

Long-Term Mortality Among Sepsis Patients



Half of all patients admitted to an emergency department with sepsis died within two years, according to a Danish study aimed at identifying factors that could predict patient outcomes. These findings were presented at the European Emergency Medicine Congress.

Study researchers analysed a cohort of 714 adult sepsis patients, revealing key risk factors that contributed to higher mortality rates during a two-year follow-up period.

The study showed that certain factors increased the likelihood of death after sepsis, including advanced age, as expected. In addition, conditions such as dementia, heart disease, cancer, and prior hospitalisation with sepsis within the past six months significantly increased the risk of death during the follow-up.

A 2020 World Health Organization (WHO) report highlighted knowledge gaps in sepsis outcomes, citing inconsistencies in study design and data sources that led to wide variations in sepsis incidence and mortality estimates. The WHO called for prospective studies to better understand long-term outcomes in sepsis patients.

The researchers used data from Danish registries to track patient deaths. After a median follow-up of two years, 361 (50.6%) of the sepsis patients had died from various causes. The risk of death increased by 4% with each additional year of age.

Additional risk factors included a history of cancer, which more than doubled the risk of death (121%); ischaemic heart disease, which raised the risk by 39%; dementia, which increased it by 90%; and prior sepsis admission, which boosted the risk by 48%.

These findings highlight several risk factors that healthcare professionals should prioritise for patient care and follow-up. Understanding that sepsis carries a high mortality rate is essential for both clinicians and researchers.

Although the researchers attempted to develop a model to predict long-term death risk, they found its accuracy insufficient for clinical use. The study identified several important risk factors, but the team could not build a predictive model suitable for clinical application. There is a need for further studies exploring complications after hospitalisation and discharge. However, new data, including organ failure scores, have improved their model's predictive ability, offering potential applications for future research and clinical practice.

Sepsis remains a serious and potentially deadly condition. This study identifies important risk factors, allowing clinicians to closely monitor sepsis patients. More research is needed to better understand these risks and improve treatment outcomes.

Source: European Emergency Medicine Congress (EUSEM 2024)

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