Policy and Media Brief

2026 World Sepsis Day
Invest in Sepsis – Save Lives

Invest in Prevention.

Invest in Early Detection.

Invest in Health Workers.

Invest in Health Systems.

Invest in Innovation.

Invest in People.

Invest in Preparedness.

Invest Now – Save Lives by 2030.

Global Sepsis Alliance

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Introduction to the 2026 World Sepsis Day

Since 2012, World Sepsis Day has united policymakers, health authorities, healthcare professionals, researchers, innovators, advocates, Sepsis survivors, and affected families around one goal: ending preventable deaths and disabilities from Sepsis.

In 2024, the Global Sepsis Alliance and its partners launched the 2030 Global Agenda for Sepsis – the first multi-year strategic vision for reducing the enormous human, societal, healthcare, and economic burden of Sepsis.

In 2025, World Sepsis Day focused on "5 Facts × 5 Actions", translating the global burden of Sepsis into concrete actions for governments, health systems, global health organizations, media, and emergency preparedness.

In 2026, the message must move from recognition and action to investment and implementation of evidence-based Sepsis prevention and response policies and programs.

Theme of the 2026 World Sepsis Day: Invest in Sepsis – Save Lives

Millions of Sepsis cases and Sepsis-related deaths in children, women, and men are preventable. Yet Sepsis remains critically under-prioritized and underfunded.

The 2030 Global Agenda for Sepsis makes clear that achieving meaningful reductions in Sepsis deaths and disabilities requires investment in national policies, health systems and health workers, prevention and early detection, research and innovation, survivors and communities, and pandemic and other health emergency preparedness.

Investment in Sepsis is not an additional cost to health systems. It is an investment in stronger health systems, Universal Health Coverage, global health security, and sustainable development.

The 2026 World Sepsis Day therefore calls on governments, international financing institutions, global health organizations, development partners, philanthropies, and the private sector to:

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Why Investment and Why Now?

Global health is entering a period of profound financial constraint. After years of progress, international health financing is under increasing pressure, with reductions in development assistance and growing competition for limited resources. At the same time, countries face multiple and overlapping demands – from infectious diseases and antimicrobial resistance to maternal and child health, noncommunicable diseases, climate-related threats, humanitarian emergencies, and pandemic preparedness. In this environment, every health investment must deliver greater impact, strengthen health systems and save lives.

This is why World Sepsis Day 2026 has chosen the theme "Invest in Sepsis – Save Lives". Sepsis remains critically under-prioritized and underfunded despite its enormous human, societal, and economic burden. Investing in Sepsis is not about creating another vertical program or competing for scarce global health resources. It is about investing smarter.

Sepsis is also one of the clearest proxy indicators of how well a health system – and Universal Health Coverage – works in practice. Preventing a person from developing Sepsis, recognizing deterioration early and providing timely, effective and affordable treatment requires many parts of the health system to work together: accessible primary care, trained health workers, infection prevention and control, diagnostics and microbiology, essential medicines and oxygen, emergency and critical care, functioning referral systems, and rehabilitation.

When these systems work, Sepsis deaths and disability can be prevented. When they fail, Sepsis often exposes the gaps. The ability of a health system to prevent, detect and successfully manage Sepsis can therefore provide a powerful indication of whether people are truly able to access the quality health services they need, when they need them, without financial hardship.

The capacities needed to prevent, recognize and treat Sepsis are not Sepsis-specific investments. They are the same capacities required to advance Universal Health Coverage, health security, and resilient, high-quality health systems.

At a time when global health resources are shrinking, investing in Sepsis can help countries do more with every health investment: prevent avoidable deaths, reduce costly complications, strengthen health systems, and help ensure that the promise of Universal Health Coverage translates into effective care when people need it most.

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Why Invest in Sepsis?

1. Invest Because the Burden is Enormous

- Every 3 seconds someone dies from Sepsis.
- Sepsis is one of the world's leading causes of death and disability. Pre-pandemic global estimates identified 48.9 million Sepsis cases and approximately 11 million deaths in 2017, equivalent to nearly 1 in 5 deaths worldwide.
- Subsequent estimates indicated an even greater mortality burden, with 13.7 million Sepsis related deaths in 2019.
- The latest Global Burden of Disease estimates reveal an even greater burden during the COVID-19 pandemic: an estimated 166 million Sepsis cases and 21.4 million Sepsis-related deaths occurred in 2021, representing nearly one-third of all deaths globally that year.
- The burden falls disproportionately on the most vulnerable. Around 85% of the global Sepsis burden occurs in low- and middle-income countries, while newborns, children, women, older people and immunocompromised people face particularly high risks.
- Despite its enormous scale and impact, Sepsis remains under-prioritized in global health policy, financing and research relative to its burden.
- A health challenge of this magnitude requires investment proportionate to its burden.

