



Sepsis

What is Sepsis?

Sepsis (also known as blood poisoning) is the immune system's overreaction to an infection or injury. Normally our immune system fights infection – but sometimes, for reasons we do not yet understand, it attacks our body's own organs and tissues. If not treated immediately, sepsis can result in organ failure and death. Yet with early diagnosis, it can be treated with antibiotics.

Symptoms

Sepsis can initially look like flu, gastroenteritis or a chest infection. There is no one sign, and symptoms present differently between adults and children.

Potential signs of sepsis in children:

A child may have sepsis if he or she:

- Is breathing very fast
- Has a 'fit' or convulsion
- Looks mottled, bluish, or pale
- Has a rash that does not fade when you press it
- Is very lethargic or difficult to wake
- Feels abnormally cold to touch

A child under 5 may have sepsis if he or she:



- Is not feeding
- Is vomiting repeatedly
- Has not passed urine for 12 hours

If a child is unwell with either a fever or very low temperature (or has had a fever in the last 24 hours), call 999 and just ask: could it be sepsis?

Potential signs of sepsis in adults:

- **S**lurred speech or confusion
- **E**xtrême shivering or muscle pain
- **P**assing no urine (in a day)
- **S**evere breathlessness
- **I**t feels like you're going to die
- **S**kin mottled or discoloured

Seek medical help urgently if you (or another adult) develop any of the above signs.



Sepsis facts:

Sepsis is more common than heart attacks – it is believed that there are at least 250,000 cases of sepsis each year in the UK. The British Heart Foundation estimate that there were 193,450 heart attacks in 2016.

Sepsis claims more lives than lung cancer, and more than bowel, breast and prostate cancer combined – it is estimated that at least 46,000 people died from sepsis in the UK in 2015, 35,895 from lung cancer and 38,623 from bowel, breast and prostate cancer combined.

Risk factors for sepsis

(adapted from NICE guideline [NG51], Sepsis: recognition, diagnosis and early management, 2016)

The very young (under one year old) and older people (over 75 years old) or people who are very frail.

People who have impaired immune systems because of illness or drugs, including:



- those on chemotherapy for cancer
- those with impaired immune function (e.g. through diabetes, splenectomy, sickle cell disease) those on long-term steroids
- those taking immunosuppressant drugs to treat non-malignant disorders such as rheumatoid arthritis those who are recovering from a surgical procedure or other invasive procedures, in the past 6 weeks
- anyone with a breach of skin integrity (for example, cuts, burns, blisters or skin infections)
- intravenous illicit drug users
- those with indwelling lines or catheters

Women who are pregnant, have given birth or had a termination of pregnancy or miscarriage in the past 6 weeks are in a high-risk group for sepsis.

In particular, women who:

- have impaired immune systems because of illness or drugs
- have gestational diabetes or diabetes or other comorbidities
- needed invasive procedures (for example, caesarean section, forceps delivery, removal of retained products of conception)



- had prolonged rupture of membranes
- have or have been in close contact with people with group A streptococcal infection, for example, scarlet fever
- have continued vaginal bleeding or an offensive vaginal discharge

For neonates, risk factors include:

- invasive group B streptococcal infection in a previous baby
- maternal group B streptococcal colonisation, bacteriuria or infection in the current pregnancy
- prelabour rupture of membranes
- preterm birth following spontaneous labour (before 37 weeks' gestation)
- suspected or confirmed rupture of membranes for more than 18 hours in a preterm birth
- intrapartum fever higher than 38°C, or confirmed or suspected chorioamnionitis
- parenteral antibiotic treatment given to the woman for confirmed or suspected invasive bacterial infection at any time during labour, or in the 24-hour periods before and after the birth (this does not refer to intrapartum antibiotic prophylaxis)
- suspected or confirmed infection in another baby in the case of a multiple pregnancy



SEPSIS SYMPTOMS

CHILDREN:

A child may have sepsis if he or she:

- **Is breathing very fast**
- **Has a 'fit' or convulsion**
- **Looks mottled, bluish or pale**
- **Has a rash that does not fade when you press it**
- **Is very lethargic or difficult to wake**
- **Feels abnormally cold to touch**

ADULTS:

An adult may have sepsis if they show any of these signs:

- S**lurred speech or confusion
- E**xtrême shivering or muscle pain
- P**assing no urine (in a day)
- S**evere breathlessness
- I**t feels like you're going to die
- S**kin mottled or discoloured

Call 111 or contact your GP if you're worried about an infection.

Call 999 or visit A&E if someone has one of the sepsis symptoms.

JUST ASK "COULD IT BE SEPSIS?"



THE UK
SEPSIS
TRUST

www.sepsistrust.org



Further resources:

- <https://www.nhs.uk/conditions/sepsis/>
- https://sepsistrust.org/wp-content/uploads/2018/06/Sepsis_Manual_2017_web_download.pdf