

20th European Cardiology Conference

October 16-18, 2017 | Budapest, Hungary

SIRS and sepsis: Differences in the inflammatory response

Julie Benbenishty

Hadassah-Hebrew University Medical Center, Israel

The effect of sex/gender in critical illness outcomes is controversial. We aimed to systematically review evidence on the influence of sex on outcomes of adult critically ill patients with sepsis and/or multiple organ dysfunctions, as reported in published studies specifically including investigation of the effect of sex among their aims. The incidence of sepsis is lower among women in the US general population for all infection sources except the genitourinary tract. The greater immune system activity in women than in men is consistent with better survival in women with severe sepsis. Sex hormones or sex-related gene polymorphisms may protect women against sepsis and death from sepsis. Estrogens and androgens are involved in the pathogenesis of disease; both exogenous and endogenous estrogens are strong stimulators of cytokine production and disease activity. This presentation will provide insight into understanding the gender differences in SIRS and sepsis and how to administer different treatment regimens based on gender. Although results of data syntheses appear to point towards a small disadvantage for survival among women, our results suggest that data on the impact of sex/gender on ICU outcomes remain equivocal. Implications for future research include approaches to adjustment for confounders, expanded outcome measures, prospective designs and elucidation of the underlying pathophysiological framework. The relevance of this presentation to European practice is that nurses will be able to assess, identify and treat patients suffering from inflammation with focused gender care.

d_levy@rambam.health.gov.il

Notes: