

SEPSIS 9 1 1

COMMUNITY EDUCATION PRESENTATION

Sepsis 911 Leader Script

SLIDE 1 – Sepsis 911

Welcome to Sepsis 9-1-1. My name is _____. I'm speaking to you today about sepsis, something that you may not have heard of before you joined us today, or don't know much about. You're not alone.

According to the latest Sepsis Alliance annual survey, done in 2020, 71% percent of American adults had heard the word sepsis. This is a far cry from when Sepsis Alliance first started, when the number was at 19%. But we still face the fact that many who have heard the word, don't really know what it means.

Today's goal for this presentation is to help improve that statistic by helping to spread sepsis awareness among people in the community.

I'm going to cover what sepsis is and isn't, the symptoms and stages, as well as prevention and what to do if you think you or a loved one has sepsis.

SLIDE 2 – Presenter(s)

Personal preference on whether to use this or not

SLIDE 3 – Disclaimer

Read slide to participants and then handout the pretest.

Before talking about sepsis. I'm going to ask you to fill out a short quiz now and then again when the presentation is finished. This questionnaire will help both of us understand what you knew about sepsis before we started and how much you learned from our talk.

Please take a few minutes to answer these questions.

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SLIDE 4 – What is Sepsis

So, let's get started. What is sepsis? The word originates from the Greek, meaning to decay

It is your body's toxic response to an infection. Much like someone who is allergic to bees develops an allergic reaction to the bee sting or someone with a broken leg has pain, sepsis is a reaction to an infection.

When you have an infection, your immune system works hard to fight it. Sometimes it can fight the infection on its own and other times it needs help with drugs like antibiotics, antifungals, or antiviral medications.

For reasons we don't understand, sometimes instead of fighting the infection, your body starts to attack itself. This is sepsis.

It's the number one killer in hospitals in the U.S. however, most cases begin in the community, not a hospital. This means that most of the time sepsis develops from an infection someone gets in everyday life, as opposed to as a result of a hospital procedure or complication.

SLIDE 5 – What Sepsis is NOT

People may refer to sepsis as blood poisoning, but that term isn't accurate. Sepsis is also not an infection and it's not contagious. It's your body's reaction TO an infection.

It is also not rare, either. In fact, about 1.6 million people in the U.S. develop sepsis every year. And now, the numbers will go up, with COVID-19 affecting so many people.

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SLIDE 6 – Sepsis in the United States

Despite what many news reports suggest, sepsis is NOT rare. Every 90 seconds, someone in the U.S. dies from sepsis. Before COVID-19, there were an estimated 350,000 sepsis-related deaths each year in the U.S. Now, there will be many more, because severe COVID is viral sepsis.

Why do people think it's rare though and why have so many not heard of it?

In the healthcare community, sepsis isn't a commonly used word. Unfortunately, doctors tend to not to use the word sepsis instead saying things like "complications of pneumonia," or "complications from an infection."

If doctors and nurses aren't using the word sepsis, it's more difficult for patients and families to learn about it. We all need to start using the word. Say sepsis.

SLIDE 7 – Older Adults & Sepsis

Sepsis can affect anyone at any age, but older adults represent a large part of those who develop the condition.

Every year, more than 1.3 million adults, aged 45 and over, are hospitalized with sepsis.

Adults who are 65 or older are 13 times more likely to be hospitalized with sepsis than their younger counterparts - and 63% of adults 60 and older end up in the ICU with sepsis.

SLIDE 8 – Pediatric Sepsis

Sepsis is a leading cause of death for children in the U.S., taking more young lives than childhood cancers. More than 18 children die from sepsis each day in the U.S. and many of those lives could be saved with improved public awareness of sepsis symptoms and expanded health provider education.

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SLIDE 9 – Maternal & Child Sepsis

According to the World Health Organization (WHO), maternal sepsis refers to sepsis that results from infection during pregnancy, childbirth, post-abortion, or post-partum period.

The U.S. has the third highest rate of maternal mortality of all high-income countries.

In the U.S., Black women are 3.3 times more likely to die from pregnancy-related causes, and American Indian and Alaskan Native women 2.5 times more likely, than white women.

SLIDE 10 – Anyone Can Get Sepsis

Celebrities also get sepsis.

Professional boxer Muhammad Ali passed away in June 2016 from septic shock.

