

## What is Post-Sepsis Syndrome?

About 1 out of 2 people who survive sepsis are left with long-term physical and/or psychological effects. This condition is called **post-sepsis syndrome**. The risks of developing post-sepsis syndrome are higher among patients who required Intensive Care Unit (ICU) care. The most common effects include:

- Difficulty sleeping
- Nightmares
- Hallucinations
- Panic attacks
- Depression
- Difficulty concentrating
- Loss of self-esteem
- Decreased cognitive (mental) functioning
- Disabling muscle or joint pain

Whether it's fatigue, mood swings, or any other issue caused by sepsis, it's important to recognize that every person recovers at a different pace.

Additional issues that may affect survivors include:

- Wounds that haven't healed yet
- A colostomy
- Amputations
- Organ dysfunction, such as reduced kidney function

For some people, recovery from sepsis can take months or even longer.

Additional resources are accessible online via <https://www.sepsis.org/sepsis-basics/post-sepsis-syndrome/>

## **Navigating the Intensive Care Unit**

Healthcare teams in an Intensive Care Unit (ICU), treat the sickest people in the hospital. The goal is to keep ICU stays as short as possible while providing medical treatment to stabilize a person's condition so they can transfer to a step-down unit or a regular inpatient unit. Some people who are extremely ill may stay in the ICU for several weeks and sometimes months. Visit the Sepsis Alliance organization website to access a detailed caregiver guidebook on navigating a loved one's admission in the ICU setting. The guidebook describes:

- The multi-disciplinary healthcare team members who provide care
- Different types of medical equipment and tubes/lines commonly used in ICUs.
- Assessment of vital signs.
- Infection prevention and hand-washing.
- Transition from the ICU to a general care floor.

## **Planning for Discharge**

Patients and caregivers may be anxious, concerned, or fearful when it comes time for discharge. Preparing for discharge can help ease the transition from patient to survivor. Before patients are discharged from the hospital, ask questions about the written discharge instructions and make sure you understand the following:

- Follow-up care and continued treatments
- Prescription medication instructions
- Summary of the hospital stay
- Relevant medical contact information

## **Support for Caregivers**

It is essential that caregivers also care for themselves while caring for an ill loved one. Some ways to cope include:

- Asking for support and accepting help from others.
- Delegating tasks to others who can help.

- Maintaining adequate nutritional intake.
- Taking care of your own health needs.
- Taking breaks.
- Utilizing respite care resources.
- Attending support groups.
- Not taking things personally if a love-one experiences personality changes.

## **Infection Prevention**

Inform any new healthcare professionals, including dentists, that you or your loved one has a history of sepsis. People who survive sepsis are at higher risk of developing it again. Sepsis survivors often have a weakened immune system for weeks after returning home, which puts them at risk for new or repeat infections. Work closely with a healthcare team on ways to prevent infection and how to identify early signs and symptoms of infection.

## **Life After Sepsis**

Once the initial hospitalization and recovery are over, you may still be concerned about your loved one's health. It's not unusual to think that even minor health problems may make your loved one sick again. They may also get very anxious if they become ill or must undergo a medical procedure. Hopefully, this can ease with time and adequate support. The level of support sepsis survivors need varies from person to person.

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