

Clinical epidemiological profile in the diagnosis and prognosis of sepsis in patients admitted to an intensive care unit in a hospital in Belém - Pará, Brazil.

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Sepsis is a multisystemic organic dysfunction, generated by the deregulation of the immune system due to an infectious process, which involves several mechanisms. It is currently one of the main causes of death in non-cardiological Intensive Care Units (ICUs), having one of the highest mortality rates in the world. Several risk factors can be associated with the worsening of cases in patients hospitalized in ICUs, such as the use of invasive devices, indwelling urinary catheters, central venous catheter, mechanical ventilation, use of vasopressors and prolonged hospitalization. The aim of the study was to evaluate the clinical and epidemiological profile in the diagnosis and prognosis of sepsis in patients admitted to the ICU through the analysis of medical records made available by the Division of Medical Archives and Statistics (DMAS) of Hospital Ophir Loyola. Data regarding patients admitted between November and December were collected, with a total of 132 medical records. It was noted that 36 (27%) were admitted to the service with a condition of sepsis already installed or developed sepsis during the hospitalization period, corresponding to a smaller portion among the cases studied. The longest stay recorded was 68 days, while the shortest was only 1 day. Finally, the average length of stay was estimated at approximately 13.2 days. Regarding the age group of the group affected by sepsis, an average of 60.1 years was obtained. The most frequent comorbidities in the studied population were cancer, type 2 diabetes mellitus and systemic arterial hypertension. The mortality of patients affected by sepsis was high, corresponding to 65% of total deaths. The data obtained also reinforce the need to adapt management protocols according to the structural and epidemiological reality of each service.

Keywords: sepsis, intensive care unit, epidemiology.