Epidemilogocal evaluation of Infective endocarditis In Imam khomeini Hospital in Ardebil between 2011-2016

Abstract

Background and Objective: Infectious endocarditis is caused by bacterial or fungal infections of the endocardial surface of the heart, with high morbidity and mortality. The risk factors for this infection are the presence of artificial arteries, heart disease, intravenous injection of narcotics and the history of recent invasive interventions. Fever, nocturnal sweats or signs of uncontrollable systemic disease in patients should cause suspicion of endocarditis. Information on infective endocarditis is low in a developing country, and in Iran, the situation is similar, and so far no accurate research on the epidemiology of endocarditis has been carried out. The Objective of this study is to describe the epidemiology and local characteristics of the disease that may be effective in improving and reducing mortality.

Methods: The study was Cross-sectional. Patients diagnosed with infectious endocarditis were treated during a 5 year period between 2011 and 2016 in Imam Khomeini Hospital in Ardebil. Data from blood culture, urine test, and other diagnostic procedures were extracted from the records. Information on age, sex, the most common cause of referral, culture and positive culture, mitral valve, tricapid and pulmonary valve involvement, underlying condition of injecting drug addiction, duration of hospitalization, clinical symptoms, type of treatment, response to Treatment, status of hospital discharge and mortality rate of patients were collected and analyzed.

Results: A total of 32 patients with definitive diagnosis of infective endocarditis were studied. 14 (43.75%) were male and 18 (56.25%) were female. The mean age of patients was 55.6 ± 9.4 years with a range of 21-72 years old. Patients were treated at an average of 2.2 ± 1.4 weeks. 9 patients (28.12%) had skeletal-muscular manifestations. 26 patients (81.25%) had fever. And 17 patients (53.12%) had heart murmurs; 3 patients (9.37%) had abdominal disorder; 5 (15.62%) had arthritis. Four patients (12.5%) had splenomegaly.

Conclusion: Fever with musculoskeletal manifestations in young men with a history of injectable addiction is a common manifestation of infectious endocarditis.

Keywords: Epidemiology, Infectious Endocarditis, Ardabil