

**Surgery of infective endocarditis : about 203 patients. (0-0-c1464)**

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**Introduction :**

- \*It is a serious disease with a high morbimortality .
- \*The diagnosis is placed on modified criteria of dukes.
- \*The main surgical indication in emergency are hemodynamic , infectious and embolic .
- \*The aim of this work is to present epidemiological characteristics, clinical, echographics and rapport our experience in order to assess the results of surgical treatment of the disease and to improve the support.

**Methods :**

- \*This is a monocentric and retrospective study of **203** patients operated for infective endocarditis collected between January **2001** and June **2015**.
- \*This study interested only the operative period .
- \*The mean age is **42** years with male predominance (**62, 12%**).
- \*The heart disease causal predominance was rheumatic in **40%** cases .**7, 88** have endocarditis on cardiac prosthesis.
- \*The causative germ in isolated only **47%** cases. Staphylococcus and streptococcus sound the more frequent .
- \*The left ventricular function was altered in **24%** cases .
- \*The patients were operated in emergency in **59** cases and cold in **144** cases .
- \*Valve replacement was done in **84,8** cases and valve repair in **15,2**cases.

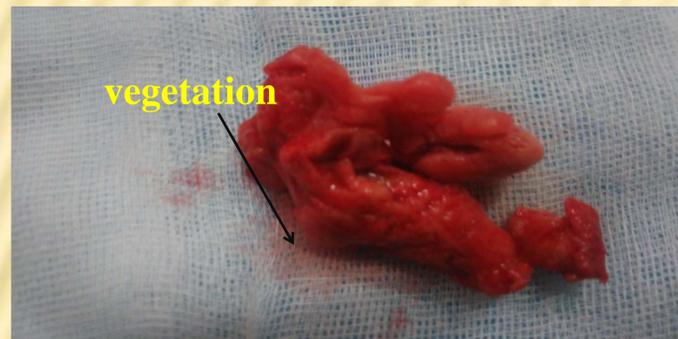


Fig01:vegetation.



Fig02:Aortic ring destroyed by infection.



Fig03: Aortic ring destroyed by infection.

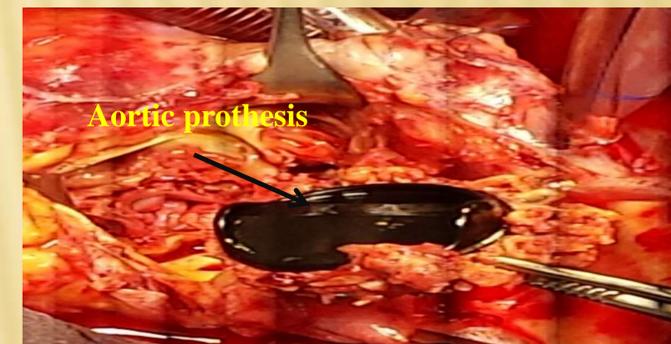


Fig04:Endocarditis of aortic prosthesis.

**Results :**

- \*Stay in intensive care unit  $\geq 72$  hours (**28%**).
- \*Intubation procedure  $< 24$ hours (**69%**).
- \*post operative stay  $\geq 7$ days (**70%**).
- \*The simple operating suite in **60%** of cases.

**Comments:**

- \* Endocarditic surgery infectious even active is no longer discussed in principle. The incidence of this affection is more students in young men (15 and 50 years). In countries developed it is the elderly subjects who are keys with a peak between 70 and 79 years .The operating indication is laying in 26, 1 % during acute illness. (25 to 40 % , 30 to 50 % ).
- \* Links especially to the hemodynamic (60, 37 %), embolic (24, 28%) and infectious (15, 9 %), risk (60 à 70 % for hemodynamic indication and 20 à 30 % for infectious indication). For the endocarditic cooled 70.9 % of patients are operating in the year following.
- \* While in the literature 50 % only have operate within two years following .Severity of the lesions related damage rheumatic preexisting and/or therapeutic delay. The operative results are good in more 70 % of cases; the operative mortality is **13, 72 %**. (It was 9, 16 % for infective endocarditis on native valve which corresponds to the data from the literature:  $< 10$  % ) .
- \* The mortality was **10.5 %** in surgery in the active phase and **15, 27 %** if intervention occurs in the following the end of the antibiotic treatment .

**Conclusion :**

- \*Serious disease .
- \*Interest of studies epidemiological regular .
- \*The actual trend is in favour of earlier surgery in previligiant the valve repair.

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