

Prevention of sepsis in an aging society

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In recent years, Korea has very rapidly become an aging society, bringing changes that have affected many aspects of social structure. Impaired immunity and declining anatomical and physiological defenses render the elderly vulnerable to infectious diseases [1]. In addition to the expansion of the elderly population, the utilization of nursing homes and nursing hospitals has increased significantly, affecting the composition of patients and altering the role of sepsis as a cause of death. Efforts should be made to understand the distinct epidemiological features and characteristics of sepsis in each country [2-4]. During Korea's transition to an aging society, understanding the characteristics and status of sepsis in Korea will be very important for the treatment of sepsis patients [5]. The management of older patients differs from that of younger patients in antimicrobial selection and dosing, delirium management, and discussions on goals of care. Medical comorbidities, cognitive impairment, and functional status also contribute to outcomes more than age alone [6].

The median time to antibiotic administration in patients with sepsis was 2.1 hours, and the adjusted odds ratio for in-hospital mortality based on each hour of delay in administering antibiotics after registration was 1.09, even among patients who received antibiotics within 6 hours [7]. Aliyu et al. [8] suggest a high prevalence of multidrug resistant Gram-negative bacteria colonization among nursing home residents, emphasizing the need to enhance policies for infection control and prevention in nursing homes. Mody et al. [9] reported that combined technical and socioadaptive catheter-associated urinary tract infection (UTI) prevention interventions successfully reduced the incidence of catheter-associated UTIs.

The definition and treatment of sepsis have often been changed. If the definition of Sepsis and Septic Shock (Sepsis-3) is met or if the serum lactate level exceeds 6 mmol/L, mortality becomes more likely and early detection requires intensive treatment [10]. Prompt detection and treatment will be important for decreasing the incidence of sepsis and reducing mortality in sepsis patients.

CONFLICT OF INTEREST

No potential conflict of interest relevant to this article was reported.

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Editorial

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