Infective endocarditis patient information

Infective endocarditis Queensland management group (IEQMG)

https://medicine-program.uq.edu.au/school-clinical-medicine/research/infective-endocarditis-qld

Due to the changes in your heart, you have a very small risk of developing an infection of the heart. We would like to explain how to reduce your risk and when to seek help.

What is infective endocarditis?

Infective endocarditis is an inflammation of the inner lining of the heart or the ‘endocardium’ and regularly involves the valves in the heart. It is usually caused by bacteria travelling in your bloodstream and sticking to the lining of your heart or heart valves which control the flow of blood through your heart by opening and closing. This can lead to damage to your heart valves. The changes you have in your heart mean you have an ‘endocarditis risk heart’.

Image reference: By Bruce Blaus - Own work, CC BY-SA 4.0, https://commons.wikimedia.org/w/index.php?curid=57340203

How can you reduce the risk of developing infective endocarditis?

Look after your skin
Breaks or cuts in the skin are the main way bacteria can enter your bloodstream. Clean all wounds or cuts immediately.
If you have a skin condition that causes breaks in your skin, see your doctor about ways to improve your skin. For example, ‘Athlete’s Foot’ or ‘Tinea’ can usually be easily treated with medicated creams, reducing breaks in your skin.
Avoid tattoos or body piercings as these are often performed with poorer antiseptic techniques than standard medical procedures and leave you at risk of bacteria being introduced into your bloodstream.

Look after your teeth/gums
See a dentist at least twice a year.
Regularly brush and floss your teeth.
Ensure dentures or dental devices fit properly.
Advise your dentist you have an ‘endocarditis risk heart’, as they may give you antibiotics before completing any dental work.

Look after your body
If you are having an invasive medical procedure (such as bladder catheter, endoscopy) please advise your specialist you have an ‘endocarditis risk heart’. Sometimes your specialist may give you antibiotics before the procedure.
You have an increased chance of developing infective endocarditis if you inject drugs and don’t use a clean needle or antiseptic technique. This can allow bacteria to enter your bloodstream.

Unusual preventable causes of infective endocarditis

**Sheep and cattle**
If you are involved with animals (especially cattle or sheep), an infection called Q fever can be acquired. Q fever is caused by inhaling or being in contact with bacteria from an infected animal or infected animal placentas (the highest risk). These bacteria can also be found in livestock sale-yards, soil and abattoirs. Most people with acute Q fever have no long-term problems, although a small proportion, especially those with ‘endocarditis risk heart’ may develop infective endocarditis, usually within the first 2 years after exposure. 

Try to minimize your exposure by wearing a face mask in high risk areas, whilst gardening/landscaping in potentially contaminated soil or by being vaccinated against Q fever (if recommended by your doctor).

**Cats**
Bacteria is often found on cat claws and can be transmitted to humans by cat scratches or bites. Infections caused by cat scratches usually start with fevers, headache and tender lymph glands near the bite/scratch-site. In rare cases it can develop into infective endocarditis over several months.

**Gardening**
Bacteria can be found in soil and potting mix. Gardeners with an ‘endocarditis risk heart’ should garden wearing gloves and a face mask, especially when using potting mix. Infection symptoms can include fever, cough and chest pain.

**Feral Pigs**
Feral pigs in Queensland or NSW are often infected with bacteria that can cause infective endocarditis. You may be infected by eating uncooked feral pig meat or by cuts/scratches from live or dead feral pigs. Acute symptoms of infection are fevers, sweats, chills, stomach pain and generalized weakness.

**Parrots**
Parrots can be infected with bacteria which can cause infective endocarditis. If you are exposed to an infected parrot, you may require a course of antibiotics. Acute symptoms of infection are usually fever and associated chest symptoms such as a dry cough. It can take several months for the infection to develop into infective endocarditis.

**Open Heart Surgery**
If you have had open heart surgery in the past 5 years there is a small risk you have been exposed to a slow growing, waterborne bacteria that has been associated with a contaminated heart/lung bypass machine. These bacteria have been implicated in some cases of infective endocarditis. People with this infection usually only have chronic sweats and weight loss as symptoms.

**Infective Endocarditis symptoms**
At times infective endocarditis may be difficult to diagnose and usually requires a blood test to confirm the diagnosis.

Symptoms of infective endocarditis can be quite general and may be experienced over a couple of days or develop over many months. Symptoms can include:

- fever and chills
- tiredness
- loss of appetite
- diarrhoea
- generalised aching throughout the body/joints/muscles
- fast breathing
- persistent and often dry cough.

**What do I do if I suspect I may have infective endocarditis?**

See your doctor immediately. If your doctor feels that you may have infective endocarditis, they will often seek expert advice, and have you admitted to hospital for urgent investigations and management.
Your doctor will need to take blood tests (tests to see if there are bacteria in your blood-stream) **before** you take any antibiotics (antibiotics can hide the presence of bacteria in your blood) to exclude infective endocarditis.

*Please keep these instructions in a safe place. We suggest familiarising yourself with these instructions yearly.*