WHAT IS INFECTIVE ENDOCARDITIS?
Infected endocarditis is inflammation of the inner lining of the heart or valves caused by blood-borne bacteria that lodge on damaged or abnormal heart valves, or near congenital anatomic defects.

WHY DO I NEED TO BE PRE-MEDICATED FOR DENTAL PROCEDURES?
For decades, the American Heart Association (AHA) has recommended patients with certain heart conditions take antibiotics shortly before dental treatment. This was done with the belief that antibiotics would prevent infected endocarditis (IE), previously referred to as “bacterial endocarditis.” Any dental procedure that produces bleeding from the gums could create a pathway for bacteria from your mouth to enter the bloodstream and travel to the heart, increasing your chance of contracting infective endocarditis. The guidelines are based on a growing body of scientific evidence that shows the risks of taking preventive antibiotics outweigh the benefits for most patients.

WHAT SCIENTISTS HAVE FOUND
Scientists found no compelling evidence that taking antibiotics before a dental procedure prevents IE in patients who are at risk of developing a heart infection. Their hearts are already exposed to bacteria from the mouth that can enter their bloodstream during basic daily activities such as brushing or flossing. The guidelines are based on a comprehensive review of published studies that suggests IE is more likely to occur as a result of these everyday activities than from a dental procedure. The guidelines say patients who have taken prophylactic antibiotics routinely in the past but no longer need them include people with mitral valve prolapse, rheumatic heart disease, bicuspid valve disease, calcified aortic stenosis, or congenital (present from birth) heart conditions such as ventricular septal defect, atrial septal defect and hypertrophic cardiomyopathy.

WHO NEEDS TO BE PRE-MEDICATED?
New recommendations by the American Heart Association advise preventive antibiotics for the following patients with:

- Artificial heart valves
- A history of infective endocarditis
- Unrepaired or incompletely repaired cyanotic congenital heart disease, including those with palliative shunts and conduits
- A completely repaired congenital heart defect with prosthetic material or device, whether placed by surgery or by catheter intervention, during the first six months after the procedure
- Any repaired congenital heart defect with residual defect at the site or adjacent to the site of a prosthetic patch or a prosthetic device
- A cardiac transplantation that develops a problem in a heart valve

The new recommendations apply to many dental procedures, including teeth cleaning and extractions. Patients with congenital heart disease can have complicated circumstances. They should check with their cardiologist if there is any question at all as to the category that best fits their needs.

WHAT ABOUT MY MEDICATION?
You are responsible for taking your medication before all dental procedures that might produce bleeding. The standard regimen is for Amoxicillin 500mg. tablets, taking 4 one hour before the dental appointment. If you are allergic to penicillin, then Clindamycin 300mg. will be given, taking 2 tabs. one hour before your dental appointment. These are recommendations by the American Heart Association.

For more information, visit www.ada.org


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