This leaflet is for people who have been diagnosed with endocarditis, who are receiving or have received medical treatment. As well as the physical effects of endocarditis, some people also find that the experience of illness, diagnosis and treatment can have an emotional impact. This leaflet provides some information about the ways people can be affected emotionally and what support is available.
You may already know quite a lot about endocarditis or this may be your first chance to read about it in your own time. It may help to read the information below. For more information, visit the British Heart Foundation website (www.bhf.org.uk).

Many people with endocarditis feel low or anxious at some point of their journey. If this applies to you, you might find it helpful to read further to find some strategies that help you

**What is Endocarditis?**
Endocarditis is a rare condition in which the inner lining of the heart, usually the heart valves, becomes infected. It is quite rare and often happens to people who have an existing heart problem or abnormality. It is a serious condition, which can be life-threatening if not treated quickly. Most people recover well with antibiotic treatment if the infection is identified and treated quickly. However, some people experience damage to the heart valves as a result of the infection, which may need to surgery to correct. Coping with physical health problems can be challenging and heart problems in particular can be frightening.

**Who is most at risk of developing endocarditis?**
The people who are most at risk of developing endocarditis are more likely to have;
- a stiff or leaking heart valve
- a heart valve replacement operation previously
- an inherited disease of the heart muscle, where the muscle wall of your heart becomes thickened, called hypertrophic cardiomyopathy
- most types of heart disease that you are born with (i.e. congenital heart disease)
- intravenous drug users
- people who have a history of endocarditis

**Why am I struggling?**
Being diagnosed with endocarditis is often a serious medical problem and, for many, it is a significant event in life. It is likely you have been through quite a lot since becoming unwell. Diagnosis, treatment and recovery can each be challenging in their own ways and it is normal to be affected by these experiences. These effects are not only physical. The way you think, the way you see yourself, the world and the future, the things you do and how you feel emotionally can all be affected.

There are a number of points along the journey with endocarditis where people report finding things difficult. Perhaps some of the examples below will be familiar to you;
- **Becoming unwell unexpectedly** - you may have felt very physically unwell and not understood what was happening, which can be scary.
- **Being admitted to hospital** - your admission and urgent treatment could have been shocking and, for some, traumatic. If you were very unwell and things were happening very quickly, it may have been hard to understand what was going on.
- **Getting the news that endocarditis is serious** - you may not have even heard of endocarditis before and been understandably upset by this news. You may have been worried, uncertain and fearful for the future.
- **Coping with treatment** - being in hospital, sometimes for a long time, for treatment can be difficult. The early hours and days may have involved lots of uncomfortable tests and procedures and later, being stuck in hospital having treatment for many weeks in some cases, can be boring and stressful. You may also be worried about not being able to fulfil your roles and responsibilities at work or at home while you are recovering.
- **Turning your mind to the future** - After treatment for endocarditis you may be feeling physically
better but continue to be bothered by worries about your recovery and the future. You may have lots of “What if?” questions running through your mind.

All of these feelings are very normal, and most people recover well from the emotional stresses of endocarditis. In fact, some people say that the experience of being unwell helps them to make some positive changes in their lives and to feel more hopeful about the future. If you’re struggling at the moment with feeling low or anxious, the information contained in this booklet may be helpful.

The Effects of Endocarditis
Struggling to cope physically and emotionally after these kinds of experiences is common and understandable. While not all people are affected in the same way, below are some common reactions people may experience during and after being diagnosed and treated for endocarditis.

Physical Effects
• In the acute phase you may have experienced lots of unpleasant symptoms including a high temperature, chills, loss of appetite, headache, muscle and joint pain, night sweats, shortness of breath, persistent cough.
• During your treatment you may have experienced pain and discomfort related to procedures such as blood tests or had uncomfortable treatments, e.g. having your medication through a drip (intravenous line).
• Your medications may have had unpleasant side-effects.
• If you had surgery you may have had to cope with pain and discomfort afterwards or had complications, like infections.
• Some people who have endocarditis can experience complications like the blood supply to the brain being affected. If this happened to you, you may experience difficulty with thinking skills, such as concentration or memory.
• Not being able to do your normal activities for a long time, and perhaps being stuck in bed, can lead to problems when you do start to move around again such as fatigue, muscle weakness and soreness and shortness of breath.

