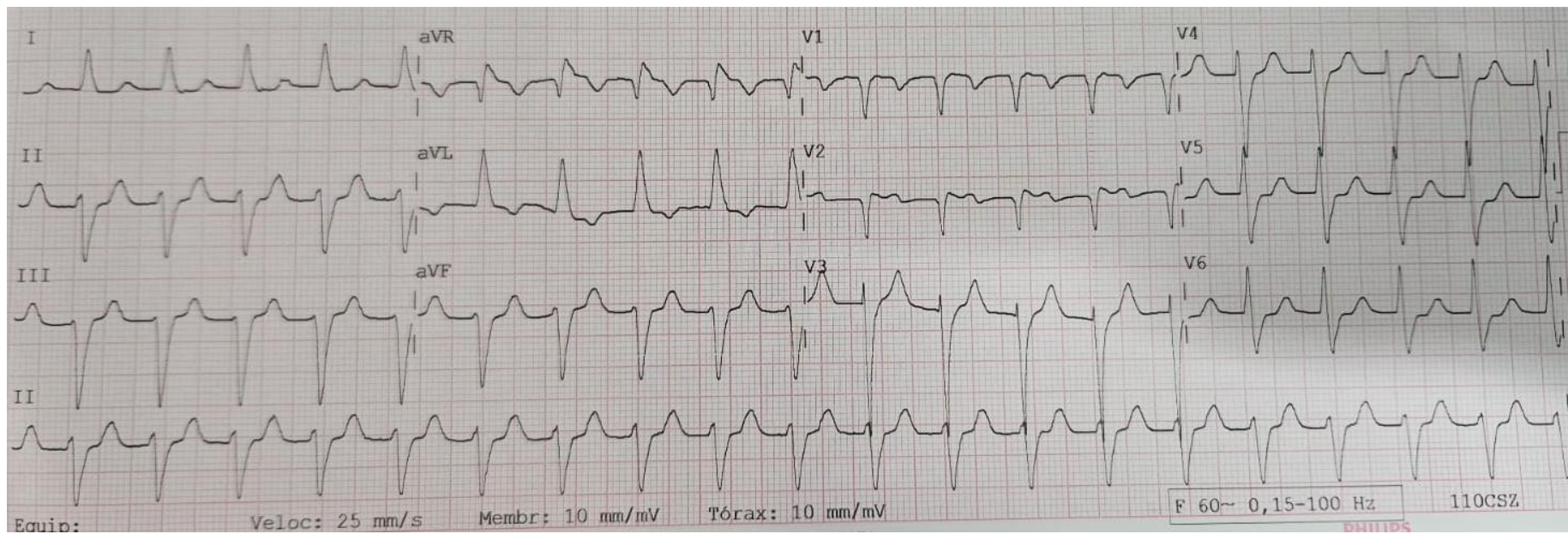
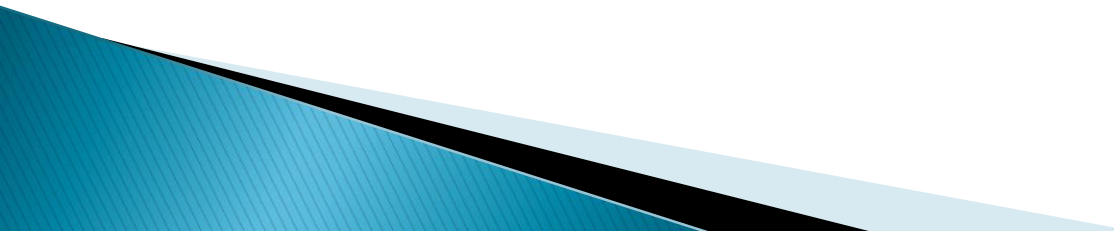


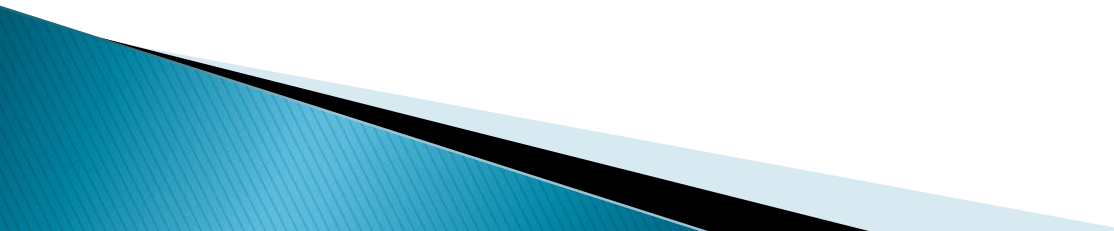
Apresentação de ECG

Dra Mirelle Defanti





- ▶ **Paciente com clínica de emagrecimento, febre persistente e insuficiência cardíaca nova , AVC recente .**
 - ▶ **Diag: endocardite infecciosa de válvula aórtica .**
- 

- **Forte associação com abscesso perivalvar.**
 - ▶ • **BAV de 1º grau geralmente é o primeiro sinal de abscesso.**
 - • **Sinaliza destruição tecidual profunda.**
 - ▶ • **PR crescente:**
 - • **Pode evoluir para BAV Mobitz II ou total.**
 - • **Maior risco de IC, fístulas e mortalidade.**
- 



2023 ESC Guidelines for the management of endocarditis

Developed by the task force on the management of endocarditis of the European Society of Cardiology (ESC)

Endorsed by the European Association for Cardio-Thoracic Surgery (EACTS) and the European Association of Nuclear Medicine (EANM)

A paravalvular abscess of these valves, especially of the aortic valve, may lead to AVB, and new electrocardiographic AVN conduction abnormalities are indicative of a paravalvular extension of the infection.

Multivariable analysis identified that prolonged pre-operative PR and QRS intervals, *S. aureus* infection, presence of aortic root abscess, tricuspid valve involvement, and prior valvular surgery were independently associated with the need for post-operative pacemaker implantation.

Pacemaker implantation should be considered in patients with surgery for valvular endocarditis and complete AVB if one or more of these risk factors is present.⁵¹⁵

Obrigada!