

Delirium

Information for Patients and Families



What is delirium?

Delirium describes a state of ‘acute confusion’. It is a common condition that feels very real to patients and can often be described as being in an alternate reality. It can affect patients for a very short period of time during illness or following an operation. More than half of surgical patients admitted to hospital can experience some symptoms of delirium at some point during their stay. In most patients the symptoms generally disappear within a few days, although some patients (around 5 %) may continue to experience one or more symptoms when leaving hospital. Some people are more likely to experience delirium when ill or recovering from an operation – such as older people; those with dementia etc.

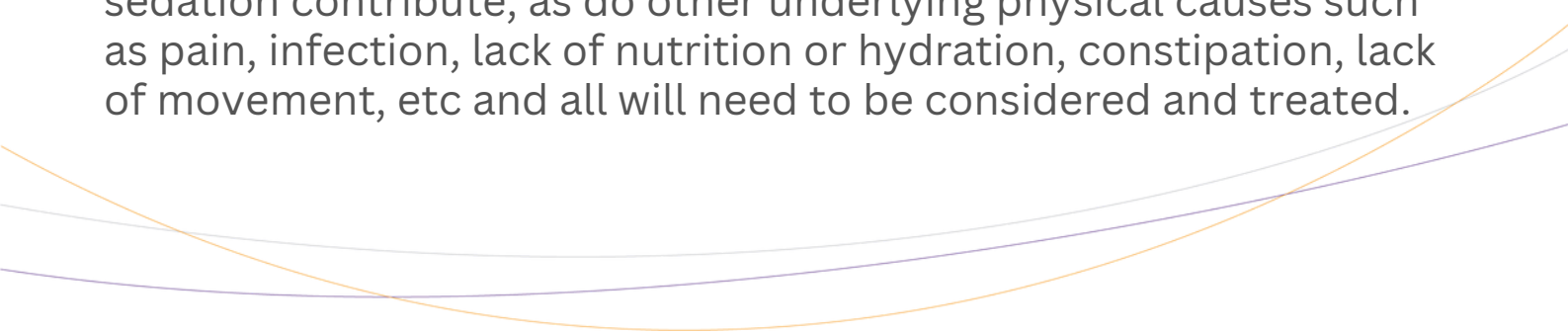
Delirium can cause one or more of the following:

- Hallucinations (seeing or hearing things that aren’t there).
- Unusual or paranoid thoughts (e.g: feeling mistrusting of staff; a fear that people are trying to cause harm).
- Confusion (not knowing where you are or why you are there)
- Restless behaviour, agitation and difficulty sleeping (hyperactive delirium) OR Excessive sleepiness and withdrawal (hypoactive delirium). Or a mixture of both (“mixed delirium”)
- Delirium can change and fluctuate – with a patient seemingly ok one minute and confused the next.

At the time, a patient experiencing delirium is often convinced that their experiences are reality and this can then affect their behaviour (e.g: a patient may ask family to take them home before they are well enough). During an episode of delirium, patients may sometimes may not recognise even their closest family members which may be very upsetting and difficult to deal with.

Why do people experience delirium?

Delirium often has many causes. Recent anaesthetic and/or sedation contribute, as do other underlying physical causes such as pain, infection, lack of nutrition or hydration, constipation, lack of movement, etc and all will need to be considered and treated.



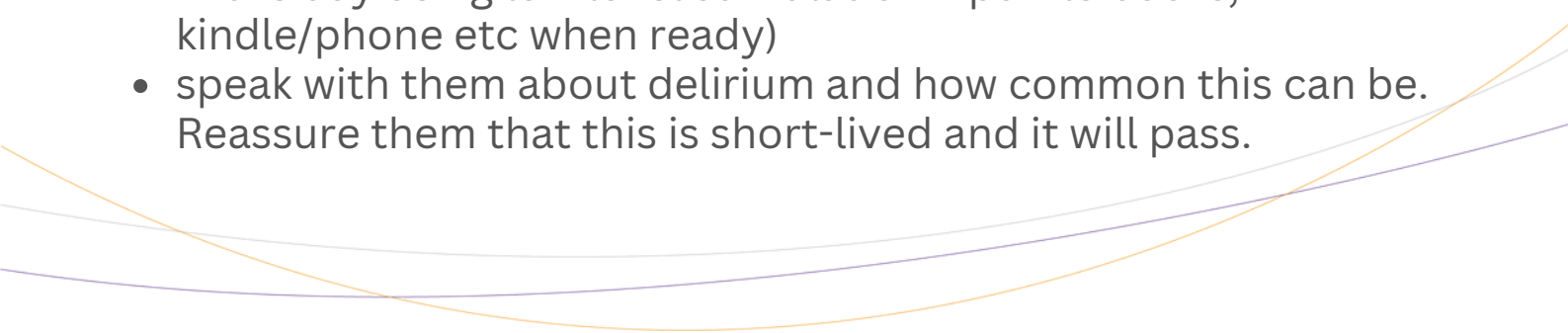
The hospital environment with unusual noises can add to the experience of delirium. In critical care areas there are often few windows and so patients do not know what time of day/night it is. However, in critical care we have a peaceful garden area where staff can take our patients to help promote wellbeing and re-orientation.

Difficulty sleeping (sleep deprivation) also plays a part in delirium and our staff aim to promote a healthy sleep cycle whilst patients are in hospital. Our staff understand delirium and are trained to help reassure patients and their families and to help them through this difficult time.

Staff will encourage family members to help re-orientate the patient and are happy to answer any of your questions and address any concerns.

How can I help someone with delirium?

You can help someone with delirium feel calmer and more in control if you:

- try to stay calm
 - make sure they can see a clock/calendar to help keep them orientated • remind them of where they are and why
 - talk to them in short, simple sentences; check that they have understood you and repeat things if necessary
 - try not to agree with any unusual or incorrect ideas, rather tactfully disagree or change the subject
 - if they are in hospital, bring in some familiar objects/photographs from home to help provide reorientation and a connection to home
 - make sure they have their usual glasses and hearing aid (as being without them may add to any hallucinations)
 - help/encourage them to eat and drink where appropriate
 - help to keep them in a day and night routine (more wakefulness in the day using low level stimulation – puzzle books; kindle/phone etc when ready)
 - speak with them about delirium and how common this can be. Reassure them that this is short-lived and it will pass.
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What about when patients leave hospital?

Delirium is distressing for patients and loved ones but once the effects of sedation and/or the underlying cause for this severe confusion has been treated, the distressing symptoms will usually improve.

Some patients may still be a little more confused or less able than usual to carry out their daily task when they leave the hospital, but in most cases these symptoms ease over time. Patients often may not remember their time in hospital or when the delirium occurred.

Some patients remember hallucinations and experiences and can be very distressed by them for a short time, and for some they may struggle to forget them for a long time.

Following discharge from hospital, we will contact patients who have experienced delirium who may benefit from a follow-up appointment to review their progress.

Most patients will slowly get better but in a small number of cases the symptoms do not completely go away. If you or your loved ones are concerned, please speak to your GP. Following discharge from hospital if you would like to contact someone to discuss delirium, please contact our **Outreach Team on 0151 600 1616** who will be able to sign-post you to any additional support you may need.

Useful websites with sources of information:

- **www.icusteps.org**
- Intensive care society **www.ics.ac.uk**
- **www.nhs.uk** search: Intensive Care and/or Delirium
- **www.healthtalk.org** (a website that has information about patient experiences of intensive care and delirium; search: intensive care)

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