Actress Patty Duke passed away in March 2016 from sepsis.

Muppet's creator Jim Henson passed away in May 1990. There are conflicting reports as to what type of infection Mr. Henson had (pneumonia, strep, even toxic shock syndrome), but it was later confirmed the cause was organ failure. While the news media called it organ failure, we know that means sepsis.

Actress Mary-Louise Parker developed sepsis from Influenza A.

After more than 25 years as the Pope, Pope John Paul II passed away from sepsis and multiple organ failure in April 2005.

Country singer Chris Young went into septic shock after an infection in his leg progressed.

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SLIDE 11 – Why This Is Important For You?

People who do know about sepsis may believe it is only something that occurs in the hospital. We know this isn't the case. By knowing about sepsis and what to watch for, speaking up when concerned about sepsis, you can save lives and limbs.

SLIDE 12 – Any Infection Can Cause Sepsis

There are many types of infection, bacterial, viral, fungal, and parasitic. Bacterial and viral infections are the most likely ones to cause sepsis. The most common infections that trigger sepsis are respiratory tract infections, such as the flu.

SLIDE 13 – Progression of sepsis

Just like heart attack and stroke, if someone you know has an infection or is very sick with any of these symptoms I'm about to describe, suspect sepsis and seek medical help right away.

Just like strokes and heart attacks, time is vital. The chance of surviving severe sepsis drops by 8% every hour there is no treatment.

Sepsis is a medical emergency. Call 9-1-1 and be sure to let them know you are concerned about sepsis.

SLIDE 14 –Who Is at Increased Risk?

Anyone at any time, regardless of how healthy they are, can develop sepsis. But some groups are at higher risk than others. It all comes down to the immune system and how well it works.

SLIDE 15 – Who Is at Increased Risk? (con't)

Sometimes it isn't the immune system that puts us at risk, it's our living situation

This is why it's particularly important to be aware of the signs and symptoms of sepsis if you are in any of these groups.

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SLIDE 16 – Sepsis & Older Adults

Much more likely not to return home

Institutional living = increased resistant bacteria risk

Older adults who are in the ICU for septic shock tend to be sicker than their younger counterparts and stay longer.

Much more likely to be unable to return home (or to previous living conditions) after hospital admission for sepsis

SLIDE 17 – Maternal Sepsis

Risk factors associated with developing maternal sepsis include:

Not having given birth before (called nulliparity by medical professionals)

Black race

Public or no health insurance.

Other childbirth-related (obstetric) risk factors include:

Caesarean delivery, use of assisted reproductive technologies, and multiple births (e.g. twins or triplets)

SLIDE 18 – Stages of Sepsis

Sepsis is when you have a combination of any of the symptoms, such as high or low body temperature, rapid breathing, confusion, and change in mental status.

When someone progresses to severe sepsis, they have a combination of these symptoms AND one of their organs is failing. This could be the kidneys not producing urine or your lungs not working properly, making it difficult to breathe. These are just two examples.

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Most people who are at the early stages of sepsis may not be admitted to the hospital. Treatment with antibiotics and fluids in the emergency room may be enough for the immediate care, and then they can be sent home with oral antibiotics. However, if the person is unstable or has already developed severe sepsis, they will be admitted.

The definition of shock in medicine, in general, is when your blood pressure drops, and your blood isn't circulating effectively enough to provide oxygen and nutrients to the body's organs and tissues.

Septic shock is the most severe form of sepsis and occurs when you have the signs of sepsis, one or more of your organs aren't working properly, AND your blood pressure drops. It is the most difficult to treat. Sepsis can progress very quickly, which is why it's so important to know the symptoms and get medical attention right away if you suspect sepsis.

SLIDE 19 –Sepsis

We know that sepsis touches anyone, especially older adults, but how can you recognize it?

That's the tricky part. There is no one symptom associated with sepsis - medical staff have to look at the patient as a whole, putting the puzzle pieces together. So what can non-medical people look for then?

Sepsis Alliance put together this memory aid to help you recognize possible signs of sepsis:

T.I.M.E

T is for temperature. Is the body temperature higher or lower than usual for that person?

I is for infection. Is there an infection or - just as important - the possibility of an infection? For example, has the person recently undergone surgery or dental work? Were they working in the garden and cut themselves? Had they been in contact with someone with a contagious illness?

