

High burden of endocarditis in older adults

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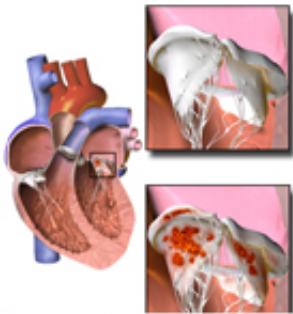


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The 2007 American Heart Association guidelines recommending a restriction of antibiotic prophylaxis have not increased the rates of hospitalization or adjusted mortality for endocarditis among Medicare beneficiaries, although the burden of endocarditis is high, according to a study published online Aug. 28 in the *Journal of the American College of Cardiology*.

(HealthDay)—The 2007 American Heart Association guidelines recommending a restriction of antibiotic prophylaxis have not increased the rates of hospitalization or adjusted mortality for endocarditis among Medicare beneficiaries, although the burden of endocarditis is high, according to a study published online Aug. 28 in the *Journal of the American College of Cardiology*.

Behnood Bikdeli, M.D., from Yale-New Haven Hospital in Connecticut, and colleagues analyzed data from Medicare inpatient Standard Analytic Files to identify all fee-for-service beneficiaries with a principal or

secondary diagnosis of endocarditis (1999 to 2010). Hospitalizations per 100,000 person-years were calculated with Medicare Denominator Files. Vital Status Files were used to calculate rates of 30-day and one-year mortality.

The researchers found that 262,658 beneficiaries were hospitalized with endocarditis. From 1999 to 2005, the adjusted [hospitalization rate](#) increased, reaching 83.5 per 100,000 person-years in 2005, and declined during 2006 to 2007. The decline continued after 2007, reaching 70.6 per 100,000 person-years in 2010. Adjusted 30-day mortality rates ranged from 14.2 to 16.5 percent, while one-year rates ranged from 32.6 to 36.2 percent. After 2007 there were no consistent changes in adjusted rates of 30-day and one-year mortality. Across demographic subgroups, trends in rates of hospitalization and outcomes were consistent.

"Our study highlights the high burden of endocarditis among older adults," the authors write. "We did not observe an increase in adjusted rates of hospitalization or mortality associated with endocarditis after publication of the 2007 guidelines."

One author disclosed financial ties to the medical device industry.

More information: [Full Text \(subscription or payment may be required\)](#)

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