

Ever Heard of Sepsis?

This extreme infection is the No. 1 cause of death in U.S. hospitals.

September 1, 2017 By [Alicia Green](#)

In 2011, Floridian Dana Mirman noticed a small bump on her shoulder. What she initially thought was an insect bite turned out to be much deadlier, ultimately landing her in the hospital. The diagnosis? Sepsis.

“Sepsis is the body’s extreme response to an infection,” explains Lauren Epstein, MD, a medical officer and infectious disease physician at the Centers for Disease Control and Prevention (CDC). “There’s not one type of infection that causes sepsis. It’s very serious, and without appropriate treatment, it can lead to tissue damage, organ failure and death.”

A 2016 Vital Signs report by the CDC found that lung, urinary tract, skin and gut infections are the conditions most associated with sepsis. The assessment also showed that for nearly 80 percent of patients, sepsis strikes when they’re discharged from the hospital. Annually, it’s estimated that out of 1.5 million cases of the infection in the United States 250,000 end in fatalities.

To help avoid thousands more of these unnecessary deaths each year, the CDC declared sepsis a medical emergency that calls for prevention and early recognition of the life-threatening ailment.

Anyone can develop sepsis, but adults age 65 or older, individuals with chronic medical conditions, those with weakened immune systems and children under age 1 face an increased risk. When Mirman was diagnosed, she was healthy and in her 30s.

“As it turned out, I didn’t have a bugbite or the flu,” Mirman says. “I had an infection that became cellulitis [a potentially serious bacterial infection that commonly resembles a skin rash], which turned into sepsis. That little bump on my shoulder provided an entry point for some kind of bacteria.”

After the skin eruption appeared, she soon experienced swelling and flu-like symptoms. Mirman’s symptoms became worse, and a fever of 104 followed. Her arm swelled from shoulder to elbow.

“We didn’t know what was wrong; we hadn’t heard of sepsis and didn’t suspect sepsis,” Mirman says. “But instinctively we knew that this wasn’t normal. My husband took me to the emergency room where I was lucky to be immediately diagnosed as a patient in septic shock.”

Sepsis occurs in three stages: sepsis, severe sepsis and septic shock. Doctors make an initial diagnosis of the infection after an individual presents with a high body temperature, increased heart rate and rapid breathing. In the second stage, symptoms such as difficulty breathing, abnormal heart rate and confusion indicate that an organ may be failing. And during septic shock, a person exhibits all the signs of severe sepsis compounded by extremely low blood pressure, which can result in death.

At the time, Mirman's blood pressure plummeted, and her body began to shut down. Doctors quickly put her on intravenous therapy and administered antibiotic fluids. While they waited to see whether these remedies would be effective, she was transferred to the intensive care unit where physicians placed her on vasopressors—a group of medicines that constrict the blood vessels—to help stabilize her blood pressure.

After a week in the hospital, Mirman was discharged. But doctors ordered her to return as an outpatient for an additional week of antibiotic treatment. Eventually, she was cured of sepsis. Still, her recovery took much longer than expected and presented serious challenges. Mirman suffered extreme vertigo, migraines and facial drooping.

Subsequently, she consulted more doctors and specialists. “What I ultimately came to understand is that this is really common in people who survive sepsis, and it's called post-sepsis syndrome,” she explains. “These issues can linger for long amounts of time. For me, it took six months before I felt like I could function and a year before I felt like myself.”

Several years ago, a survey conducted by the Sepsis Alliance, an organization dedicated to raising awareness about the condition, found that 66 percent of Americans were unfamiliar with sepsis. But the good news is that knowing the signs of sepsis could save lives.

This is why the CDC recently launched [“Get Ahead of Sepsis,”](#) a national campaign to educate patients and providers about the condition. The initiative, launched less than a week before Sepsis Awareness Month in September, includes fact sheets, brochures, infographics, digital and social media and shareable videos.

“It's really important to make sure that we recognize sepsis to treat it early,” Epstein says. “We also want to encourage doctors and patients to work together to prevent infections that lead to sepsis. We want to make sure that providers are talking with patients about the importance of vaccines and managing chronic conditions to prevent infections.”

Currently, the CDC is tracking the burden of sepsis in the United States. “We are trying to think about how big the problem is and see if we can quantify it,” Epstein says. “Sepsis has been difficult to quantify because there's not a specific laboratory test or germ for sepsis.”

As an individual, Mirman raises awareness of sepsis through the Sepsis Alliance. The organization helped her and her family during her ordeal. Today, she serves on the group's board of directors. “It's been an amazing experience to be able to share my story and to help give a name and voice to sepsis,” Mirman says. “It's so important that survivors be heard. That will help people to

understand what sepsis is.”

Occasionally, the alliance teams up with the CDC, which has increased, refocused and redoubled its communication efforts to spread the word about sepsis and to enlighten folks about how antibiotic resistance affects treatment of the condition.

“If you or a family member feels that their symptoms are not proportional to what should be happening and there’s a possibility that there is an underlying infection, don’t wait,” Mirman advises. “Go to your doctor or emergency care and say, ‘I’m concerned about sepsis.’ It’s important to say those words so that the symptoms don’t get mistaken for the flu, stomach bug or something else. You have to be your own advocate.”

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