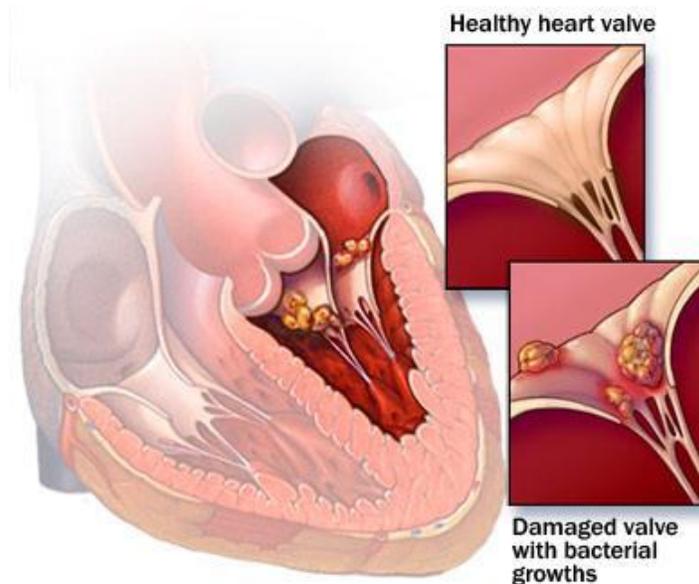


Endocarditis occurs when germs enter your bloodstream, travel to your heart, and lodge on abnormal heart valves or damaged heart tissue. Abnormal growths (vegetations) that contain collections of bacteria may form in your heart at the site of the infection.

Endocarditis occurs when germs enter your bloodstream, travel to your heart, and attach to abnormal heart valves or damaged heart tissue. Bacteria cause most cases, but fungi or other microorganisms also may be responsible.



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Sometimes the culprit is one of many common bacteria that live in your mouth, throat or other parts of your body. The offending organism may enter your bloodstream through:

Everyday oral activities. Activities such as brushing your teeth or chewing food can allow bacteria to enter your bloodstream — especially if your teeth and gums are in poor condition.

An infection or other medical condition. Bacteria may spread from an infected area, such as a skin sore, gum disease, a sexually transmitted disease or an intestinal disorder — such as inflammatory bowel disease — also may give bacteria the opportunity to enter your bloodstream.

Catheters or needles. Bacteria can enter your body through a catheter — a thin tube that doctors sometimes use to inject or remove fluid from the body. The bacteria that can cause endocarditis can also enter your bloodstream through the needles used for tattooing or body piercing. Contaminated needles and syringes are a concern for people who use intravenous (IV) drugs.

Certain dental procedures. Some dental procedures that can cut your gums may allow bacteria to enter your bloodstream.

Most people who develop endocarditis have a diseased or damaged heart valve — an ideal spot for bacteria to settle. This damaged tissue in the endocardium provides bacteria with the roughened surface they need to attach and multiply.

If your heart is healthy, you're unlikely to develop endocarditis. Even most types of heart disease don't increase the risk of endocarditis. The germs that cause infection tend to stick to and multiply in damaged or surgically implanted heart valves.

Those at highest risk of endocarditis are those who have:

Artificial heart valves. Germs are more likely to attach to an artificial (prosthetic) heart valve than to a normal heart valve. The risk of infection is highest in the first year after implantation.

Congenital heart defects. If you were born with certain types of heart defects, your heart may be more susceptible to infection.

A history of endocarditis. An episode of endocarditis damages heart tissue and valves, increasing the risk of a future heart infection.

Damaged heart valves. Certain medical conditions — such as rheumatic fever or infection — can damage or scar one or more of your heart valves, making them more prone to endocarditis.

History of intravenous (IV) illegal drug use. People who use illegal drugs by injecting them are at a greater risk of endocarditis. The needles used to inject drugs are often contaminated with the bacteria that can cause endocarditis.

If you have a known heart defect or heart valve problem, ask your doctor about your risk of developing endocarditis.

Even if your heart condition has been repaired or hasn't caused symptoms, you may be at risk.

*Please refer to our SBE Prophylaxis Protocol/Policy to prevent this infection