Top Things to Know
ACC/AHA 2008 Guideline Update on Valvular Heart Disease: Focused Update on Infective Endocarditis

1. Infective endocarditis (IE) is an uncommon but life-threatening infection with high morbidity and mortality rates.

2. Many authorities and societies, as well as the conclusions of published studies, have questioned the efficacy of antimicrobial prophylaxis in most situations.

3. AHA’s newest IE prophylaxis guidelines concluded that only an extremely small number of cases of IE might be prevented by antibiotic prophylaxis for dental procedures even if such prophylactic therapy were 100 percent effective.

4. IE is more likely to result from frequent exposure to random bacteremias associated with daily activities than from bacteremia caused by a dental, GI tract, or GU procedure.

5. Prophylaxis is no longer recommended solely on the basis of an increased lifetime risk of acquisition of infective endocarditis.

6. IE prophylaxis is reasonable only for patients with underlying cardiac conditions associated with the highest risk of adverse outcome from infective endocarditis.

7. In these patients, it is reasonable to give prophylaxis before dental procedures that involve manipulation of either gingival tissue or the periapical region of teeth or perforation of the oral mucosa.

8. IE prophylaxis is no longer recommended for gastrointestinal or genitourinary procedures in the absence of active infection.

9. Maintenance of optimal oral health and hygiene may reduce the incidence of bacteremia from daily activities and is more important than prophylactic antibiotics for a dental procedure to reduce the risk of infective endocarditis.

10. Amoxicillin remains the antibiotic of choice for prophylaxis prior to dental procedures.