

Overview of endocarditis epidemiology and management during a 7-year period – single centre experience

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Infected endocarditis is a rare but clinically underappreciated condition associated with high morbidity and mortality. We present data from 30 cases of endocarditis diagnosed and treated in our hospital during 7 years period, including COVID-19 pandemic lockdown. Demographic and clinical data were collected, including microbiological isolates, number of affected valves, perivalvular, embolic, and immunological complications, surgical outcome and mortality. Most patients were male, average age was 62 years and Enterococcus was the most frequently isolated pathogen. 17/30 patients were operated, most of them urgently due to valvular dysfunction, uncontrolled infection and/or systemic embolization. In-hospital mortality of 30% was directly associated with severity of infection and necessity for emergency and urgent surgery. Unexpected rise of incidence occurred in 2021 with 11 identified cases. We assume possible rebound effect of postponed diagnosis after COVID-19 pandemic lockdown due to restricted access to all levels of health care. Our data generally reflect literary data on incidence and prognosis of endocarditis with additional peak in incidence during 2021 and more severe clinical presentation¹⁻³.

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LITERATURE

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