Emotional Effects
Worry and Anxiety - Fears about your recovery, future health, work, family life and finances are common. As well as this, when stressful and unexpected things happen it is normal to feel ‘on edge’. You may be more easily startled or have symptoms like a racing heart, increased breathing rate, a dry mouth, sweating, tingling and feeling dizzy. These are all symptoms of anxiety. You may notice that anxiety is triggered more easily these days. For example, the thought of having another blood test or a friend or family member running late without calling may increase your anxiety, even though these things may not have bothered you before.

Low mood & depression - Feeling low in mood or depressed is common when you have been unwell, particularly if you have been stuck in hospital away from the things you enjoy. You may have noticed feeling sad, hopeless about the future and lacking in energy and drive. You may struggle to enjoy the things you used to enjoy and feel bad about yourself or criticised by others. You may not be sleeping or eating well.

It can be difficult to identify depression when you are physically unwell because some of the symptoms overlap with being poorly, e.g. lack of energy, poor concentration, sleep and appetite disturbance, aches and pains. However, if you are bothered by thoughts that life is not worth living or have thoughts about...
ending your own life you may be experiencing clinical depression and it is important that you talk to your GP or a healthcare professional about getting treatment.

Guilt, Shame & Anger - For some people, if their lifestyle had a part to play in developing endocarditis (e.g. through intravenous drug use) they may be dealing with not just the physical effects but may also feeling guilty or ashamed. Some people may also fear that others, including healthcare professionals, may judge them harshly because of choices they have made in the past. You may also feel guilty about not being able to do things you made commitments to do before you were unwell, feeling as if you have let people down at work or at home, for example. You may also find yourself feeling angry about what has happened to you. Sometimes anger is directed at the illness but some people also report feeling anger towards the healthcare team or the hospital.

Post-traumatic stress - At some point while you were unwell you may have feared that you might die or be severely affected physically. These kinds of distressing events can leave people experiencing post-traumatic stress symptoms including flashbacks or nightmares, being very on edge and avoiding or wanting to avoid things that remind them of what happened. These symptoms usually ease with time. However, if they persist for more than six weeks you should talk to your GP or other healthcare professional.

The effect on your thinking
The way we make sense of our experiences depends a lot on what we think about them. We can have positive ‘glass half full’ thoughts which may be really helpful and allow us to get through difficult times. However, often in times of stress, our minds come up with scare stories instead. Below are some examples of thinking styles, which we all fall into at times, that are usually unhelpful. Sometimes, just noticing you are thinking in this way can be helpful.

<table>
<thead>
<tr>
<th>Thinking Style</th>
<th>Examples commonly associated with feeling anxious or worried</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thinking the worst</td>
<td>“The heart valve operation won’t be a success and I won’t recover”</td>
</tr>
<tr>
<td>Predicting the Future</td>
<td>“I’ll definitely get a recurrence. I know it”</td>
</tr>
<tr>
<td>Being “on the lookout”</td>
<td>I’d better keep watch for any signs and symptoms that might mean I’m going downhill. If I miss something it may be dangerous</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Thinking Style</th>
<th>Examples commonly associated with feel low or depressed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-criticism &amp; Labelling</td>
<td>“I can’t do anything right. I’m a failure”</td>
</tr>
<tr>
<td>Pressurising language: Shoulds, musts, oughts</td>
<td>“I should be able to cope with this and I ought to be able to do more in physio by now. I must get on top of this.”</td>
</tr>
<tr>
<td>Black &amp; White Thinking</td>
<td>“Either I get out of hospital 100% back to normal or I’m a lost cause and may as well give up”</td>
</tr>
</tbody>
</table>

The Things you Choose To Do
Some things you do will have a positive effect on how you feel physically and emotionally as you recover from endocarditis, creating a positive cycle. These include having a good diet, exercising, having
a good sleep routine and making time for enjoyable things like hobbies and socialising. Other things like smoking, using drugs, drinking too much alcohol or spending a lot of time playing video games or watching TV can have negative effects on your physical and emotional well-being even though they may seem to help in the short term.

