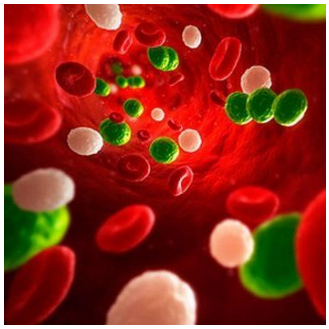
Readmissions in Severe Sepsis Common



Severe sepsis is a significant cause of rehospitalisation along the lines of nationally recognised outcome measures and more commonly discussed conditions such as pneumonia and heart failure (HF), according to a new study presented at the 2015 American Thoracic Society International Conference.

“Severe sepsis continues to be a common cause of hospitalisation and has the associated high costs,” says lead author Darya Rudym, MD, New York University School of Medicine, New York.

Previous studies have examined some quality measures (eg, length of stay) associated with sepsis, an infection of the bloodstream that can lead to organ failure and death. Dr. Rudym's study specifically looked at the rate of readmission within 30 days after discharge with a diagnosis of severe sepsis. Dr. Rudym and colleagues sought to compare this rate to the readmission rates for Centers for Medicare and Medicaid Services reported outcomes such as acute myocardial infarction (MI), HF and pneumonia.

The research team studied inpatient discharges from Bellevue Hospital in New York City between July 2011 and July 2014 and identified subsequent readmissions to the hospital within 30 days.

During the three-year study period, the team tracked 22,712 discharges, with an overall readmission rate of 15.31 percent (3,477 patients). Based on three different previously reported methods of detecting cases of severe sepsis, namely Angus, Martin, and the explicit International Classification of Diseases-9-CM sepsis codes, 1,801, 798, and 579 patients, respectively, were identified as discharged with severe sepsis. “Of those, 266, 119, and 71 were readmitted within 30 days, accounting for 14.77 percent, 14.91 percent, and 12.26 percent, respectively,” explains Dr. Rudym.

In comparison, the readmission rates for MI, pneumonia and HF were 8.67 percent, 14.46 percent and 15 percent, respectively.

As Dr. Rudym points out: “Readmission rates in severe sepsis are shown not to be significantly different from readmission rates in heart failure and pneumonia.”

Source: American Thoracic Society
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Published on : Wed, 20 May 2015

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