



AC012

Adult Cardiology & Clinical Cardiovascular Medicine • Poster Presentation

UNDERUTILIZATION OF ECHOCARDIOGRAPHY IN PATIENTS WITH STAPHYLOCOCCUS AUREUS BACTEREMIA: A MISSED OPPORTUNITY FOR EARLY DIAGNOSIS OF INFECTIVE ENDOCARDITIS IN A NIGERIAN TERTIARY HOSPITAL.

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Background Staphylococcus aureus bacteremia (SAB) is associated with a high risk of infective endocarditis, making echocardiography a key component of evidence based management. However, its utilization in patients with SAB remains poorly described in resource limited settings. This study evaluated echocardiography utilization among patients with SAB and highlights its implications for cardiovascular care.

Methods We conducted a retrospective case series of patients with laboratory confirmed SAB managed at Aminu Kano Teaching Hospital, Kano, Nigeria, between January 2024 and June 2025. Patients with complete clinical records were included. Clinical characteristics, microbiological findings, echocardiographic evaluation, treatment, infectious disease consultation, and in hospital outcomes were reviewed descriptively.

Results Ten patients met the inclusion criteria. Echocardiography was performed in only 3 (30%) patients, while 7 (70%) had no documented echocardiographic evaluation despite confirmed SAB. Infectious disease specialist involvement was documented in 5 (50%) patients. Hypertension (40%) and diabetes mellitus (30%) were the most common co-morbidities, while methicillin resistant and methicillin sensitive S. aureus each accounted for 50% of isolates. One patient died during admission. Limited echocardiography may contribute to delayed recognition of infective endocarditis.

Conclusion Echocardiography was substantially underutilized among patients with SAB, highlighting an important quality of care gap. Given the burden of SAB across Africa and the pivotal role of echocardiography in diagnosing infective endocarditis, similar deficiencies in resource limited settings could contribute to missed or delayed diagnoses and poorer patient outcomes. These findings underscore the need to strengthen echocardiographic evaluation, promote multidisciplinary collaboration, and improve adherence to evidence based management pathways across Nigeria and sub-Saharan Africa.

Keywords: Staphylococcus aureus bacteremia; Echocardiography; Infective endocarditis; Quality improvement; Nigeria.