**The Things you Choose Not to Do**

If you are on the emotional rollercoaster after endocarditis, you may notice that these strong feelings try to stop you in your tracks by convincing you shouldn’t do things while you feel this way. Waiting for strong feelings to go away before you get on with things can put life on hold and make you feel stuck. It is not that you should ignore your feelings, rather that they should not be the only thing that helps you decide what you should do or not do.

Avoiding things because of fear and worries, low mood, physical discomfort or fatigue can make life seem easier in the short term. This is because you do not have to face the situation you fear, overcome the feeling that you “can’t be bothered” or experience an increase in unpleasant physical sensations. If you notice yourself cancelling plan to see friends, opting out of things you once enjoyed or putting off seeing your medical team you may be stuck in a trap of avoidance and withdrawal.

You may also choose not to ask for help because you doubt that you would get it, especially if you believe people are judging you harshly for your condition, or if you have lost faith and trust in others. While all of these choices are understandable, in the long term they can be unhelpful. Avoiding things and withdrawing, for example, can lead to more anxiety because you never find out if your fears would come true. They can also lead to low mood staying the same or even getting worse because you never get a chance to experience fun, pleasure and a sense of achievement.

**Vicious & Virtuous Cycles**

The section above described the ways that your body, thoughts, feelings and choices can be affected by endocarditis. These experiences are also all linked so a change in one area can have a knock-on effect in another area. For example, the way we think about situations affects how we feel physically and emotionally as well as affecting what we choose to do. Some of these thoughts, feelings and choices can help us and some can keep us stuck.
Below are some examples of **vicious cycles**, i.e. unhelpful interactions between thoughts, feelings and behaviours:

Joe didn’t have any energy so he decided to stay at home. He soon got pretty bored which lead to feeling grumpy, low in mood and even less energetic. After a few weeks, when he did try to go out and do something, he got exhausted really quickly and thought to himself “I was right to stay at home and rest. I’m not up to this.”

While Anna was recovering from endocarditis she felt a twinge in her chest when climbing some stairs in a hurry. She then had the thought “There is something seriously wrong with my heart” and began to feel very panicky. Her heart started to pound and race. She became sweaty and shaky. She sat down and thought to herself “My heart is too weak for physical activity. It’s too dangerous”. From then on, she only went places with lifts and escalators and wouldn’t run for the bus.

Below is an example of **virtuous cycle**, i.e. helpful interactions between thoughts, feelings and behaviours:

After being discharged from hospital Sanjeev was feeling pretty sluggish and got tired very easily. However, the kids still needed to be walked to school and his physiotherapist had said gentle exercise was helpful. The first time he did it he had to take breaks and was pretty wiped out afterwards. He thought to himself, “Gosh, I’ve become so unfit!”. He persisted with walking daily and over time it got easier. He also noticed that his mood improved and that he was saying yes to things he was avoiding before. He felt like he was getting back to his old self.

**Managing After Endocarditis**

Below are some suggestions that may help you manage the effects of endocarditis and break any vicious cycles. Some of the ideas may be new to you and you may not know where to begin. Perhaps not all the suggestions will be a good fit for you. Try a few out to see what works. You could ask a friend or family member for advice or help.

**Look after yourself physically**

Taking care of your physical health can be the first step to improving your mood and feeling better emotionally.

Try to eat a well-balanced diet. Take regular exercise if you can. Think of an activity which is manageable for you and which you might enjoy. If you have not been active for a while, you might need to take this quite slowly. Eating well and keeping active can help to reduce stress and physical tension as well as improving your health and fitness.

