Short-and Intermediate-Term Results after Surgical Treatment of Early and Late Prosthetic Valve Endocarditis

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Background:

Prosthetic valve endocarditis (PVE) is one of the most catastrophic complications following valve surgery. PVE has been estimated to occur with relatively low but increasing frequency ranging from 0.1% to 2.3% per patient-year.

Methods:

We performed observational cohort study to investigate outcome of patients with surgically treated active PVE. In the period between May 2004 and October 2012 we performed a total of 40 operations due to PVE in 39 patients. Patients were divided in to two groups according to timing of onset of endocarditis. Group I – Early PVE (19 patients) and group II – Late PVE (20 patients). Early PVE (1 year after surgery) was defined according to European guidelines.

Results:

Analysis of the overall survival shows high early and late mortality rate. The 1- and 5-year survival for the whole group was 76% and 41%. In the subgroups 1-year survival was 79% and 63% and 5-year survival was 50% and 33% in the Group I in the Group II respectively. No difference between the groups regarding mortality was observed. Staphylococcus was the most frequent causative microorganism.

Conclusions:

Prosthetic valve endocarditis is a very serious condition with high early and late mortality, irrespective of the timing of onset of endocarditis.