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Step Down Strategy of Immunosuppressive Agents in Heart Transplants

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Heart transplantation has dramatically improved survival rates for end-stage heart disease patients. Immunosuppression is vital to prevent graft rejection post-transplantation, but long-term immunosuppression can lead to significant morbidity. This presentation discusses the rationale, methodology, and outcomes of implementing a step down strategy of immunosuppressive therapy in heart transplant recipients. We reviewed current guidelines, recent clinical trials, and retrospective studies focused on immunosuppressive strategies in heart transplantation. A systematic approach was used to analyze the criteria for safely reducing immunosuppression, the protocols for adjustment, and the monitoring strategies to manage rejection risk. Evidence supports a tailored reduction in immunosuppression for selected patients, considering individual risk factors such as time post-transplant, history of rejection episodes, and biomarker profiles. Protocols include gradual tapering of immunosuppressants, with vigilant monitoring using clinical assessment, laboratory markers, and imaging techniques. Case studies demonstrate the feasibility of a step down strategy with positive outcomes, reducing adverse effects without increasing the incidence of graft rejection. A step down strategy of immunosuppressive agents in heart transplant recipients can be a safe and effective approach to reduce the risks associated with long-term immunosuppression. The success of this strategy relies on careful patient selection, close monitoring, and a responsive management plan for potential rejection. Future research should focus on personalized immunosuppression regimens to optimize transplant outcomes further.