

ABSTRACT

Sepsis is a clinical syndrome that complicates severe infection. It is characterized by the cardinal signs of inflammation (vasodilatation, leukocyte accumulation, increased microvascular permeability) occurring in tissues which are remote from the infection.

During the last decade, a variety of different molecules have been suggested as clinical biomarkers in sepsis, most of which are still in experimental stage. However, some have come into use in clinical practice and have evolved as valuable tools for diagnosis, therapy monitoring, and outcome prediction.

Early diagnosis is key in successful treatment of sepsis. However, establishing prognosis of sepsis as well as effectiveness of treatment is equally important.

Presepsin has been identified as a protein whose levels increase specifically in the blood of sepsis patients. Presepsin is thought to be a more specific and sensitive marker for the diagnosis of sepsis compared with CRP and Procalcitonin (PCT). Presepsin concentrations in blood were increased faster than PCT and CRP in sepsis patients. Although there are a lot of biomarkers to diagnose sepsis, presepsin could be a new candidate for this purpose. In this mini review, we discussed a new biomarker, presepsin, and its clinical relevance

The presepsin values were significantly higher in patients with local infection, sepsis, and severe sepsis than in patients who have non infective SIRS.

A significant correlation was found between the APACHE II scores, an index of disease severity, and the presepsin values, suggesting that presepsin values can serve as a parameter that closely reflects the pathology.

Key Words :

CRP- PRESEPSIN – PROCALCITONIN .

