Sepsis is the most common serious complication of infection. It affects people worldwide, but has a particularly high burden in low- and middle-income countries where resources to treat it are more limited. Estimates from 2017 suggest 48.9 million cases of sepsis occur each year, with 11 million deaths. Many patients who survive sepsis suffer long-term complications as a result.¹

Treatment for sepsis can save lives. This needs high quality clinical care, especially in primary care clinics, and hospitals including emergency, critical and operative care areas.

The 70th World Health Assembly called for the development of guidance on sepsis prevention and management to support Members States in "Improving the prevention, diagnosis and clinical management of sepsis" [WHA resolution 70.7].²

Patients with sepsis need high quality care from the first point they reach medical services until they fully recover. Optimising their outcomes therefore involves early recognition, emergency care, targeted antimicrobial therapy, infection source control, intensive monitoring, detection of clinical deterioration, and prevention of organ failure and complications. Effective and efficient critical care and early operative care can further reduce mortality and morbidity.

This WHO guideline will use the best evidence to help patients and the healthcare workers looking after them. It will focus on making global recommendations for early recognition, initial resuscitation, and the early treatment of sepsis during which periods patients are most vulnerable.

The recommendations will support to Member States to develop and implement national programmes for the management of sepsis in adults and children. The wide intended audience includes health care workers (health professionals including doctors, nurses, intensivists/critical care staff, ambulance staff), policy-makers, their expert advisers and technical/ programme staff at organizations involved in the management of adults or children with sepsis.

Recommendations will be published as WHO guidelines, and will include tools to support implementation.

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Sepsis is the most common serious complication of infection. It affects people worldwide, but has a particularly high burden in low- and middle-income countries where resources to treat it are more limited. Estimates from 2017 suggest 48.9 million cases of sepsis occur each year, with 11 million deaths. Many people who survive sepsis suffer long-term complications as a result.¹

Treatment for sepsis can save lives. Treatment requires quality integrated clinical care with primary care linked to emergency, critical and operative care by communication, transportation, referral and counter-referral mechanisms.

The 70th World Health Assembly called for the development of guidance on sepsis prevention and management to support Members States in "Improving the prevention, diagnosis and clinical management of sepsis" [WHA resolution 70.7].²

To improve clinical outcomes, people with sepsis require effective systems of care, which include key functions such as early recognition, resuscitation, targeted antimicrobial therapy, source control, intensive monitoring and detection of clinical deterioration, and continuing prevention of organ failure and complications. Effective and efficient critical care and early operative care can further reduce mortality and morbidity in health settings globally.

Each year, sepsis affects up to 50 million people and causes 11 million deaths globally. People who are critically ill with sepsis present at all levels of the health system and need to receive timely, quality care wherever they are.