Find ways to remember to take your medications at the right time and at the right dose. You may wish to put a reminder on your phone, use a Dosette box or keep a diary.

If you are experiencing lots of pain and discomfort after surgery, for example, talk to your doctors about ways to manage including pain relief medication. If you experience aches and pain after doing more activity following a period of rest try not to worry. This is normal. Next time, try to build up gradually and pace yourself.

Allow yourself enough time for sleep and rest, but try not to worry if you are not sleeping well. Having
a regular bedtime, and allowing time to wind down before bed, can help. Try to resist any temptation to have a few alcoholic drinks at bedtime or to rely on caffeine during the day. This will only make you feel worse in the long run.

Avoiding or cutting down on both drugs and alcohol are likely to benefit your physical and emotional well-being. However, this is not always easy. Later in this leaflet are some suggestions which may be helpful if you do decide to make some changes with drinking or drug use.

Looking after yourself emotionally
Living through a serious illness can have emotional as well as physical effects. This is common and understandable. If you are experiencing some or all of the emotional effects described earlier you are not alone. Being upset, anxious or low is not a sign that you are not coping or are not a strong person. Many people feel this way after serious illness.

Making sense of what has happened and getting used to life after endocarditis can be challenging. You have probably been through a lot and it may take some time to feel back on an even keel. Try to be patient and kind to yourself at this time. Remember, looking after yourself emotionally can be as important as looking after yourself physically.

Below are some suggestions that may help you cope. It is likely that not all of these suggestions will work equally well for you. Try some out and then decide which ones are a good fit for you.

What am I feeling?
• Try to become aware of the particular feelings or emotions you experience. Noticing them and being able to name to them is a good first step, e.g. sad, grumpy, irritable, anxious, overwhelmed, stressed, happy, excited etc.
• Next ask yourself what triggered the feeling. Was it a thought, a memory or an image? Maybe it was something someone said or did or a physical sensation. Once you know the triggers, it can be easier to understand and manage your feelings.
• It can help to keep a diary of times when you experience strong feelings. Write down the feeling and what was happening just before.

What can I do about it?
• Talking to a trusted friend or healthcare professional about how you are feeling. They may have suggestions about how to cope.
• Think about times in the past when you have managed difficult feelings during tough times. What strategies did you use? Were they helpful (in the short-term and long-term)? Could you use them now?
• If these emotions make you feel bad, you may wish to get rid of them. Perhaps in the past you were able to get rid of unwanted feelings using drugs or alcohol or by using other strategies like keeping very busy. While these strategies may help in short term they often have long term unhelpful consequences. Even if they did work well in the past, like keeping busy, they may now be out of date at a time when rest and recuperation are important.
• Getting rid of feelings, positive or negative, is actually very hard so using your energy trying to do this may not help you.
• Instead try just noticing your feelings. This is part of a practice called Mindfulness (see below).
Managing your thoughts

Thoughts pop into our minds all through the day. Pleasant, unpleasant and neutral thoughts. The mind is a bit like a storyteller or a narrator, commenting on what is going on. Sometimes the mind comments in helpful ways, drawing our attention to interesting or pleasant things or reminding us of happy memories from the past or alerting us to things we have planned to do in the future like phone a friend or go to the post office. However, particularly during times of stress, the mind can be less helpful. It might butt in with unpleasant memories from the past or scary predictions about the future. Confusingly, these thoughts are not always facts, even though they may seem convincing. Also, these thoughts are not always helpful.

Below are some suggestions about how to respond to your thoughts;

- First notice your thoughts. What is your mind saying?
- Once you have identified the thought, you have a couple of choices;

Thought Challenging

You could challenge these thoughts by asking yourself the following questions;

- What makes me think this thought is true?
- Is there anything to suggest this thought may not be true?
- Is there another way of looking at this?

- Based on the evidence for and against this thought, what is the most logical or balanced alternative perspective?
- If a friend I cared deeply about had this thought about themselves or their situation, what would I say to them?

