

Available online at www.sciencedirect.com

ScienceDirect

journal homepage: <http://www.elsevier.com/locate/crvasa>

Guidelines

2015 ESC Guidelines for the management of infective endocarditis. Summary document prepared by the Czech Society of Cardiology[☆]



Kateřina Linhartová^{a,*}, Jiří Beneš^b, Pavel Gregor^c

^a Department of Cardiac Surgery, Complex Cardiovascular Centre, Charles University of Prague, University Hospital Pilsen, Czech Republic

^b Department of Infectious Diseases, 3rd Faculty of Medicine, Bulovka Teaching Hospital, Prague, Czech Republic

^c Dept. of Medicine III – Cardiology, Univ. Hosp. Kralovske Vinohrady and 3rd Medical Faculty of Charles Univ., Prague, Czech Republic

The authors of the original full text of the ESC guidelines [1]: Gilbert Habib, Patrizio Lancellotti on behalf of the Task Force for the management of infective endocarditis of the European Society of Cardiology.

ARTICLE INFO

Article history:

Received 17 November 2015

Received in revised form

18 December 2015

Accepted 19 December 2015

Available online 26 January 2016

Keywords:

Endocarditis

Cardiac imaging

Valve disease

Echocardiography

Prognosis

Guidelines

Infection

[☆] For permissions: please e-mail: guidelines@escardio.org.

* Corresponding author at: Kardiologické oddělení, Fakultní nemocnice Plzeň, Alej Svobody 80, 304 60 Plzeň, Czech Republic. Tel.: +420 728980183.

E-mail address: linhartkaterina@seznam.cz (K. Linhartová).

<http://dx.doi.org/10.1016/j.crvasa.2015.12.004>

0010-8650/© 2015 European Society of Cardiology. All rights reserved. Published by Elsevier Sp.z.o.o. on behalf of the Czech Society of Cardiology.

Nuclear imaging
 Cardiac surgery
 Cardiac device
 Prosthetic heart valves
 Congenital heart disease
 Pregnancy
 Prophylaxis
 Prevention



ČESKÁ KARDIOLOGICKÁ SPOLEČNOST
 THE CZECH SOCIETY OF CARDIOLOGY

Contents

1. Preamble	e109
2. Justification/scope of the problem	e109
3. Prevention	e109
4. The 'Endocarditis Team'	e111
5. Diagnosis	e111
5.1. Clinical features	e111
5.2. Laboratory findings	e112
5.3. Imaging techniques	e112
5.4. Microbiological diagnosis	e113
5.5. Diagnostic criteria	e113
6. Prognostic assessment at admission	e114
7. Antimicrobial therapy	e115
7.1. Streptococcal endocarditis	e115
7.2. Staphylococcal endocarditis	e115
7.3. Enterococcal endocarditis	e115
7.4. Endocarditis due to other pathogens	e115
7.5. Concluding remarks	e119
8. Main complications of left-sided valve infective endocarditis and their management	e119
8.1. Heart failure	e119
8.2. Uncontrolled infection	e120
8.3. Prevention of systemic embolism	e120
9. Other complications of infective endocarditis	e122
9.1. Neurological complications	e122
9.2. Infectious aneurysms	e123
9.3. Splenic complications	e123
9.4. Myocarditis and pericarditis	e123
9.5. Heart rhythm and conduction disturbances	e123
9.6. Musculoskeletal manifestations	e123
9.7. Acute renal failure	e124
10. Surgical therapy: principles and methods	e124
10.1. Operative risk assessment	e124
10.2. Preoperative management	e124
10.3. Surgical approach and techniques	e124
10.4. Postoperative complications	e124
11. Outcome after discharge: relapse, follow-up and long-term prognosis	e124
12. Management of specific situations	e124
12.1. Prosthetic valve endocarditis	e124
12.2. Infective endocarditis affecting cardiac implantable electronic devices (CDRIE)	e125
12.3. Infective endocarditis in the intensive care unit	e125
12.4. Right-sided infective endocarditis	e126
12.5. Infective endocarditis in congenital heart disease	e126
12.6. Infective endocarditis during pregnancy	e126
12.7. Antithrombotic therapy in infective endocarditis	e126
12.8. Non-bacterial thrombotic endocarditis (NBTE) and endocarditis associated with cancers	e127
13. To do and not to do messages from the guidelines	e127
References	e128

Download English Version:

<https://daneshyari.com/en/article/2722351>

Download Persian Version:

<https://daneshyari.com/article/2722351>

[Daneshyari.com](https://daneshyari.com)