

DELIRIUM



WHAT IS DELIRIUM?



- Delirium is when the function of the brain is impaired due to physical condition and patients are able to fully recover.
- Delirium is acute and causes fluctuating mental state when someone is sick or injured.
- Develops over a few days.

SIGNS OF DELIRIUM



- More confused than their normal.
- Not sure what is happening around them, and not able to follow a conversation.
- Unsure where they are and what they are doing.
- Visual or auditory hallucinations, or vivid dreams.
- Feeling more tired than usual, or changes in their sleeping pattern.
- Feeling restless or agitated.

CAUSES OF DELIRIUM



- Infections or fevers.
- Surgery (particularly major surgery).
- Trauma, including bone fractures.
- Stroke or head injury.
- New medication (stopping or changing a medication).
- Substance use or withdrawal.
- Constipation or urinary retention.
- Dehydration.
- Hypoxic.
- Long periods with lack of sleep, stress or anxiety.

WHO IS AT RISK?



- Advanced age or frailty.
- Underlying dementia.
- Taking multiple medications.
- Pre-existing brain disease: stroke, Parkinson's.
- Young children.

DIAGNOSIS OF DELIRIUM



- Mental state assessment.
- No specific test but it is important to look at underlying causes.
- The patient needs to be assessed in relation to their “normal” state.
 - Information gathered from loved ones.

TREATMENT FOR DELIRIUM



- Treat potential causes.
- Manage symptoms.
- Reduce stress.
- Some people may take longer than others to recover.
- Medications can help if patient is extremely agitated or exhausted or distressed but they are not the cure for delirium.

AIMS OF CARE



- Maintain dignity and privacy.
- Ensure basic needs are met: continence, nutrition, mobility.
- Reduce confusion or agitation.
- Encourage food and drink.
- Prevent pressure areas, dehydration and falls.
- Correct sensory impairments: use glasses and hearing aids.
- Monitor bowel and bladder function.
- Treat pain.
- Maintain good sleep schedule.

AGGRAVATING FACTORS FOR DELIRIUM

- Fatigue.
- Noisy, busy or unfamiliar environment.
- Pain.
- Poor eye sight or hearing.
- Poor nutrition.
- Immobility.
- Catheters or IV lines

HOW CAN CARERS HELP?



- Encourage family to visit regularly.
 - Limit 1-2 visitors at a time.
- Identify yourself.
- Regularly orientate them to where they are and why they are there.
- Speak slowly and clearly.
- Use a calm tone, humour and a light touch may be reassuring.
- Minimise background noise: music, TV.
- Bring in personal items: pictures, blanket or meal.
- Help orientate them: clock, calendar.
- Access to natural light.
- Encourage and assist with meals and drinking, preferably out of bed.
- Try not to argue with deranged thoughts or comments.
 - Distract or tactfully disagree.
 - If they are confused do not contradict them.
- Do not physically restrain.
- Try distraction techniques: fiddle mitts, reading, music.
- Family to stay at bedtime.

IMPORTANT FACTS



- Older people and those with dementia can take longer to recover.