Physical inactivity and long-term rates of community-acquired sepsis.

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Abstract
OBJECTIVE: The authors sought to determine the association between physical inactivity (characterized by exercise and television watching levels) and long-term rates of community-acquired sepsis.

METHODS: The study utilized a population-based cohort of 30,183 adult (≥45 years) community dwelling adults. Subjects reported weekly exercise (low=none, medium=1-3 times/week, high=≥4 times/week) and daily television watching (low=<1 h/day, medium=1-3 h/day, high=≥4 h/day) levels. The authors evaluated the association between exercise, television watching and rates of sepsis, defined as hospital treatment for a serious infection with ≥2 Systemic Inflammatory Response Syndrome (SIRS) criteria.

RESULTS: Among 30,183 participants, 1500 experienced a sepsis event. Reported weekly exercise was: high 8798 (29.2%), medium 10,695 (35.4%), and low 10,240 (33.9%). Where available, reported daily television watching was: low 4615 (19.6%), medium 11,587 (49.3%) and high 7317 (31.1%). Decreased weekly exercise was associated with increased adjusted sepsis rates (high - referent; medium - HR 1.02, 95% CI 0.96-1.20; low - 1.33, 1.13-1.56). Daily television watching was not associated with sepsis rates. Sepsis rates were highest among those with both low exercise and high television watching levels (HR 1.49, 95% CI: 1.10-2.01).

CONCLUSIONS: Physical inactivity may be associated with increased long-term rates of community-acquired sepsis.

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