

selhání. Léčba se tedy řídí platnými doporučeními ESC pro diagnostiku a léčbu akutního a chronického srdečního selhání a doporučeními pro léčbu arytmií. Vzhledem k riziku tvorby intrakardiálních trombů a následné kardioembolizaci je u nemocných s EFLK pod 40 % doporučena trvalá antikoagulační léčba (69).

## Závěr

Problematika kardiomyopatií je velice široká a obsáhnout možnosti jejich správné diagnostiky, diferenciální diagnostiky a léčby

není snadné. Současně jde o poměrně často se vyskytující onemocnění, nezřídka u mladých jedinců, které – není-li včas a správně diagnostikováno a léčeno – může být spojeno s významnou morbiditou i mortalitou. Jejich projevy mohou být v některých případech multisystémové a přesahují tak rámec kardiologie. Současně došlo v posledních letech k dramatickým změnám v dostupnosti řady moderních diagnostických metod i terapeutických postupů, které jsme se v textu pokusili shrnout.

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