

Patient information

What is Delirium

Medicine for Older People

Who is this leaflet for?

- People who are at risk of delirium
- People who have experienced delirium
- Family and carers of people who have experienced delirium

What is delirium?

Delirium is a sudden onset confusional state. It often develops over hours to days. Delirium can affect people in hospital, at home or in care homes. Delirium is very common and affects 20% of adults in hospital. Delirium often improves when the cause is treated but can sometimes last longer.

Who is at risk of delirium?

The following people are at most risk of developing delirium:

- Those age 65 or older
- People who have difficulties with memory or understanding and those who have dementia
- People with a hip fracture or post-surgery
- Individuals with sight or hearing loss
- People who have had delirium before.
- People with one or more acute illnesses.

What causes delirium?

There are many causes of delirium and there can often be more than one cause. Some of the more common causes are:

- Infections
- Medication
- Pain

- Not eating or drinking enough
- Constipation
- Being in an unfamiliar environment

How can the risk of developing delirium be reduced?

- Making sure someone eats and drinks enough.
- Ensuring that someone has their glasses and hearing aids if they use them
- Having regular hearing and sight checks
- Encouraging regular exercise and movement
- Support the person to have a good night's sleep. Keep their day active and night routine calm.
- Supporting the person to go to the toilet regularly to avoid constipation
- Monitoring for pain and offering painkillers if needed.
- Encouraging the person to participate in activities and hobbies they enjoy to keep the brain as active as possible
- Provide reassurance if the person is in an unfamiliar place.
- Try and provide familiar objects such as family photographs or personal things.
- Use clocks and newspapers for orientating a person and consider writing cues down.
- Review tablets with a doctor or pharmacist to ensure none are increasing the risk of someone developing delirium
- Ensure the person has an opportunity to socialise and see other people where possible.

How is delirium spotted?

It is important to recognise the signs of delirium as soon as possible. A person may be:

- Restless or agitated
- Withdrawn and drowsy
- May not know where they are or recognise familiar people
- Have poor focus and struggle to hold a conversation.
- See people or things that are not there (Hallucinations) or be very suspicious

How is delirium treated?

Delirium usually gets better with treatment of the underlying causes and supportive care. It is very important that the symptoms of delirium are picked up as soon as possible

How can recovery from delirium be supported?

If you are a family member or carer of someone experiencing delirium the following may help recovery:

- Let the team looking after the person with delirium know if there are any changes in behaviour and what they are normally like.
- Keep a friendly calm approach. You may need to keep instructions simple and repeat yourself
- Ensure the person with delirium gets plenty of rest and gets their sleep.
- Try and keep the daytime more active and night routine calmer.
- Provide reassurance and orientate a person to their surroundings.
- Family photograph and bringing in some familiar possessions may help
- Clocks, calendars and newspapers may help re-orientate a person to their surroundings
- Family and friends spending time with the person.
- Ensuring they have glasses and hearing aids when they go to hospital if they use them
- Encourage sitting out of bed and regular movement
- Support to eat and drink enough
- Try and engage in activities the person like such as listening to their favourite music or doing puzzles

Follow-up

In some cases, the symptoms of delirium do not go away completely. Some people continue to have problems with their memory and thinking. It's important that the medical team communicate with your GP and in some cases follow up will be needed with the GP or in the specialist delirium clinic to assess recovery.

Patient Name
Date Delirium was diagnosed
Completed by:
Causes of delirium

Treatment plan and additional support needed

Self-management strategies

Follow-up plans

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further information

National Institute for Health and Care Excellence (NICE): Has a clinical guideline for delirium including a section regarding information for the public www.nice.org.uk/guidance/cg103

Alzheimer's Society: "This is Me" form can be downloaded from www.alzheimers.org.uk/

SIGN delirium information <https://www.sign.ac.uk/assets/pat157.pdf>

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