The excess burden of severe sepsis in Indigenous Australian children: can anything be done?

IN REPLY: We agree with Schultz’s comments regarding our article1 that Indigenous people’s approaches to health and wellbeing will continue to inform and expand the biomedical understanding of severe sepsis and other inequalities in health that disproportionately affect Indigenous people. The establishment of Aboriginal community controlled health services to holistically advocate for improved health has made important progress in this area. Embracing research that embeds all elements, from the social to the clinical, in a collaborative, holistic approach has been effective internationally.2 We reiterate that addressing these social determinants of health will enhance holistic care of Indigenous children and reduce the excess burden of sepsis. In the meantime, the findings of Ostrowski and colleagues3 regarding staphylococcal infections in Indigenous children remain important as they identify potentially addressable sepsis risks with important implications for acute clinical care, strategies for preventive medicine, and education within medical and wider communities.

Pamela Palasanthiran
Asha C Bowen1,2,3
1 Sydney Children’s Hospital Network, Sydney, NSW.
2 Princess Margaret Hospital for Children, Perth, WA.
3 Wesfarmers Centre for Vaccines and Infectious Diseases, Telethon Kids Institute, Perth, WA.

pamela.palasanthiran@health.nsw.gov.au

Competing interests: No relevant disclosures.

doi: 10.5694/mja17.00340

ª 2017 AMPCo Pty Ltd. Produced with Elsevier B.V. All rights reserved.
References are available online at www.mja.com.au.
Letters

