How to save lives in Sepsis

LiDCO hemodynamic monitoring reduces mortality in Sepsis

World Health Organization
RECOGNISES SEPSIS AS A GLOBAL PRIORITY

Only 50% respond to fluids

Universal fluid admin in Sepsis carries considerable risk

"It is likely that aggressive fluid therapy increases morbidity and mortality in sepsis"

NO FLUID?

YES FLUID?

Minimally Invasive

Non-Invasive

CNAP

Calibrate

Stroke Volume

Fluid Management

"We suggest using dynamic over static variables to predict fluid responsiveness"

LiDCCO

Reduces Mortality

40% NO CENTRAL monitoring
28% CVC monitoring
26% PAC monitoring
16% mortality rate LiDCCO

LiDCCO
Hemodynamic Monitoring
Clinical papers showing improved outcome

Sepsis | Reduced mortality with noninvasive hemodynamic monitoring of shock

**Patient Population**
ICU shock patients

**LiDCO Monitor**
LiDCOplus

**Trial Design**
Observational study comparing no hemodynamic monitoring vs pulmonary artery vs LiDCOplus managed shock patients

**Outcome Impact**
Treatment of patients using the LiDCOplus monitor significantly reduced the observed mortality rate to 13% against 32% and 20% in the invasively monitored and 37% in the unmonitored patient groups

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A rational approach to fluid therapy in sepsis

**Patient Population**
Severe sepsis and septic shock

**Purpose**
The purpose of this consensus is to provide support to the bedside clinician regarding the diagnosis, management and monitoring of shock

**Methods**
The European Society of Intensive Care Medicine (ESICM) formed a task force of 12 experts

**Results**
44 consensus statements that can be used at the bedside to diagnose, treat and monitor patients with shock

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