

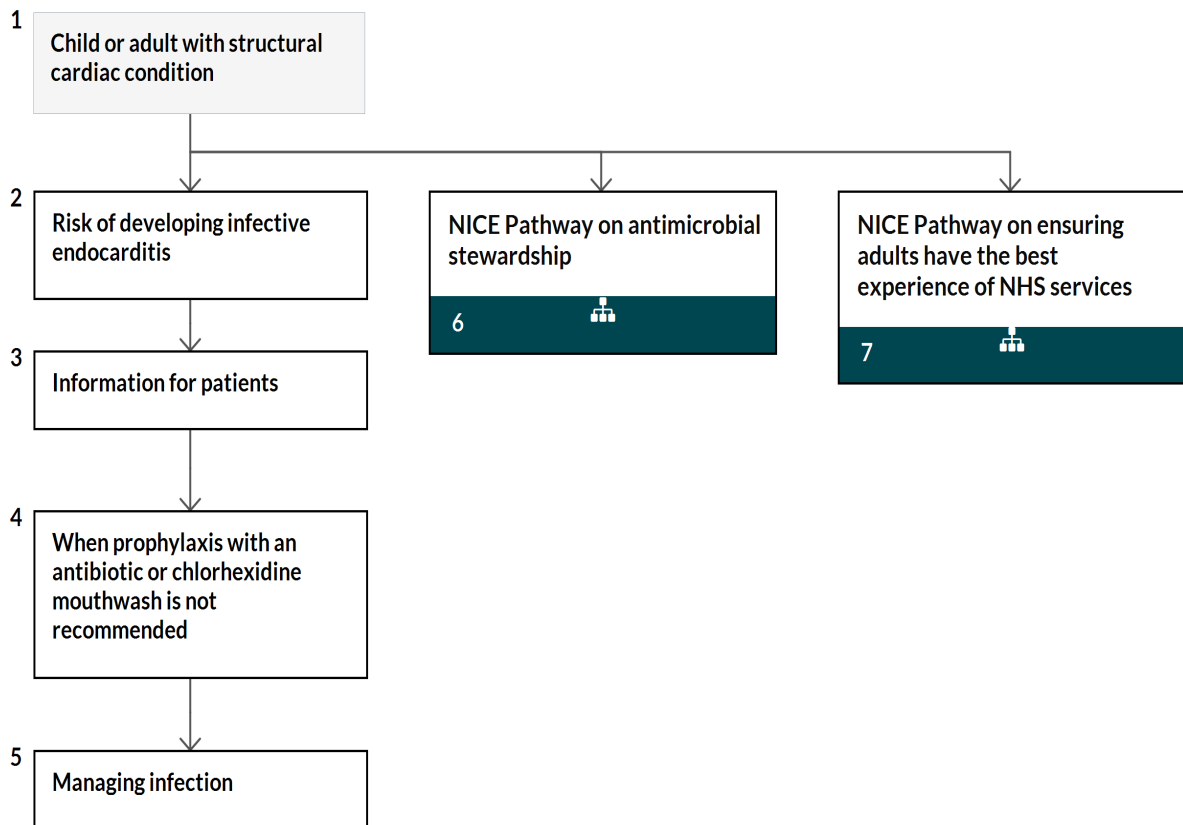
Prophylaxis against infective endocarditis overview

NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

<http://pathways.nice.org.uk/pathways/prophylaxis-against-infective-endocarditis>
NICE Pathway last updated: 05 November 2020

This document contains a single flowchart and uses numbering to link the boxes to the associated recommendations.



1 Child or adult with structural cardiac condition

No additional information

2 Risk of developing infective endocarditis

Healthcare professionals should regard people with the following cardiac conditions as being at increased risk of developing infective endocarditis:

- acquired valvular heart disease with stenosis or regurgitation
- hypertrophic cardiomyopathy
- previous infective endocarditis
- structural congenital heart disease, including surgically corrected or palliated structural conditions, but excluding isolated atrial septal defect, fully repaired ventricular septal defect or fully repaired patent ductus arteriosus, and closure devices that are judged to be endothelialised
- valve replacement.

See what NICE says on [structural heart defects](#).

3 Information for patients

Healthcare professionals should offer people at increased risk of infective endocarditis clear and consistent information about prevention, including:

- the benefits and risks of antibiotic prophylaxis, and an explanation of why antibiotic prophylaxis is no longer routinely recommended
- the importance of maintaining good oral health
- symptoms that may indicate infective endocarditis and when to seek expert advice
- the risks of undergoing invasive procedures, including non-medical procedures such as body piercing or tattooing.

NICE has written information for the public explaining its guidance on [prophylaxis against infective endocarditis](#).

4 When prophylaxis with an antibiotic or chlorhexidine mouthwash is not recommended

Antibiotic prophylaxis against infective endocarditis is **not recommended routinely**¹:

- for people undergoing dental procedures
- for people undergoing non-dental procedures at the following sites² :
 - upper and lower gastrointestinal tract
 - genitourinary tract; this includes urological, gynaecological and obstetric procedures, and childbirth
 - upper and lower respiratory tract; this includes ear, nose and throat procedures and bronchoscopy.

Chlorhexidine mouthwash **should not be offered** as prophylaxis against infective endocarditis to people at risk of infective endocarditis undergoing dental procedures.

See what NICE says on [prevention and control of healthcare-associated infections](#).

5 Managing infection

Any episodes of infection in people at risk of infective endocarditis should be investigated and treated promptly to reduce the risk of endocarditis developing.

If a person at risk of infective endocarditis is receiving antimicrobial therapy because they are undergoing a gastrointestinal or genitourinary procedure at a site where there is a suspected infection, the person should receive an antibiotic that covers organisms that cause infective endocarditis.

6 NICE Pathway on antimicrobial stewardship

See [Antimicrobial stewardship](#)

7 NICE Pathway on ensuring adults have the best experience of NHS services

See [Patient experience in adult NHS services](#)

¹ 'Routinely' has been added to recommendation 1.1.3 for consistency with recommendation 1.1.2. This addition emphasises NICE's standard advice on [healthcare professionals' responsibilities](#). Doctors and dentists should offer the most appropriate treatment options, in consultation with the patient and/or their carer or guardian. In doing so, they should take account of the recommendations in this guideline and the values and preferences of patients, and apply their clinical judgement.

² The evidence reviews for the NICE guideline on prophylaxis against infective endocarditis covered only procedures at the sites listed here. Procedures at other sites are outside the scope of the guideline.

Sources

Prophylaxis against infective endocarditis: antimicrobial prophylaxis against infective endocarditis in adults and children undergoing interventional procedures (2008 updated 2016)
NICE guideline CG64

Your responsibility

Guidelines

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.

Local commissioners and providers of healthcare have a responsibility to enable the guideline to be applied when individual professionals and people using services wish to use it. They should do so in the context of local and national priorities for funding and developing services, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with complying with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

Technology appraisals

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health professionals are expected to take these recommendations fully into account, alongside the

individual needs, preferences and values of their patients. The application of the recommendations in this interactive flowchart is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Commissioners and/or providers have a responsibility to provide the funding required to enable the recommendations to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

Medical technologies guidance, diagnostics guidance and interventional procedures guidance

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take these recommendations fully into account. However, the interactive flowchart does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Commissioners and/or providers have a responsibility to implement the recommendations, in their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this interactive flowchart should be interpreted in a way that would be inconsistent with compliance with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.