CHAPTER: 11

AN OVERVIEW OF SEPSIS SURVIVORSHIP IN UNITED STATES

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INTRODUCTION

Established in 2004, the Sepsis Alliance is a non-profit organization committed to increasing awareness of sepsis. Its mission involves educating patients, families, and healthcare professionals on treating sepsis as a medical emergency. The organization collaborates with sepsis survivors, sharing their stories through content creation to inform the general public about this often-deadly condition. Recognized as a leading organization in this field, the Sepsis Alliance plays a crucial role in advocacy [1].

Dedicated healthcare professionals are actively engaged in improving the condition of sepsis patients within their hospitals. Their extensive research aims to enhance the quality of life for sepsis survivors. Likewise, hospitals are developing various programs to support sepsis survivors, such as the "Children's Hospital of Philadelphia's Sepsis Survivorship program." This program conducts thorough screenings for potential long-term issues related to sepsis and provides assistance to families in need. Collaborating with the Care Management Program at CHOP, they offer support to families with children facing both pre-existing medical problems and those who were healthy before encountering sepsis. The program includes meetings with families during hospitalization, if possible, and follows up through phone or email approximately two months after discharge to identify potential concerns and assist with referrals as necessary [2,3].

RESEARCH OBJECTIVES

- 1. To gain insight into the aftermath of surviving sepsis
- 2. To recognize the consequences of sepsis survivorship
- 3. To explore measures to enhance the well-being of individuals who have survived sepsis.

RESEARCH METHODOLOGY

The study adopted a descriptive observational study design, utilizing secondary data as its primary source. Data collection encompassed various resources, including research studies, blogs,

surveys, analyst reports, and company websites. The inclusion criteria for this study specified articles published from 2015 onward and originating from the United States, while articles predating 2015 and those not originating from the USA were excluded. The sample size was set at 20 resources, incorporating research papers, guidelines, blogs, and organization websites. The data analysis plan involved a comprehensive review of the gathered information, culminating in conclusive findings based on the examined data.

RESULTS & DISCUSSION

Following discharge, it is recommended that physicians provide patients with a referral to critical illness survivors for post-discharge rehabilitation. Typically, a physiatrist leads a rehabilitation team, consisting of physical and occupational therapists, speech pathologists, social workers, and/or athletic trainers, tailored to address the patient's existing medical conditions. The rehabilitation protocol should include personalized, well-organized exercise regimens, such as promoting muscle strengthening and movement (e.g., dynamic and static shoulder exercises, respiratory muscle training, walking or sitting on the edge of the bed, transitioning from a seated to a standing position with or without assistance, ergometric leg exercises, walking in place, treadmill walking, and step climbing), activities for daily living, cardiovascular capacity, heart function, functional ability, and occupational and communication therapy.

Physiatrists determine the frequency of rehabilitation sessions based on patients' medical histories, clinical status, and tolerance. Additionally, patients are encouraged to perform home-based exercises independently or with the assistance of family members on days when they do not receive rehabilitation led by a physical therapist. Physiatrists are responsible for providing patients with printed physical education worksheets for this purpose.

CONCLUSION

Studies indicate that individuals who have survived sepsis often require an extended period of inpatient care and face an elevated risk of mortality. However, there are effective strategies to mitigate these challenges. It is essential for healthcare professionals to recommend rehabilitation for every sepsis survivor, as lacking proper support may leave them feeling disoriented and unable to self-manage effectively. Rehabilitation plays a crucial role in restoring their independence. Additionally, discharge management holds significant importance. Implementing a well-crafted care plan and conducting thorough patient screenings can reduce complications and avert further health issues. Efficient communication of the care plan to patients is vital, requiring regular training for healthcare providers to ensure proficiency. Continuous monitoring and review are necessary aspects, and maintaining open communication between the physician and the patient is equally crucial. Establishing a proper interaction can provide reassurance, enhance mental stability, and ensure a clear understanding of the action plan, promoting better self-care practices.

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