

YOUR GOOD HEALTH

The new war on SEPSIS

Specialized nurses part of program to fight deadly condition

By Anna Gorman

Kaiser Health News

Dawn Nagel, a nurse at St. Joseph Hospital in Orange, California, knew she was going to have a busy day, with more than a dozen patients showing signs of sepsis. They included a 61-year-old mechanic with diabetes. An elderly man recovering from pneumonia. A new mom.

Nagel is among a new breed of nurses devoted to caring for patients with sepsis, a life-threatening condition that occurs when the body's attempt to fight an infection causes widespread inflammation. She has a clear mission: identify and treat those patients quickly to minimize their chance of death. Nagel administers antibiotics, draws blood for testing, gives fluids and closely monitors her charges — all on a very tight timetable.

"We are the last line of defense," Nagel said. "We're here to save lives. If we are not closely monitoring them, they might get sicker and go into organ failure before you know it."

Sepsis is the leading cause of death in U.S. hospitals, according to Sepsis Alliance, a nationwide advocacy group based in San Diego.

Most hospitals in the U.S. have programs aimed at reducing sepsis, but few have designated sepsis nurses and coordinators like St. Joseph's. That needs to change, said Tom Ahrens, who sits on the advisory board of Sepsis Alliance.

"From a clinical point of view, from a cost point of view, they make

a huge impact," said Ahrens, a research scientist at Barnes-Jewish Hospital in St. Louis.

Recent federal rules could help foster such a change: The Centers for Medicare & Medicaid Services began requiring hospitals in 2015 to measure and report on their sepsis treatment efforts. They must make sure certain steps are completed within the first three hours after sepsis is identified, including getting blood cultures, giving intravenous fluids and starting patients on a broad-spectrum antibiotic.

Sepsis is difficult to diagnose, but if it's caught early enough it can be treated effectively. If not, patients are at risk of septic shock, which can lead to organ failure and death.

St. Joseph Hoag Health, an integrated medical system in Orange County, Calif., that operates St. Joseph and six other hospitals, began employing dedicated sepsis nurses throughout the system in 2015. Hoag Hospital in Newport Beach and its namesake sister facility in Irvine were the first to try out the nurses about seven years ago, and four other hospitals have since followed.

The hospitals in the St. Joseph Hoag Health system treat about 8,000 cases of sepsis each year, at a cost of \$130 million, according to Andre Vovan, a critical care physician who oversees St. Joseph Hoag's anti-sepsis programs.

The health system also created sepsis care checklists and a mobile app to help coordinate care for patients at risk. But the nurses are at the core of the initiative. They know how to treat sepsis like "the back of their hands," Vovan said.

Speed is critical in sepsis: evidence shows that patients who get treatment quickly are more likely to survive.

"It's so much



Nurse Dawn Nagel checks on a patient during her rounds at St. Joseph Hospital in Orange, Calif. [HEIDI DE MARCO/KHN]

Symptoms of sepsis

Shivering, fever or very cold
Extreme pain or general discomfort ("worst ever")
Pale or discolored skin
Sleepy, difficult rouse, confused
"I feel like I might die"
Short of breath

Watch for a combination of these symptoms. If you suspect sepsis, see a doctor urgently, call 911 or go to a hospital and say you are concerned about sepsis.

Source: sepsis.org

Sepsis facts

Sepsis is the leading cause of death in U.S. hospitals, according to Sepsis Alliance, a nationwide advocacy group based in San Diego.

- More than 1 million people get severe sepsis each year in the U.S., and up to 50 percent of them die from it.

- It is also one of the most expensive conditions for hospitals to treat, costing \$24 billion annually.

easier to give someone salt water and antibiotics. It's a lot harder when they are in the ICU and you are trying to get them off a ventilator," said Cecille Lamorena, who is in charge of the sepsis nurses at St. Joseph Hospital.

Sepsis nurses give families an idea of what to expect — both during the patients' hospital stay and after their discharge, Vovan said.

"We want the families to understand that just because you survive sepsis, it doesn't mean you can get home and run a marathon," Vovan said.

The St. Joseph Hoag Health effort seems to be working.

From 2015 to 2016, the death rate for all of its hospitals dropped from 15 percent to 12 percent for severe sepsis/shock, and from 12 percent to 9 percent for all sepsis cases, Vovan said.



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