



Infective endocarditis in chronic hemodialysis patients - single center experience -

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INTRODUCTION

- ◆ Infections are the second leading cause of death in the chronic hemodialysis (HD) patients. This population is predisposed to infection secondary to transient bacteriemia due to repetitive manipulation of the vascular access. Also, they have a poor imune sistem secondary to uremic status.
- ◆ Infective endocarditis (IE) is a commom and serious complication in chronic HD patients, and it is associated with greater morbi-mortality than in general population.
- * AIM OF THE STUDY: Evaluate all cases of IE admitted in our Department in the past 15 years

METHODS AND RESULTS

Single center retrospective study

CPR (mg/L)

Septic shock

Embolic phenomenon /

cerebral embolism

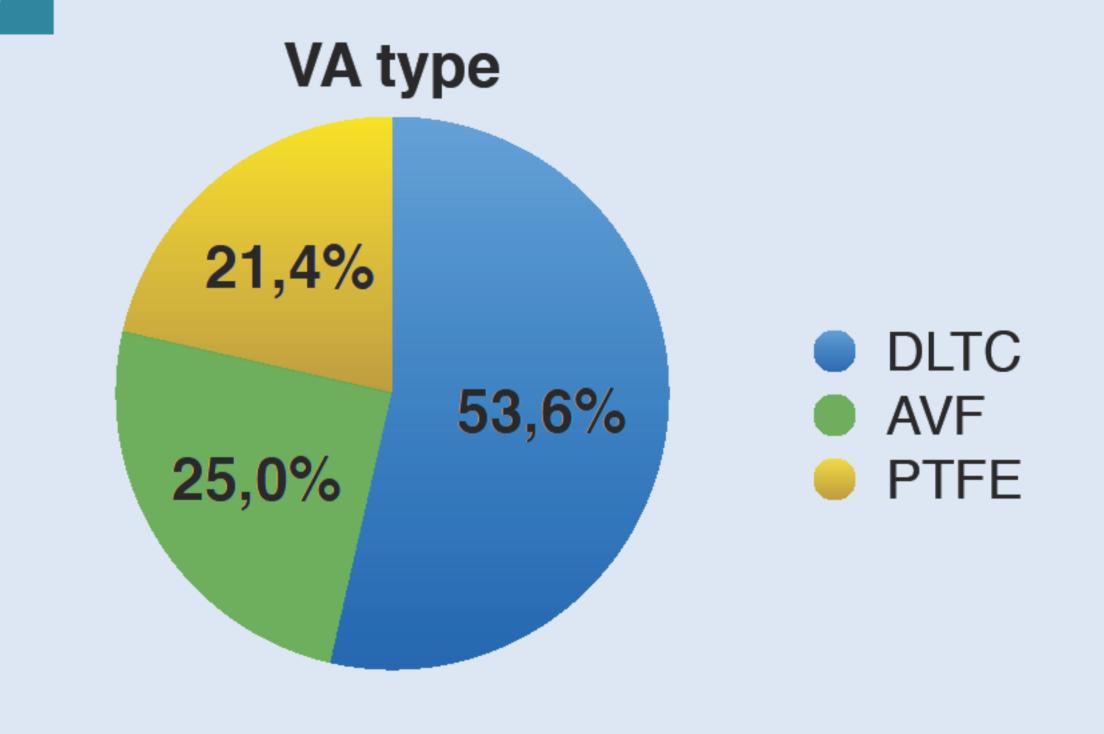
Hb (g/dl)

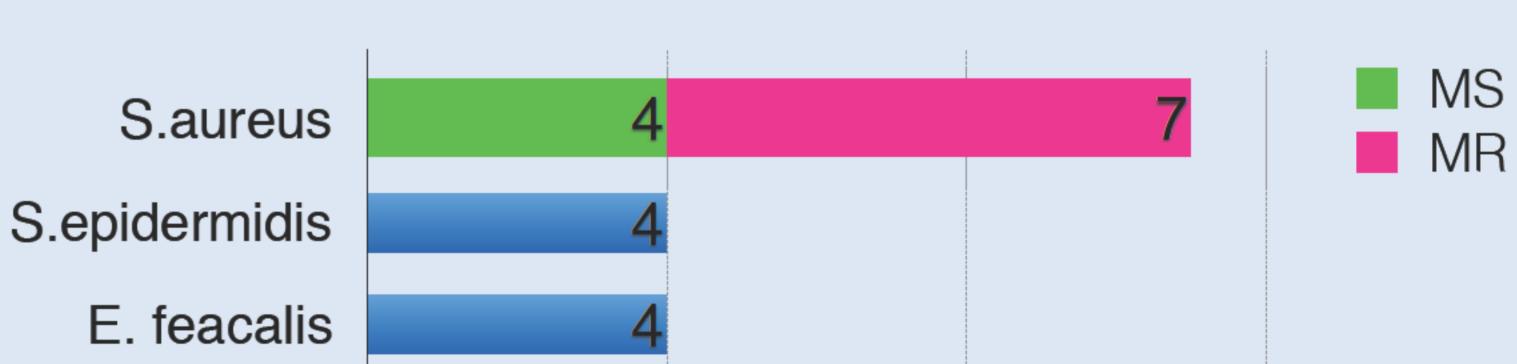
- ◆ All cases of IE (using Duke criteria) in chronic HD patients between January/2000 and December/2015
- Follow up for one month after hospital discharge

