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Frontline initiatives improve care for seriously ill patients at Prince of Wales and Sydney/Sydney Eye Hospitals

Seriously ill patients treated in Emergency Departments at Prince of Wales and Sydney/Sydney Eye Hospitals are receiving improved care since the introduction of the Sepsis Kills Program.

The Program was introduced into 180 NSW public hospital Emergency Departments by the Clinical Excellence Commission (CEC) in 2011.

The Sepsis Kills Program identifies patients with potentially serious bacterial infections who should have intravenous (IV) antibiotics commenced within 60 minutes of presentation to the Emergency Department.

Dr Michael Golding, Director, Emergency Department, Prince of Wales Hospital said sepsis (blood poisoning) is a life-threatening condition that arises when the body's response to infection injures its own tissues and organs leading to shock, organ failure and death.

"Severe sepsis and septic shock in adults have a mortality rate of around 25 per cent. Sepsis is one of the leading causes of death with mortality rates as high as 10 per cent. These deaths are preventable," Dr Golding said.

"Delayed treatment is associated with high mortality rates. The mortality rate for adult patients with septic shock has been shown to increase by 7.6 per cent for every hour of delay in commencing antibiotic treatment, after the onset of hypotension."

Professor Gordian Fulde, Director, Emergency Department, Sydney/Sydney Eye Hospital said sepsis can present in any patient in any clinical setting.

"The Sepsis Kills Program aims to reduce preventable harm to patients through improved recognition and management of severe infection and sepsis," Professor Fulde said.

"The Program is based on three key actions: early recognition of risk factors, signs and symptoms of sepsis; resuscitation with intravenous fluids and administration of antibiotics within the first hour of diagnosis of sepsis; and early and appropriate referral to senior clinicians and teams.

"Significant benefits of the Program include more timely, standardised and effective detection and management of sepsis resulting in improved and safer care for patients."

Since the introduction of the Sepsis Kills Program into Emergency Departments across South Eastern Sydney Local Health District for the period 1 July, 2011 to 31 August, 2013, there has been a 239 minutes (3.9 hour) reduction in the median time to antibiotic therapy for patients presenting with sepsis. This is well below the recommended 60 minutes timeframe and exceeds the state average.

Phase 2 of the Sepsis Kills Program will be introduced into hospitals state-wide by the CEC from May 2014. This will focus on improving the recognition and management of sepsis in adults and children in inpatient wards of medium and large hospitals.