Mindfulness

When you are upset or feeling unwell physically, it is common for your mind to come up with lots of different, sometimes strong, feelings. Your mind may also come up with different thoughts, images and memories. Often we can get caught up in reacting to these thoughts and feelings or we get stuck trying to get rid of them, often without much success. As an alternative, try taking a curious attitude towards whatever you are experiencing right now, including thoughts, feelings and sensations. Just notice them without judging them or trying to change them. This is approach is called ‘mindfulness’. Try these simple steps:

- Focus first on your breath
  - Pay attention to the natural rhythm of your breath
  - Notice the rise and fall of your chest and stomach
  - Notice how the breath feels coming in and out of your nose
  - Don’t be concerned if you notice your mind has wandered off
  - Just briefly note what grabbed your attention, e.g. a thought or a feeling?
  - Then bring your focus back to the breath

Being mindful of your experiences is a very different way of paying attention and it takes practice. There are many good books, CDs and apps about mindfulness and about how to apply it if you think this approach might be helpful for you.

You can find some mindfulness recordings at;

Anna often had the thought “I can’t cope” when she felt stressed and overwhelmed. This thought was quickly followed by the thought “And I should be able to cope!”. These thoughts made her feel stressed, anxious and guilty. On the one hand, this thought seemed to be true because it made her feel so bad emotionally. However, when she thought about it there were lots of times in the past when she had coped during tough times, including since her diagnosis. When her mind came up with the “I can’t cope” thought she would reply “Even though it seems as if I cannot cope, I know I have coped in the past and I will be able to cope with this too”. When she thought about what she would say to a friend she added, “And it’s OK not to cope sometimes. You’ve been through a lot. Don’t beat yourself up about having a wobble”.

While challenging thoughts in this way may not stop them coming into your mind, it can help you feel less upset by them and better able to deal with them.

**Mindfulness**

If challenging your thoughts in this way is not a good fit for you, or if you would like to try something different, could use a mindful approach to thoughts in the same way you can for feelings (described above). Try these steps;

- First notice the thought that has popped into your mind
- Try not to judge the thought as good or bad. Just notice it.
- You could even thank your mind, the storyteller, for its contribution to your day
- Then ask yourself, is this thought a helpful one? If so, perhaps pay attention to it, and act on it
- If it is not helpful thought and your experience tells you that these thoughts make you feel bad and keep you stuck, just observe the thought instead of reacting or responding
- You could see the thought in your mind’s eye being a headline on a newspaper that tends prints stories that exaggerate and sensationalise
- Then let the thought pass, like leaves on a stream or cars passing by outside your window

**Changing what you do and how you do it**

Changing how you do things to benefit your health & general well-being is often important after a serious illness. You may have been given lots of advice about what you should do and not do. Often healthcare professionals may suggest lifestyle changes such as eat a balanced diet, establish good sleep routines, take exercise, avoid drugs & alcohol, take your medications as prescribed etc.

However making changes to your lifestyle, perhaps changing habits of a lifetime, can be difficult. It may help to focus on a specific area you are considering making a change in, e.g. your diet, exercise habits, alcohol consumption or recreational drug use. This exercise may help you decide whether it is worth making some changes.

**Pros and Cons Analysis**

Take a piece of paper and divide it into four sections with the following headings;

<table>
<thead>
<tr>
<th>Pros of making a change</th>
<th>Pros of staying the same</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Cons of making a change</td>
<td>Cons of staying the same</td>
</tr>
</tbody>
</table>
You could ask a friend to help with this or think about what a person who cares about you might say if you did ask them for help completing this exercise.

When you have completed this ask yourself;
- On balance, looking at the pros and cons of change and of staying the same, do I want to make a change in this area?
- If yes, how important is this change on a scale of 0-10?
- If yes, how motivated am I on a scale of 0-10?
- If yes, how confident am I that I can make this change (0-10)?

