Gary S. Francis, MD
Professor of Medicine, Cleveland Clinic Lerner College of Medicine
Staff, Department of Cardiovascular Medicine
Cleveland Clinic Foundation
Cleveland, Ohio

Alan Maisel, MD
Professor of Medicine, University of California, San Diego, School of Medicine
Director, Coronary Care Unit, La Jolla VA Medical Center
San Diego, Calif.

Franklin Michota, MD
Head, Section of Hospital Medicine
Department of General Internal Medicine
Cleveland Clinic Foundation
Cleveland, Ohio

Acknowledgment

This publication is supported by an unrestricted educational grant from Biosite Incorporated.

Copyright© 2004 The Cleveland Clinic Foundation.

The statements and opinions expressed in this supplement to the *Cleveland Clinic Journal of Medicine* are those of the authors and not necessarily of The Cleveland Clinic Foundation, its Board of Trustees, or Biosite Incorporated.

The *Cleveland Clinic Journal of Medicine* (ISSN 0891-1150) is published 12 times yearly by The Cleveland Clinic Foundation.

Subscription rates: U.S. and possessions: personal $98; institutional $124; single copy/back issue $16. Foreign: $124; single copy/back issue $16. Institutional (multiple-reader rate) applies to libraries, schools, hospitals, and federal, commercial, and private institutions and organizations. Individual subscriptions must be in the names of, billed to, and paid by individuals.

Postmaster address changes: Cleveland Clinic Journal of Medicine, NA32, 9500 Euclid Avenue, Cleveland, OH 44195. Subscription orders, editorial, reprint, and production offices (same address): (216) 444-2661 (phone); (216) 444-9385 (fax); ccjm@ccf.org (e-mail); www.ccjm.org (Web)

Printed in USA.