

ATTRV FROM ALL ANGLES A Multidisciplinary Lens on a Multisystem Disease

A Team Approach to Patient-Centered Care

Why a Multidisciplinary Team (MDT)?

Hereditary transthyretin amyloidosis (ATTRv) is a progressive, multisystem disease with variable presentations. Patients may develop cardiomyopathy, polyneuropathy, or a combination of both. Red flag symptoms include cardiac, sensory-motor neuropathy, gastrointestinal, musculoskeletal, and autonomic neuropathy manifestations. A relatively rare disease, early management and intervention of ATTRv requires a vigilant, coordinated care team. Appropriate, ongoing treatment and regular assessments by team members are critical for optimizing outcomes.

Key Clinical Specialties Involved in ATTRv Management

(includes physicians, physician associates, nurse practitioners, nurses, pharmacists, genetic counselors, physical therapists)

DISCIPLINE	KEY RESPONSIBILITIES
Cardiology	Evaluate cardiac involvement: Clinical assessment, ECG, biomarkers, staging, echocardiography, 99mTc-pyrophosphate scintigraphy (PYP) if indicated. Manage heart failure, atrial fibrillation, conduction abnormalities. Treat ATTRv with appropriate, approved pharmacotherapy.
Neurology	Assess sensorimotor (e.g., length-dependent neuropathic pain and weakness, altered sensation, difficulty walking) and autonomic neuropathy (e.g., orthostatic hypotension, recurrent urinary tract infections, sexual dysfunction, sweating abnormalities, urinary retention). Treat ATTRv with appropriate, approved pharmacotherapy.

DISCIPLINE	KEY RESPONSIBILITIES
Gastroenterology	Address GI manifestations such as diarrhea, constipation, early satiety, or weight loss
Genetics- Genetic Counseling	Confirm TTR gene mutations, educate patients and families, coordinate cascade screening
Hematology- Oncology	Rule out light-chain (AL) amyloidosis through serum/urine testing and bone marrow biopsy
Nephrology	Monitor renal involvement, manage proteinuria, support renal function preservation
Ophthalmology	Assess/manage abnormal conjunctival vessel (ACV), keratoconjunctivitis sicca (KCS), pupillary abnormalities
Orthopedics	Assess/manage musculoskeletal symptoms, including carpal tunnel syndrome, lumbar spinal stenosis, biceps tendon rupture. Assess past orthopedic surgeries
Primary Care	Note red flag symptoms, coordinate referrals, manage general health and comorbidities (diabetes, CKD), monitor treatment adherence/safety.

DISCIPLINE	KEY RESPONSIBILITIES
Physical Therapy	Improve mobility and strength, adapt home and assistive equipment, preserve independence
Palliative Care	Provide symptom relief, psychological support, and improve quality of life



Best Practices in Multidisciplinary Team (MDT) Care

- Case Conferences: Regular MDT meetings to discuss complex cases and treatment plans
- Shared Documentation: Use of integrated EHR systems to streamline communication
- Early Diagnosis Pathways: Clear protocols to reduce diagnostic delay
- Genetic Counseling Access: Embedded or referred services for patient and cascade testing
- Updated Treatment Pathways: Including recently approved therapies

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