



Reply to the correspondence “*Staphylococcus capitis* causing infective endocarditis: not so uncommon” by Tchana-Sato & Defraigne

Ziad A. Memish^{1,2}

Received: 1 August 2020 / Accepted: 3 August 2020 / Published online: 30 September 2020
© Springer-Verlag GmbH Germany, part of Springer Nature 2020

To the Editor,

I read with interest the correspondence by Tchana-Sato et al. [1] regarding our article “Native valve *Staphylococcus capitis* infective endocarditis: a mini review” [2]. On behalf of all authors of our original article, I would like to respond to their correspondence.

We appreciate the input from Tchana-Sato et al. The authors indicated that the total number of *S. capitis* endocarditis is 22 cases and not 13. We appreciate the input and the discrepancy may have resulted from the initial search strategy and is certainly an unintentional omission.

We all agree about the management of *S. capitis* native valve endocarditis in the sense that such management could be conservative with antibiotics, with the addition of surgical removal of infected pacemaker or prosthetic valve in

patients with prosthetic valves and pacemaker-associated endocarditis.

Compliance with ethical standards

Conflict of interest None.

References

1. Tchana-Sato V, Defraigne JO. *Staphylococcus capitis* causing infective endocarditis: not so uncommon. Infection. 2020. <https://doi.org/10.1007/s15010-020-01514-4>
2. Al Hennawi HET, Mahdi EM, Memish ZA. Native valve *Staphylococcus capitis* infective endocarditis: a mini review. Infection. 2020;48(1):3–5.

This reply refers to the comment available at <https://doi.org/10.1007/s15010-020-01514-4>.

✉ Ziad A. Memish
zmemish@yahoo.com

¹ Director Research and Innovation Center, King Saud Medical City, Ministry of Health, Al-Faisal University, Riyadh, Saudi Arabia

² Hubert Department of Global Health, Rollins School of Public Health, Emory University, Atlanta, GA, USA