

Quick SOFA score predicts in-hospital mortality risk

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(HealthDay)—For patients with suspected infection presenting to the

emergency department, the quick Sequential Organ Failure Assessment (qSOFA) score is better than systemic inflammatory response syndrome (SIRS) or severe sepsis criteria for identifying patients at high risk of mortality, according to a study published in the Jan. 17 issue of the *Journal of the American Medical Association*.

Yonathan Freund, M.D., Ph.D., from Sorbonne Universités in Paris, and colleagues prospectively validated qSOFA as a [mortality](#) predictor in an international prospective cohort study. For a four-week period, consecutive patients who visited the 30 participating emergency departments with suspected infection were included. The analysis included 879 [patients](#).

The researchers found that in-hospital mortality was 8 percent: 3 and 24 percent, respectively, for those with qSOFA score lower than 2 versus those with a qSOFA score of 2 or higher. For prediction of in-hospital mortality, the qSOFA performed better than SIRS and [severe sepsis](#), with an area under the receiver operating curve of 0.80, compared with 0.65 for both SIRS and severe sepsis (P

"These findings provide support for the Third International Consensus Definitions for Sepsis and Septic Shock (Sepsis-3) criteria in the [emergency department](#) setting," the authors write.

Two authors disclosed financial ties to the pharmaceutical industry.

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