2. Invest Because Many Sepsis Deaths Are Preventable

- Sepsis can often be prevented through immunization, infection prevention and control (IPC) measures, appropriate Water and Sanitation (WASH) infrastructure and practices, effective maternal and newborn care, and management of infections.
- When Sepsis occurs, early recognition and timely treatment save lives.
- Investment is therefore needed across the continuum of care – from prevention and community awareness to rapid diagnosis, emergency treatment, critical care, and post-Sepsis rehabilitation.
- Invest earlier. Detect earlier. Treat earlier. Save lives.

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3. Invest Because Underinvestment Costs More

- Sepsis places an enormous financial burden both on individual patients and families, as well as national health systems and economies. Globally, Sepsis-related expenditure is estimated to account for 2.65% of healthcare budgets and 0.33% of Gross National Product (GNP). The median hospital cost is approximately €36,191 per Sepsis patient per country.
- The cost does not end when a patient leaves hospital. Between 40% and 74% of Sepsis survivors experience long-term physical, cognitive, and psychological consequences requiring rehabilitation and ongoing care.
- In fact, direct healthcare expenditure represents only 20 – 30% of the true societal cost of Sepsis. An estimated 70 - 80% of total societal costs arise from lost productivity, disability, and premature death.
- The economic consequences for patients and families can therefore persist for years. In the Netherlands, 47% of previously employed Sepsis survivors remained unemployed one year after ICU treatment, while those who returned to work experienced lower productivity.
- Patients and families can also face devastating out-of-pocket costs, particularly where financial protection is weak. In Vietnam, 47% of patients hospitalized for septic shock incurred catastrophic health expenditure, as did the families of 56% of patients who died.
- Yet despite this enormous economic burden, only 15 countries have developed national Sepsis action plans and/or evidence-based national policies.
- This creates a fundamental imbalance: countries are absorbing the costs of emergency treatment, prolonged hospitalization, readmission, disability, rehabilitation, lost productivity, and premature death while investing too little in preventing those costs in the first place.
- We are already paying for Sepsis. We are simply paying too late.
- Investment in prevention, early recognition and effective treatment can reduce avoidable hospitalizations, complications, disabilities, and deaths – and there is evidence that these investments generate substantial financial returns. In Victoria, Australia, implementation of a Sepsis pathway reduced Sepsis mortality by 50%, ICU admissions by 34% and mean ICU length of stay by 2.9 days. The program saved 3,781 hospital bed-days and US$11.7 million, generating a six-fold return on investment.
- The economic case for action is therefore not simply about spending more on Sepsis. It is about investing earlier to avoid much larger costs later.
- Investing in Sepsis means saving lives, protecting families, and saving costs.

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4. Invest Because Sepsis Investment Strengthens Health Systems

- Sepsis is not an isolated disease requiring a parallel health program.
- A health system capable of preventing, recognizing, and treating Sepsis needs:
  - trained healthcare workers;
  - strong primary and emergency care;
  - infection prevention and control;
  - microbiology and diagnostic capacity;
  - essential antibiotics and other medicines;
  - oxygen and patient monitoring;
  - referral and critical-care capacity;
  - rehabilitation and survivor support.
- These are the same capacities required for Universal Health Coverage and resilient, high-quality health systems.
- Invest in Sepsis and you invest in the health system *itself*.

5. Invest Because We Cannot Achieve the 2030 Sustainable Development Goals Without Addressing Sepsis

- The 2030 Global Agenda for Sepsis recognizes that stronger action against Sepsis contributes directly to global health and development priorities.
- Reducing Sepsis supports progress in maternal, newborn and child survival, communicable and noncommunicable diseases, Universal Health Coverage, antimicrobial resistance, patient safety, health security, and pandemic preparedness and response.
- Sepsis is therefore not simply another competing health priority.
- It connects the global, regional, and national health priorities.
- Investing in Sepsis can accelerate progress across the Sustainable Development Goals while strengthening countries' capacity to respond to future pandemics, conflicts, disasters, and other health emergencies.

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5 Investments to Save Lives

Investment 1: Invest in National Sepsis Action

- Every country should develop, finance, and implement a national Sepsis policy or action plan.
- Governments should:
  - establish dedicated and measurable financing for Sepsis;
  - integrate Sepsis into national health strategies and Universal Health Coverage packages;
  - align Sepsis policies with maternal, newborn and child health, immunization, infection prevention and control, AMR and pandemic preparedness and response strategies;
  - establish national targets, surveillance, and accountability mechanisms; and
  - mobilize domestic and international financing where additional resources are required.
- Every country needs a funded plan – not simply a commitment.