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M is for mental status. Is the person difficult to wake? Is the person becoming confused or has confusion worsened?

and E is for extreme. Many people who had sepsis report that they felt the worst pain ever, they felt the sickest they'd ever felt. So, severe pain, shortness of breath, etc.

Two or more of these signs are worrisome and should be checked.

SLIDE 20 – Sepsis Is a Medical Emergency

As previously mentioned, sepsis is a medical emergency, just like a heart attack or stroke.

The golden hour is the first hour after a medical emergency sets in. This is the time when there is the highest chance that prompt treatment will prevent serious harm or death.

Time is of the essence when it comes to treating sepsis.

SLIDE 21 – Life After Sepsis

Many individuals fully recover from sepsis, while many others are left with long-lasting effects, such as amputations or organ dysfunction, like kidney failure. Other after-effects of sepsis are less obvious, such as memory loss, anxiety, or depression.

SLIDE 22 – Post-Sepsis Syndrome

Older adults at higher risk for long-term cognitive impairment and physical problems such as: not being able to walk, not being able to do everyday activities such as bathing, toileting or preparing meals

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Almost 60% of sepsis survivors experience worsening cognitive and/or physical function

Post-sepsis syndrome is a condition that affects up to 50% of sepsis survivors. They are left with physical and/or psychological long-term effects, such as:

- Insomnia, difficulty getting to sleep or staying asleep
- Nightmares, vivid hallucinations and panic attacks
- Disabling muscle and joint pains
- Extreme fatigue
- Poor concentration
- Decreased mental (cognitive) functioning
- Loss of self-esteem and self-belief

SLIDE 23 – Children Can Get PSS Too

Nearly one-quarter of the children who survive hospitalization for sepsis, experience a decrease in health-related quality of life.

And as many as 35% fail to return to their previous quality of life one year

SLIDE 24 - Readmissions

Unfortunately, severe sepsis or septic shock survivors may end up back in the hospital. This can be due to many reasons, but most often it's due to a repeat or another infection or sepsis.

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SLIDE 25 – Can Sepsis Be Prevented?

We don't know why some people get sepsis from a simple infection and others don't. The only way to prevent sepsis from occurring in the first place is by preventing infections.

SLIDE 26 – Infection Prevention

Infection prevention is sepsis prevention!

Keeping wounds clean and dry, avoiding people who are sick and avoiding going out when we are sick, receiving recommended vaccines, and taking care of ourselves when we do get an infection. That means:

- Taking antibiotics when prescribed for a bacterial infection and following the directions
- Taking them as often as prescribed and for as long as prescribed.
- Not taking someone else's antibiotics because you think it may be the same infection.
- Not asking for antibiotics for an infection that is not bacterial.

Risk factors include things like having diabetes. Proper foot care and inspections can prevent wounds that might not be noticed and can become infected, for example.

Not all infections can be prevented, and as a result not all cases of sepsis can be prevented

SLIDE 27 – Hand Hygiene

SLIDE 28 – 5 Ways to Help Improve Sepsis Recovery

Sepsis Alliance has letter that explain the issues to professionals in a survivor's life that may be helpful. They can be printed out and presented to:

- Doctors
- Teachers
- Coaches
- Daycare workers
- Employers

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SLIDE 29 – Be a Sepsis Advocate!

Up to half of sepsis deaths could be prevented by timely recognition and treatment and many complications could be avoided.

In order to advocate for your clients, yourself and your loved ones, you first need to know that sepsis exists.

That's why sepsis awareness is vital and hopefully after today you know more about sepsis and can recognize the symptoms.

In addition to recognizing sepsis, it is important to express your concerns to the medical team and ask for clarification if anything is not understood.

SLIDE 30 – Resources

SLIDE 31 – Thank you

Thank you for sharing your time with me. We're ready to wrap up with a short quiz to see what you've learned. I'd also like you to complete a quick evaluation about today's presentation. After that, we'll take some time to answer any questions.

If you're looking for more resources you can also go to Sepsis Alliance's website, [Sepsis.org](https://sepsis.org), email them at Info@Sepsis.org, and find them on social media.

HAND OUT POST-QUIZ AND ATTENDEE SURVEY

Allow a few minutes for everyone to complete the quiz and evaluation, then go over the answers together. Encourage audience participation by having an attendee share what they think the right answer is.

Made possible in part by an educational grant from Merck & Co., Inc.