

Editorial

The Surviving Sepsis Campaign: raising awareness to reduce mortality

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Abstract

Sepsis affects 18 million people worldwide every year, and on average each case costs more than US\$22 000 to treat. Despite this there is no consensus on the clinical definition of sepsis, and successful diagnosis and treatment is difficult. The Barcelona Declaration, issued by the Surviving Sepsis Campaign in October 2002, outlines a six-point plan to reduce the relative mortality of sepsis by 25% over the next 5 years. The Campaign organizers are currently producing evidence-based guidelines on source control and management of sepsis, as well as a policy document on how sepsis is managed around the world.

Keywords diagnosis, health education, practice guidelines, sepsis

At the annual congress of the European Society of Intensive Care Medicine (ESICM) in October 2002, the newly formed Surviving Sepsis Campaign issued their 'Barcelona Declaration' – a call for action against sepsis, which is a leading cause of death in the intensive care unit (ICU). Surviving Sepsis aims to harness the support of governments, health agencies, the public and other health care professionals to decrease the relative mortality of sepsis by 25% over the next 5 years.

The idea for the Campaign is based on the previous success of the so-called "Milan Declaration" made at a meeting of the European Association for the Study of Obesity, which helped raise awareness of the problems of obesity. A similar success is hoped for Surviving Sepsis, which is a collaborative project by three major intensive/critical care organisations: the European Society of Intensive Care Medicine (ESICM), the Society of Critical Care Medicine (SCCM), and the International Sepsis Forum (ISF). Although the initial funding for the Campaign was provided by an unrestricted educational grant from Eli Lilly and Company, both Baxter and Edwards Lifesciences are now contributors.

The Campaign organisers also continue to seek funding from other commercial and non-commercial sources.

The documented incidence of sepsis worldwide is 1.8 million each year, but this number is confounded by a low diagnostic rate and difficulties in tracking sepsis in many countries. Surviving Sepsis estimate that with an incidence of 3 in 1000 the true number of cases each year reaches 18 million, and with a mortality rate of almost 30% it becomes a leading cause of death worldwide [1,2]. The incidence is set to rise as the population ages, the elderly being worse affected [1]. Sepsis costs on average US\$22 000 per patient, and its treatment therefore has a great impact on hospitals' financial resources, with US\$16.7 billion each year being spent in the USA alone [1]. The cost of treating an ICU patient with sepsis is six times greater than that of treating a patient without sepsis [3].

The Campaign aims to raise awareness of the challenges associated with sepsis. The fundamental challenge is the difficulty in its diagnosis [4,5]. There is no consensus on the clinical definition of sepsis and, because of lack of training,

Table 1**Call to action: the Surviving Sepsis six-point action plan**

Issue	Details
Awareness	Increase awareness of health care professionals, governments, health and funding agencies, and the public of the high frequency and mortality associated with sepsis
Diagnosis	Improve the early and accurate diagnosis of sepsis by developing a clear and clinically relevant definition of sepsis and disseminating it to our peers
Treatment	Increase the use of appropriate treatments and interventions by disseminating the range of care options and urging their timely use
Education	Encourage the education of all health care professionals who manage sepsis patients by providing leadership, support and information to them about all aspects of sepsis management, including diagnosis, treatments and interventions, and standards of care
Counselling	Provide a framework for improving and accelerating access to post-ICU care and counselling for sepsis patients
Referral	Recognize the need for clear referral guidelines that are accepted and adopted at a local level in all countries by initiating the development of global guidelines

Data from Surviving Sepsis [5]. ICU, intensive care unit.

intensivists often miss the diagnosis [6]; this is especially problematic, given that early treatment is associated with greater success [7]. Another challenge is that the cause of sepsis is often hard to pinpoint and therefore manage [8]. The incidence of sepsis is increasing, not just as a result of the aforementioned ageing population but also because of the development of resistance to antibiotics [9]. Even with successful treatment the effects of sepsis can be long lasting, with survivors having a significantly lower quality of life than before their illness [10].

What will Surviving Sepsis do?

The Barcelona Declaration outlined a six-point action plan (Table 1) aimed at improving the management of sepsis. The declaration – in essence a document outlining the problems associated with sepsis, a statement of intent and a call to action – recognizes the importance of increasing awareness of sepsis among health care professionals, governments, the public and funding bodies. Using the Declaration as a springboard, Surviving Sepsis is currently collaborating with national societies to find how countries manage sepsis, the challenges they encounter and how their hospital services are structured. From this they hope to create a policy document by the second quarter of 2003, which they will use to secure further sponsorship, particularly from governments and bodies such as the World Health Organization and the US National Institutes of Health. This sponsorship will fund the production of evidence-based guidelines on the management of sepsis, which Surviving Sepsis hopes to release at the annual congress of the ESICM in October 2003. These guidelines will reiterate the definition of sepsis given by the ‘Washington paper’ – which is yet to be published but has been described elsewhere [5] – and will be the first step toward a global strategy to combat sepsis that can be adapted to local use. In the meantime, the Surviving Sepsis Campaign is planning a presentation

describing the public's awareness of sepsis, and a summary of the process of producing the guidelines on source control and management at the upcoming SCCM's Critical Care Congress in January 2003.

With the Barcelona Declaration, the evidence-based guidelines and the policy document describing practices in different countries, those involved in Surviving Sepsis hope that governments, health agencies, the public and health care professionals will support their campaign to tackle the challenges of sepsis.

Competing interests

None declared.

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