Case Report

Permanent pacemaker lead endocarditis due to *Staphylococcus hominis* and review of the literature

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ABSTRACT

Use of intracardiac devices for heart diseases is increasing worldwide. One of the important complications of pacemakers is infective endocarditis from the leads as the source. In this case, we report a lead endocarditis caused by Staphylococcus hominis four years after the pacemaker implantation. A 50 year-old diabetic woman, who was implanted a permanent pacemaker four years ago, had complaints of fever and fatigue three months ago. On transesophageal echocardiography (TEE), a mobile mass resembling vegetation on the lead, which was 15×10 mm in diameter was revealed. At the end of the second week of treatment, fever persisted and markers of inflammation remained elevated. Thus, the patient was referred for surgery, lead was extracted and a new epicardial lead was placed. The culture of the extracted material was positive for Staphilococcus hominis. Antibiotherapy was continued till the end of the postoperative sixth week accordingly. In conclusion, in patients with pacemakers and risk factors for endocarditis, fever must suggest lead endocarditis and TEE must be performed for accurate diagnosis. In addition to appropriate antibiotic therapy, extraction of infected material is needed for the cure.

Keywords

Lead endocarditis; *Staphilococcus hominis*; Transesophageal echocardiography