28 patients were identified as having IE (29 episodes of IE)

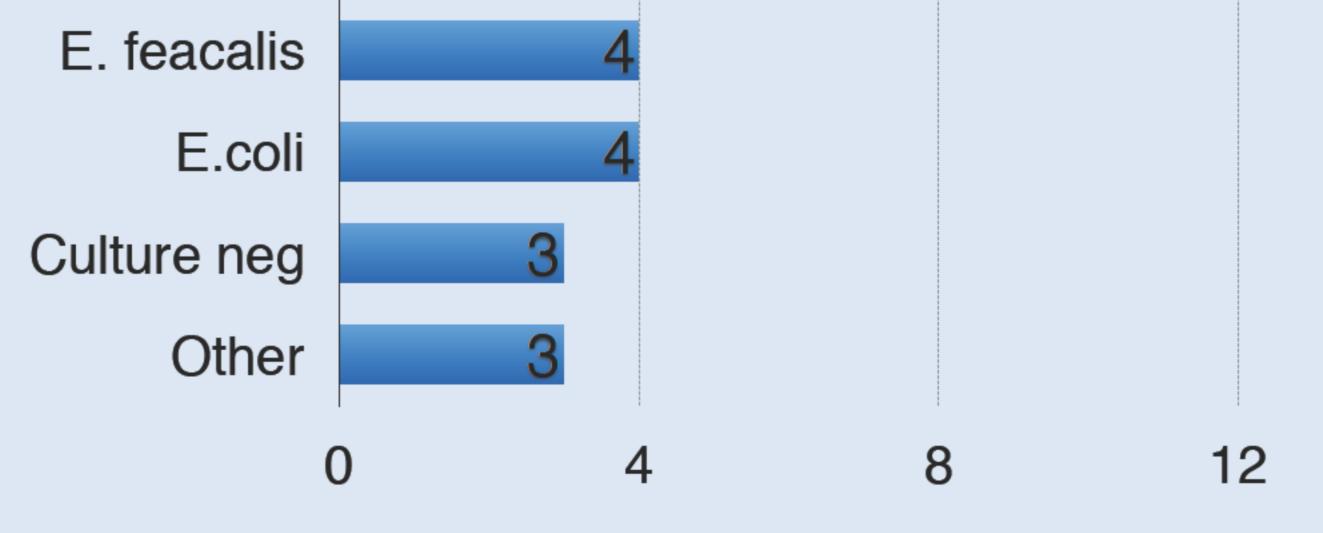
Mean age (years)	62.6 ± 13.7
Male	53.5% (n=15)
Mean dialysis time (months)	24.5
Diabetes	28.5% (n=8)
Previous infection - related to VA	58.6% (n=17) 70.6% (n=12)
Previous abnormal valve	37.9% (n=11)
Fever	82.7% (n=24)
Leukocytosis (10^9)	13 552±8796

Vegetation (mm)	12.7±6.3
Affected valve	
- mitral	44.8% (n=13)
- aortic	37.9% (n=11)
- tricuspid	17.2% (n=5)
- more than 2 valves	13.8% (n=4)
Severe valvular insufficiency	24.1% (n=7)





Microbiological information



Valvular surgery	6.8% (n=2)
Antibiotic treatment duration (weeks)	5.7
Hospital stay (days)	55.7
Hospital mortality	17% (n=5)
30-day survival	75% (n=21)

CONCLUSION

- ◆ The prognosis of IE in chronic HD patients is poor.
- * Although most commonly affects patients with DLTC it also affects patients with AVF or PTFE.
- * An episode of infection prior to IE was possible to identify in more than half of patients

64±122

 8.9 ± 2.4

17.2% (n=5)

31% (n=9)

55.5% (n=5)

• Better infection surveillance and VA care might decrease the morbidity and mortality associated with this disorder.







