Preventing infective endocarditis

The National Institute for Health and Clinical Excellence (NICE) has issued a new clinical guideline (17.03.08) on antibiotic prophylaxis against infective endocarditis.

This information sheet summarises the new guidelines. Your dentist will talk through the guidelines with you and explain how they affect you. NICE has produced a full patient guidance leaflet with more detailed explanation of the guidelines, which your dentist will make available to you.

In Scotland, the Scottish Dental Clinical Effectiveness Programme has produced guidance entitled Drug Prescribing for Dentistry: Dental Clinical Guidance. In terms of infective endocarditis, these guidelines reflect the advice given in the new NICE guidelines.

For many years it has been considered necessary to give patients with various heart conditions - including rheumatic fever, heart murmurs, prosthetic valves and developmental defects - a large dose of antibiotics before dental treatment. This procedure, carried out as a protective measure against potential heart problems, is called antibiotic prophylaxis.

The change to current practice is significant. The new guideline recommends that antibiotics to prevent infective endocarditis should NO LONGER be given to any patient undergoing dental procedures. There is little evidence to support the use of antibiotic prophylaxis in these situations, and indeed there may be greater risk created by the antibiotics in terms of resistance or allergy.

As a precautionary measure patients should be aware of the symptoms of infective endocarditis. Symptoms may develop in one of two patterns, explained below. If you are concerned please seek urgent medical advice.

Slowly developing infection
In many cases the infection develops quite slowly. Symptoms can develop gradually, over weeks or months, and can be vague at first. Patients tend to feel generally unwell and may have general aches and pains, tiredness, and be off their food. A fever (a high temperature) develops at some stage in most cases. As these first symptoms can be caused by a lot of other conditions; the cause of the symptoms may not be diagnosed for some time.

Rapidly developing infection
In some cases the symptoms develop quite quickly and patients can become very unwell over a few days. The speed at which the illness develops partly depends on which bacterium or fungus is causing infection.

Further information can be obtained at www.nice.org.uk/CG064