September 26, 2019

RE: Time to act: #stopsepsisEU

Dear Member of the European Parliament,

Congratulations on your election as Member of the European Parliament, we would like to offer to you our most sincere wishes for a successful term.

We take this opportunity to get your attention on one cause of preventable death worldwide: sepsis.

What is Sepsis?

Sepsis is the final common pathway to death from many infectious diseases worldwide. It arises when the body’s response to an infection injures its own tissues and organs. This may lead to shock, multi-organ failure and death\(^1\) especially if not recognized early and treated promptly and properly\(^2\).

Five Reasons to Act Now

1. **Sepsis represents a global health crisis and a major challenge for patient safety.** Sepsis is a global killer, accounting for 7 to 9 million lives lost every year (equivalent to 1 death every 3.5 seconds). In Europe alone, it is conservatively estimated that more than 3.4 million individuals develop sepsis each year, of whom 678,000 die.\(^3\) Survivors may face lifelong physical or psychological consequences, including disabilities. More people die in Europe from sepsis than from road accidents and lung cancer (the most common cause of death from cancer in Europe).

2. **678,000** Annual sepsis deaths in Europe

3. **388,000**\(^4\) Annual lung cancer deaths in Europe

4. **30,000**\(^5\) Annual road accidents’ deaths in Europe

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\(^1\) https://sepsistrust.org/about/about-sepsis/

\(^2\) Improving the Prevention, Diagnosis, and Clinical Management of Sepsis


\(^4\) https://www.sciencedirect.com/science/article/pii/S0959804918309559

\(^5\) https://data.oecd.org/transport/road-accidents.htm
Sepsis is the most preventable cause of death and disability in Europe. Harm from sepsis arises when it is not recognised and treated rapidly. In health care settings, sepsis is frequently not diagnosed early enough to still be potentially reversible. In a review of the process of care received by patients with sepsis in the UK, the reviewers felt that in one third of the patients there was an avoidable delay in the administration of appropriate treatment. Many health care settings lack the requisite resources and diagnostic capacity to implement current sepsis management and test patients at risk.

Sepsis greatly impacts health care costs. Patients with sepsis identified late, often require a prolonged intensive care stay, resulting in higher costs of treatment. In the United Sates, the financial burden due to sepsis is more than $24 billion (around 6.2% of total hospital costs in 2013). Studies in Germany and England have estimated annual costs of hospital care between €7.7 and €11 billion, equivalent to 3% of the German national health care budget. Indirect and long-term costs are much higher, accounting for social costs and productivity losses due to mortality and disability.

Sepsis is intrinsically interlinked with antimicrobial resistance (AMR) and healthcare-associated infections. Infections which do not respond to first-line antimicrobial therapy due to AMR, may progress to sepsis rapidly. Delays in diagnosis of sepsis and lack of antibiotic stewardship programs are key drivers of the misuse of broad-spectrum antibiotics as a ‘last ditch’ attempt to improve outcomes.

Sepsis public awareness is still very low: about 80% of general public have never heard the word “sepsis”, though awareness might vary between countries.

In this respect, the undersigned associations believe that the European Union has an important role to play in the fight against Sepsis, by:

1. Promoting European epidemiological studies to delineate the real burden of sepsis in Europe under the guidance of the European Commission and the European Center for Disease Prevention and Control (ECDC). In this framework the interoperability of existing national or regional patient-level datasets should be facilitated to better understand the epidemiology of sepsis and the link with antibiotic resistance. These studies could be performed as a pilot project of the European Parliament, in partnership with European universities and professional medical societies leading in this field.

2. Designing a comprehensive Pan-European Infection Management Program under the European One Health Action Plan on AMR launched by the European Commission, to include:

   - Research on prevention of infection risks including an increased capability of early recognition of resistant bacteria and of compromised host response.
   - A common sepsis code for emergency care, which requires hospitalization for antimicrobial therapy, and which suggests a suspect of organ dysfunction: a criteria of sepsis.
   - Development and harmonization of existing international guidelines on the identification, diagnosis, and treatment of sepsis to ensure efficient and consistent cross-border implementation.
   - The launch of a European observatory for sepsis, to carry out comprehensive analysis of sepsis impact on public health and its costs, as well as to identify best practices in prevention, identification and management of sepsis fostering future European guidelines.

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10 For example, for Germany: Fleischmann C et al. Intensive Care Med Exp. 2015 Dec; 3(Suppl 1): A50. Epidemiology of Sepsis in Germany: Incidence, Mortality And Associated Costs of Care 2007-2013
Supporting the implementation of national plans for Sepsis control and management to improve the early recognition, timeliness, and quality of diagnosis. The EU should also facilitate the exchange of best practices among national stakeholders, including the discussion within the European Council Working Party on Public Health.

Raising awareness of sepsis across Europe by:

- **Launching a European Sepsis Awareness Week** and supporting EU countries in developing like-minded national campaigns around sepsis prevention. These awareness campaigns should cover the link with AMR threats as well as the potential of sepsis prevention by increasing vaccination rates and access to clean care and clean water, sanitation and hygiene in health care settings and beyond.

- **Supporting the development of a multi-lingual information system portal** to help citizens better understand the possibilities to prevent sepsis by vaccination, healthy living, clean care, the early signs of sepsis and its long-term-consequences, offering advice to family members of sepsis victims in the acute phase of sepsis.

We ask for your support to implement these calls and strengthen EU actions on health care. We sincerely hope that you will be willing to engage for high quality and safer health care across Europe. We would be glad to have the chance to meet you to discuss the above-mentioned actions and how we can work together to make them happen.

Yours sincerely,

- European Society Anaesthesiology (ESA)
- European Society for Emergency Medicine (EUSEM)
- European Society of Clinical Microbiology and Infectious Diseases (ESCMID)
- European Society of Intensive Medicine (ESICM)
- European Network for Safer Care (ENSH)
- European Union of Private Hospitals (UEHP)
- Global Alliance for Infections in Surgery (GAIS)
- Global Sepsis Alliance (GSA)
- Health First Europe (HFE)
- International Alliance of Patients’ Organizations (IAPO)

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