

With funding from the:



STAIRS

Sub-Saharan Africa consorTium for the Advancement of Innovative Research and Care in Sepsis

Short description of the network project:

Sepsis is life-threatening organ dysfunction caused by an uncontrolled host response to infection. Globally, 48.9 million cases of sepsis occur annually, resulting in 11 million sepsis-related deaths. Sepsis-attributable mortality is higher in sub-Saharan Africa (SSA) than in any other world region. The Sub-Saharan Africa consorTium for the Advancement of Innovative Research and Care in Sepsis (STAIRS) aims to address critical knowledge gaps in the epidemiology, diagnosis, and quality care of

patients hospitalised with sepsis in resource-constrained areas of SSA. The consortium comprises a network of 10 institutions from seven African countries (Democratic Republic of the Congo, Ethiopia, Ghana, Mozambique, Nigeria, Sierra Leone, and Uganda) and Germany. Leadership will be provided by Dr Nathan Kenya-Mugisha (Uganda) and supported by two German co-directors (Prof Konrad Reinhart and Dr Torsten Feldt), as well as by chief scientific officer Dr Shevin Jacob (Uganda) and deputy scientific officer Dr Tafese Tufa (Ethiopia).

DEMOCRATIC REPUBLIC OF THE CONGO

Catholic University of Bukavu

ETHIOPIA

Arsi University

GHANA

Komfo Anokye Teaching Hospital

MOZAMBIQUE

Instituto Nacional de Saúde

NIGERIA

University of Nigeria Teaching Hospital

SIERRA LEONE

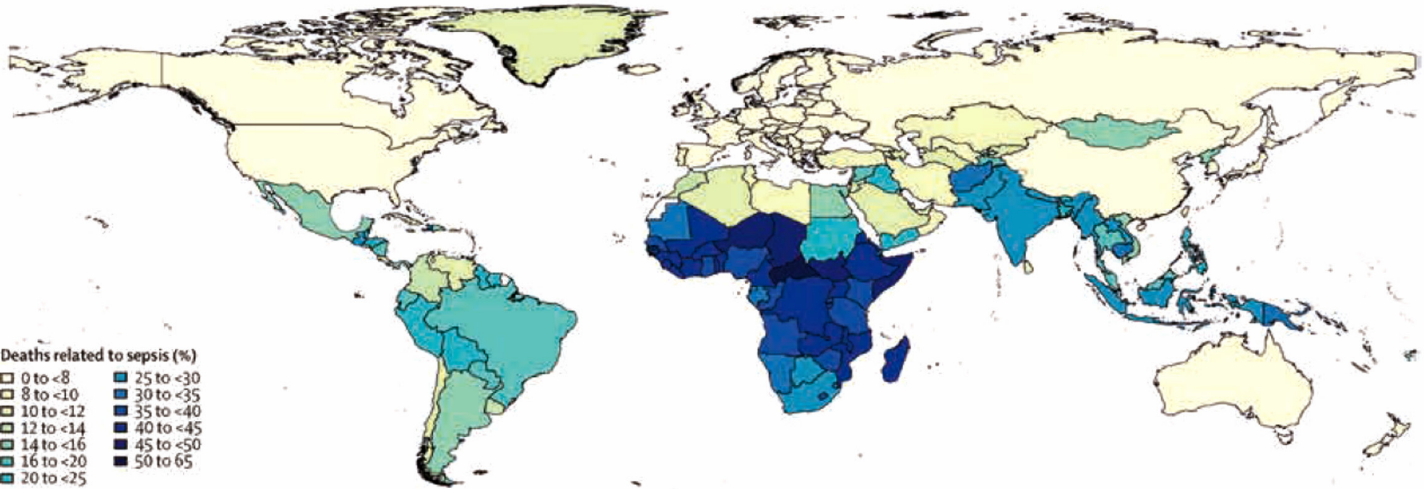
Njala University

UGANDA

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GERMANY

Charité – Berlin University of Medicine (Berlin)
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Global Mortality Attributable to Sepsis (©doi: 10.1016/S0140-6736(19)32989-7.)

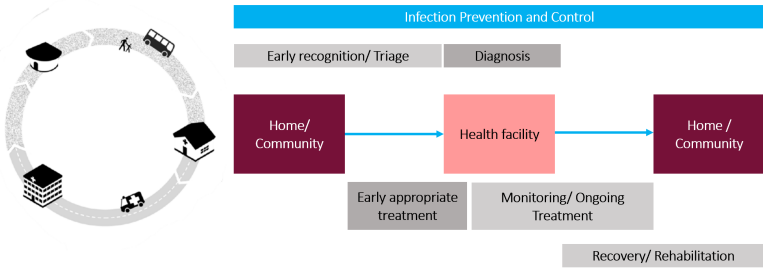
Challenge, approach and impact:

Based on its members’ research expertise, which includes studies of critically ill paediatric and adult patients hospitalised with sepsis and longitudinal studies within health and demographic surveillance system sites, STAIRS will leverage (and establish, where needed) research infrastructure to strengthen capacity for sepsis research at both the health facility and community levels. By pairing industry partners with organisations advocating for equitable global access to reliable diagnostics, STAIRS will also forge a pathway to developing and validating an accessible, affordable comprehensive sepsis platform that provides valuable clinical information on aetiology, antimicrobial resistance, host response, and organ dysfunction at patients’ bedsides. STAIRS’ additional focus on improving the quality of sepsis care will help determine how best to apply innovations – including a mobile quality improvement application and a platform for tele-consultation, which aim to standardise sepsis management and ultimately improve patient survival. The available STAIRS studentships will ensure a pipeline of junior researchers who will expand the base of African researchers working to fill knowledge gaps along the sepsis care continuum. Furthermore, efforts to strengthen institutional research capacity will help to galvanise a network

of African research institutions well-positioned to manage and conduct robust studies, including clinical trials. With additional partners like the African Institute for Development Policy and Africa Centres for Disease Control and Prevention, STAIRS will be poised to bridge the translation gaps among research, patient safety, and policy and engage key stakeholders in the ongoing transfer of scientific output into action in accordance with the 2017 WHO Sepsis Resolution.



STAIRS Investigators (©Walimu)



Sepsis Care Continuum (©doi: 10.1186/s13054-018-2157-z.)

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