### **TREATMENT**

Sepsis is initially treated with IV fluids and antibiotics. Other medications, such as those to raise blood pressure may be needed. If someone you know is admitted to an intensive care unit (ICU), you may see many machines used to monitor body function (heart rate, blood pressure), medications and IV fluids, and perhaps a ventilator to help the patient breathe.

#### **PREVENTION**

The key to preventing sepsis is to prevent an infection from occurring in the first place. The first step in infection prevention is thorough and frequent handwashing. This helps reduce the spread of germs. Many illnesses are also prevented through regular vaccinations, such as for the flu or pneumonia. Prompt and proper care of all wounds is also important, as well. If an infection does occur, it must be treated as quickly and effectively as possible. Any infection should be taken seriously. Do not hope it will go away. Action must be taken.

The information in this pamphlet is intended for educational purposes only. Sepsis Alliance does not represent or guarantee that this information is applicable to any specific patient's care or treatment. The educational content here does not constitute medical advice from a physician and is not to be used as a substitute for treatment or advice from a practicing physician or other healthcare provider. Sepsis Alliance recommends users consult their physician or healthcare provider regarding any questions about whether the information in this pamphlet might apply to their individual treatment or care.

## SEPSIS IS A MEDICAL EMERGENCY

Sepsis is a toxic response to an infection.

There is no single sign or symptom of sepsis.

It is, rather, a combination of symptoms.

Symptoms can include ANY of the following:



**Temperature:** higher or lower than normal



**Infection:** May have signs and symptoms of an infection



**Mental Decline:** Confused, sleepy, difficult to rouse



**Extremely III:** Severe pain, discomfort, shortness of breath

CALL 9-1-1 OR GO TO A
HOSPITAL AND SAY "I AM
CONCERNED ABOUT SEPSIS"

To learn more about sepsis, or to read real-life stories of survival, visit Sepsis.org

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# SEPSIS AS YOU AGE





Sepsis affects people of all ages. However, older people, particularly those over 65 years old and those who have chronic health issues are even more susceptible to sepsis than any other group. In fact, 80% of sepsis cases occur in adults 50+ years of age.

Sometimes incorrectly called blood poisoning, sepsis is the body's overwhelming and life threatening response to infection, which can lead to tissue damage, organ failure and death. Sepsis kills and disables millions and requires early suspicion and rapid treatment for survival. Like strokes or heart attacks, sepsis is a medical emergency that requires rapid diagnosis and treatment.

Sepsis and septic shock can result from an infection anywhere in the body, such as pneumonia, influenza, or urinary tract infections (UTIs). Worldwide, one-third of people who develop sepsis die. Many who do survive are left with life-changing effects, such as post-traumatic stress disorder (PTSD), chronic pain and fatigue, organ dysfunction (organs don't work properly) and/or amputations.

The immune system becomes less effective at fighting infections as we age. This results in older people contracting more infections and the infections are more severe. Any infection can develop into sepsis.

As people age, they also may develop one or more chronic conditions, such as diabetes, kidney disease, heart disease, or chronic obstructive pulmonary disease (COPD), to name a few. These types of chronic illnesses also increase your risk of developing infections and sepsis.

Any type of infection can cause sepsis, from the flu to an infected bug bite, but the most common infections that trigger sepsis among older people are respiratory, such as pneumonia, or genitourinary, such as a UTI.

Infections can also develop in other ways, for example:

- Cracked or abscessed teeth
- A scratch or bite from a pet
- Dry or fragile skin that tears easily
- Pressure sores from sitting in a wheelchair or lying in bed

### **SPOTTING AN INFECTION**

It's not always easy to spot infections among older people. For example, symptoms of a UTI usually include the need to urinate frequently, the need to urinate immediately (urgency), not feeling as if you've emptied your bladder completely, burning or pain while urinating, and cloudy and foul-smelling urine. For many seniors though, the first sign of a UTI is a change in mental status – they become confused or disoriented. The infection could be present for quite a while before it is noticed. The same could happen with other infections, like pneumonia.

If an older person suddenly becomes confused or behaves in an unusual manner, or if confusion or disorientation worsens, this could be a sign of an infection. If the infection is not identified, it can progress and cause sepsis. Sepsis needs to be suspected and recognized as quickly as possible. It must be treated fast as every hour that sepsis is not treated increases the risk of death. Signs of sepsis are generally the same among all adults, regardless of age:

- Change in body temperature, either a fever (above 101.3 degrees F) or a lower than normal temperature (below 95 degrees F)
- Rapid heart rate (above 90 beats per minute)
- Rapid breathing (above 20 breaths per minute)
- Shaking
- Confusion

### WHY IS SEPSIS SO SERIOUS IN OLDER PEOPLE?

Sepsis is a very serious illness for anyone at any age, but it can be particularly devastating for seniors. The risk of dying from severe sepsis or septic shock rises as you get older. And according to a study published in 2010, older severe sepsis survivors were more than three times more likely to see a drop in cognitive (mental) abilities. This can make it impossible for them to return to their previous living arrangements and often results in admission into a chronic healthcare facility.

It is also important to keep in mind that sepsis doesn't affect just the patient. The stress of having a family member who is so ill can take a significant toll on the health of their spouse or partner, especially if they are the primary caregiver.