

**Harvard Medical School Department of
Continuing Education and the Cardiovascular
Division of the Department of Medicine,
Brigham and Women's Hospital**



Cardiology Rounds
April 2004

**Update on Infective Endocarditis:
New Insights into an Old Disease**

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Objectives:

This issue of *Cardiology Rounds* focuses on endocarditis with an update on the epidemiology and risk classification of this uncommon disease. A framework is provided to help physicians make the all-important clinical decision about whether surgical intervention should be recommended. The reader will obtain a better appreciation about how emerging data from the International Collaboration on Endocarditis (ICE) will improve our therapeutic strategies for treating this life-threatening infection.

TEST:

1. The incidence of endocarditis varies in different countries and in different risk populations such as the elderly.
True False
2. In terms of microorganism causes, there has been no change in the proportion of endocarditis cases caused by *S. aureus*.
True False
3. Chest wall echocardiography is the most cost-effective imaging modality in all cases of suspected endocarditis.
True False
4. Echocardiography can identify patients at high risk for thromboembolic events.
True False
5. The presence of diabetes does not influence the early risk for mortality in patients with endocarditis.
True False

6. Surgery is equally beneficial in all patients with endocarditis.

True False

7. Establishment of a multinational study group, such as ICE, has the potential to overcome study limitations that have tended to plague our understanding of endocarditis.

True False

To receive AMA category 1 credit, you must correctly answer 60% of the test questions.

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