Investment 2: Invest in Health Systems and Health Workers

- Early recognition and timely, effective management of Sepsis can substantially improve survival and clinical outcomes. It is therefore critical that every person with Sepsis has access to timely, effective, and affordable care.
- Yet important knowledge and practice gaps remain among healthcare providers at all levels. In a multinational survey, 98.5% of healthcare professionals reported familiarity with the term sepsis, but only 13% could correctly identify the Sepsis-3 definition, while 74% were unfamiliar with the quick Sequential Organ Failure Assessment (qSOFA) screening tool. These findings highlight substantial gaps in clinical recognition despite high levels of general awareness.
- Countries and partners should invest in:
  - evidence-based Sepsis protocols and clinical pathways;
  - healthcare-worker education, training, and continuous professional development;
  - community and clinical systems for early recognition and rapid response;
  - rapid, accurate, and affordable diagnostics;
  - laboratory and microbiology capacity;
  - reliable access to oxygen, antimicrobials, and other essential medicines;
  - emergency, critical, and operative care;
  - effective referral and transport systems; and
  - rehabilitation and long-term survivor care.
- Sepsis prevention, recognition, and management should be an integral part of medical, nursing, midwifery, and allied-health education, reinforced through continuing professional development and practical, competency-based training.
- A health worker who recognizes Sepsis early can save a life. A health system equipped to recognize and respond to Sepsis can save millions.

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Investment 3: Invest in Science and Innovation

- The world needs a new generation of tools to prevent, detect, and treat Sepsis.
- Governments, international financing institutions, research agencies, philanthropic foundations and the private sector should increase investment in:
    - vaccines;
    - rapid and affordable diagnostics;
    - novel therapeutics;
    - antimicrobial development and stewardship;
    - immunomodulatory treatments;
    - precision medicine;
    - digital technologies and AI;
    - implementation research; and
    - innovations designed for resource-limited settings.
- Innovation must reach the people and countries carrying the greatest burden.
- Sepsis innovation should be treated as a global health investment priority.

Investment 4: Invest in People, Survivors, and Communities

- Sepsis begins in communities, affects entire families and can leave consequences lasting for years.
- Investment must therefore extend beyond hospitals.
- Governments and partners should invest in:
    - public Sepsis literacy;
    - recognition of warning signs and rapid care-seeking;
    - patient and family engagement;
    - survivor rehabilitation and long-term care;
    - mental health and social support; and
    - meaningful participation of survivors and families in Sepsis policymaking.
- Community and opinion leaders, and religious and faith leaders can play an important role in raising awareness, building trust, challenging misconceptions, and encouraging people to seek care rapidly when Sepsis is suspected. Their voices can help bring Sepsis information to communities that health systems and traditional campaigns may not always reach effectively.
- The Media has a critical role in making Sepsis visible, understandable, and impossible for decision-makers to ignore.
- People affected by Sepsis must be partners in designing the response.

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Investment 5: Invest in Global Health Security and Resilience

- Pandemics, armed conflicts, disasters and humanitarian emergencies increase the risk of infection, delayed treatment, and Sepsis.
- Sepsis prevention, surveillance, early detection and clinical management should therefore be embedded in:
  - pandemic preparedness and response;
  - national emergency preparedness;
  - humanitarian health programmes;
  - emergency medical teams; and
  - global health-security financing.
- A system prepared for Sepsis is a system better prepared for the next health emergency.

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The 2026 World Sepsis Day Call to Action

- The 2030 deadline for achieving the Sustainable Development Goals is rapidly approaching and we cannot achieve the health-related SDG targets without addressing Sepsis.

- The 2030 Global Agenda for Sepsis sets a clear ambition: to prevent at least 12 million new Sepsis cases and save at least 2 million lives. Achieving this ambition will accelerate progress towards health-related SDGs across maternal, newborn, and child health, Universal Health Coverage, antimicrobial resistance, patient safety, and global health security.

- The 2026 World Sepsis Day calls on governments, parliaments, international financial institutions, development banks, global health partnerships, donors, philanthropies, research funders, and the private sector to translate commitments into measurable investments.

- We call for:

  - National investment – funded Sepsis policies and action plans stand alone or as integral part of national health care programs and UHC packages.
  - Health-system investment – stronger infrastructure for prevention and management of Sepsis, trained health workers, diagnostics, medicines, oxygen and timely and effective emergency and critical care.
  - Innovation investment – new and more effective vaccines, diagnostics, therapeutics, digital technologies, AI, and precision medicine innovations.
  - People investment – raising public awareness on early recognition of Sepsis and healthcare seeking behaviour within communities, investment in survivors, families, post-Sepsis care, and rehabilitation.
  - Global investment – financing mechanisms that enable every country, particularly low- and middle-income countries, to build sustainable Sepsis prevention and response capacity.

Invest in Sepsis. Accelerate the SDGs. Save lives.

Invest Now – Save Lives by 2030.

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