
2030 World Sepsis Declaration



Since the 2012 World Sepsis Declaration, efforts to raise awareness and improve care have advanced. Yet, sepsis remains a major and often overlooked global health issue in both developed and developing countries.

According to the Global Burden of Disease Sepsis Report published in January 2020, sepsis affects 49 million people annually, resulting in 11 million deaths—a toll higher than that of cancer or coronary disease. While sepsis can impact anyone following an infection, young children are the most vulnerable globally.

85% of those affected by sepsis live in low- and middle-income countries (LMICs). Although the incidence rates are similar between LMICs and high-income countries (HICs), LMICs face worse outcomes due to limited access to infection prevention measures and resilient healthcare systems. Young people in these regions are disproportionately impacted, with half of sepsis cases (25 million annually) and numerous deaths occurring in children under five years old. There has also been an alarming increase in sepsis cases among women during or shortly after pregnancy over the last decade.

A person dies from sepsis every 2.8 seconds worldwide. To achieve the UN Sustainable Development Goal (SDG) 3 for Good Health and Well-Being—particularly targets related to reducing maternal, child, and neonatal mortality and addressing non-communicable diseases and universal health coverage—it is crucial to tackle the sepsis burden in both HICs and LMICs.

Despite its prevalence, sepsis is largely unknown to the public. In 2017, the World Health Assembly adopted a Resolution on Sepsis, proposed by the Global Sepsis Alliance and supported by member states, recognising sepsis as a global threat. The Resolution urged all UN member states to develop and implement national action plans to enhance sepsis prevention, diagnosis, and treatment. However, progress has been slow, even in wealthy countries where sepsis claims more lives than breast, bowel, and prostate cancers combined, and coordinated efforts to address it remain scarce. The Resolution acknowledged sepsis as the final common pathway to death from most infectious diseases, often arising as a complication from preventable infections such as influenza, respiratory, intra-abdominal, urinary tract infections, and wound or skin infections.

The threat of sepsis is closely linked with antimicrobial resistance (AMR), which underscores the need for effective infection prevention, including clean water, sanitation, hygiene, and vaccination programmes, as well as robust approaches to recognising and managing sepsis.

The reasons behind the high sepsis rates vary. In HICs, ageing populations, the rising prevalence of non-communicable diseases like diabetes, and the increasing complexity of care contribute significantly. In developing countries, factors like malnutrition, poverty, and lack of access to vaccines and timely treatment lead to a disproportionate number of deaths. In all regions, AMR and emerging virulent microorganisms play critical roles.

A coordinated, multi-agency response is essential to address the global sepsis burden effectively. The Global Sepsis Alliance calls for worldwide action and urges all relevant stakeholders to commit to six key targets, with national action plans to be implemented by 2030.

Achieving transformative change requires leadership from global agencies such as the WHO and the United Nations, integrating sepsis into existing global health strategies and allocating resources accordingly.

Key Targets to Achieve by 2030

1. Reduce sepsis incidence from 677 episodes per 100,000 population per year to fewer than 500 episodes per 100,000 per year through enhanced hygiene, sanitation, clean childbirth, improved nutrition, clean water access, and vaccination programmes.
2. 50% of governments, including those in HICs and LMICs, will establish national action plans addressing infection prevention, antimicrobial stewardship, and urgent sepsis recognition and management.
3. Increase sepsis survival rates for children (including neonates) and adults by at least 20% from 2020 levels by promoting early recognition systems and standardised emergency treatment, with routine sepsis screening incorporated in acute health systems.
4. Ensure that all high-income countries and at least 20% of LMICs have established resources for follow-up care for sepsis survivors, addressing cognitive, psychological, and physical disabilities.
5. Sepsis will be widely recognised as a medical emergency, with at least 80% of people in high-income countries able to define sepsis. Sepsis education will be included in all relevant medical training programmes.
6. Establish sepsis data sets in at least 50% of HICs and 20% of LMICs, consistent with international standards, to track the global burden of sepsis and evaluate the impact of control and management interventions.

The Global Sepsis Alliance calls on countries to commit to these targets and develop national action plans by 2030, with leadership from global health organisations to ensure the required resources and integration into broader health strategies.

Source: [World Sepsis Day](#)

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Published on : Wed, 11 Sep 2024