If you decide to make a change rather than stay the same, some of the following strategies may be helpful.

**Goal Setting**

Try to set a specific goal. Goals are easier to achieve if they are **SMART**;
- **S**pecific - what exactly do you plan to work towards? When, where, how, with whom?
- **M**easurable - How will you know you have achieved it?
- **A**chievable - Try to set goals that are so ambitious that you set yourself up to fail. This is usually unhelpful and disheartening
- **R**elevant - Is this goal meaningful and important to you?
- **T**ime-limited - Decide when you want to have achieved the goal by. Is it a short-term, medium term or long-term goal?

- Write your **SMART** goal down
- Share your intention to work towards this goal with a trusted friend, family member or healthcare professional
- When you achieve your goal, give yourself a reward, something you would enjoy, like a cinema trip or a favourite meal
- If you have a setback and do not manage to achieve your goal, try not to give yourself a hard time. Think about what got in the way so you can be prepared if you encounter this barrier next time. If you think you may have set an unrealistic goal that was too difficult reset your goal, making it more achievable. Then re-commit to the goal rather than give up on it.
- If you notice that you keep on encountering barriers to your goals and struggle to overcome them, it may help to use a problem solving approach (see next section)

*Sanjeev used **SMART** goal setting to improve his fitness and stamina. Specifically, he wanted to be able to walk his children to school without taking rest stops and within 20 minutes. Before working towards this goal he was stopping twice and the journey took 30 minutes so he planned to increase his walking pace gradually over time. He discussed the goal with his physiotherapist who agreed with Sanjeev that it was achievable. It was also really important to Sanjeev because it would improve his health but also because being an involved parent was one of his values. He decided to give himself six weeks to work towards this goal. He wrote it on his calendar and told his wife and his brother about it.*

**Problem Solving**

Problem Solving is a step by step way of overcoming barriers to your goals. Using these steps can help when you feel overwhelmed and do not know where to begin, particularly if there are multiple problems you are facing. Below are the keys steps. For more detailed advice see the IMPARTS Leaflet ‘Problem Solving for People Living with Health Conditions’.
1. **Define the Problem(s).** What exactly are you up against? Try to complete this sentence; “The problem I am facing is__________”.

2. **Prioritise.** If you have several problems write a list. Choose two or three problems from the list and order them from least important to most important. Put a circle around the one you have chosen to work on. If you find your mind wandering to the other problems, gently remind yourself that for now you are focusing on just one problem at a time.

3. **Ask yourself** Is this a problem I can do something about, or is it outside my control? Some problems cannot be solved by individuals, despite their best efforts. For example, public transport being on time, the weather or the choices and behaviours of other people may be outside your control. If you believe that there is something you can do about the problem you face, continue following the steps below.

4. **Brainstorm.** List as many possible solutions to the problem as you can. Write down everything from the most simple to the farfetched and funny. This will help you to start thinking flexibly and considering lots of options.

5. **Choose one.** Take a step back and review the solutions you have come up with. Which one do you believe will help you to move closer to solving the problem? Try to choose something manageable and realistic from the list.

6. **Make a plan.** Decide when, where, and how you will carry out the solution you have chosen. Try to be as detailed as possible. Write it down and put it somewhere you can see it.

7. **Beware of jumping ahead or getting side-tracked!** It is common to start off enthusiastically with these steps and then get distracted by other things. To give yourself the best chance of success put a reminder in your phone or tell a friend what you plan to do. Also, it is common to unintentionally skip some steps and jump into doing things. Try not to fall into this trap. The steps are an important tool for helping you approach problems effectively and for helping you learn from what went well and what did not work so well.

8. **Now do it!**

9. **Review how it went.** Did it go to plan? Did it move you closer to solving the problem? If it did not go to plan, perhaps you can break the solution down into smaller more manageable parts or go back to the list to choose another option.

10. **Repeat.** If the problem is not yet solved, go through these steps again.

Others things you could try doing differently;
- Try not to withdraw from people or activities or avoid things you used to do because of fear or because you don’t feel like it. This can be unhelpful in the long run
- Try reconnect with your social and family life. Make contact with friends and family who you believe will be supportive and helpful
- Look out for opportunities for having fun or doing things that give you a sense of achievement
- Think about what really matters to you, i.e. your values. Try to do something most days that keeps you moving in the direction of these values
- Try to be kind and compassionate towards yourself. If this seems odd at first, think about how would you look after for someone you cared deeply for? Could you take this stance towards yourself?
• Ask for help from others. Notice any thoughts which try to stop you, e.g. “I’m a burden” and use strategies above (e.g. thought challenging or mindfulness) to help you deal with those thoughts

Summary
Being diagnosed with endocarditis is a significant life event. Making sense of the diagnosis and what it means for you and your future can be difficult. Getting through the recovery period and beyond can also be a challenge. Having difficult thoughts and feelings, experiencing physical discomfort and being faced with important choices about your health and lifestyle is often part of this journey.

This leaflet hopes to offer some suggestions that can help you look after yourself physically, manage the thoughts and feelings your mind will present to you and make choices that will help you get on with living the life you want.

Next Steps
• There is a lot of information in this leaflet so you may benefit from reading it with a friend or family member. You may even choose to ask for help trying out some of the ideas.
• If after trying out some of the ideas in this leaflet, you continue to struggle emotionally or have great difficulty making the changes you want to make in the interests of your health, ask your healthcare professional about other support that may be available to you.

INFORMATION FOR YOUR DENTIST OR DOCTOR
Do I need antibiotics before I receive dental treatment?
YES, King’s Cardiologists, Cardiothoracic Surgeons and Medical Microbiologists have considered all the evidence and guidelines and agree that, although there is no proven link between dental treatment and endocarditis, antibiotics should still be offered to those with endocarditis or are at high risk (see below).

We recommend antibiotics before dental treatment if you:
Have prosthetic (artificial) heart valves
• Have had endocarditis in the past, regardless of whether you needed valve surgery or replacement as a result
• Have certain types of congenital heart defects, (present from birth) as advised by your cardiologist
• Have had a heart transplant and develop a problem in a heart valve

Antibiotics are only advised for patients with endocarditis or are at highest risk of endocarditis undergoing dental treatment involving bleeding gums (including scaling and root canal procedures).

We do not recommend you take antibiotics if you:-
• Have other heart or valve diseases

Antibiotics should be taken by orally (by mouth) as a single dose 30-60 minutes before procedure. Options are:
Amoxicillin (3g sachet, dissolved in water as per instructions)

Amoxicillin is a type of penicillin. If you are allergic to or intolerant of penicillin, the alternative is: Clindamycin 600 mg

NB If your procedure has to be carried out under a general anaesthetic, you will not be able to take the antibiotics orally. Please ask your dentist to discuss your case in advance with a Medical Microbiologist.
How is endocarditis prevented?
Antibiotics before dental treatment will not completely protect you from getting endocarditis. If your doctor has told you that you are at risk, it is much more important that you look after your teeth and gums and have regular check-ups. If your dentist or doctor wants more information about antibiotic treatment, please contact your named consultant who will be happy to discuss it further.

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Written by
Dr Claire Doyle, Clinical Psychologist
Dr Jane Hutton, Consultant Clinical Psychologist
Charlotte Cox, Trainee Clinical Psychologist

Further Reading
• Manage Your Mind. The Mental Fitness Guide. Gillian Butler and Tony Hope.

King’s Patient Advice and Liaison Service (PALS)
This is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. The PALS office is located on the ground floor of the Hambleden Wing, near the main entrance on Bessemer - staff will be happy to direct you.

Tel: 020 3299 3601
Email: kch-tr.pals@nhs.net

The full range of IMPARTS booklets can be found at:
www.kcl.ac.uk/ioppn/depts/pm/research/imparts/Self-help-materials.aspx