

Delirium in the Older Adult: A Family Guide

What is delirium?

Delirium (say *dah-l-ear-ee-uhm*) is when a person becomes confused. It is **temporary**. The person's thinking and behaviour changes.

It develops quickly over hours and days. It can last for a few hours or days, sometimes longer. Delirium is a serious medical problem, and common in older adults.

What causes delirium?

Medicines, infections, or just being in the hospital can cause delirium.

There are many things that can make the delirium worse and last longer. People are more likely to get delirium if they have any of these conditions:

- medical illness (infection)
- recent surgery
- recent fall or injury
- lack of sleep
- pain
- poor eating and fluid intake
- illegal drug and alcohol use

Even poor fitting or not wearing hearing aids and/or glasses can cause delirium.

Who is more at risk for delirium?

Anyone with a severe illness can become confused. People who are 75 years and older are more likely to get delirium, especially if they have:

- dementia
- depression
- had a delirium before
- problems with memory and/or thinking
- vision and hearing problems
- chronic medical conditions (such as a heart, kidney, lungs, or liver condition)
- certain surgeries (such as heart, hip, eye surgery)

What does delirium look like?

Signs of delirium can come and go during the day and get worse at night.

The person has a hard time making sense of what is happening around them. You might notice that they:

- are nervous or scared
- forget things
- don't know where they are
- mix up days and nights
- don't make sense when they talk
- have trouble staying awake
- can be either restless or quiet
- see or hear things that are not there

What can the health care team do?

- Look for the cause(s) of delirium by checking the whole person from head to toe including doing blood tests and other test, if needed.
- Ask the person and those who know them well questions about their usual behaviour, routine, and level of activity at home.
- Treat the cause(s) of delirium. This might mean giving pain medicine, starting medicine for infection, giving fluids, and/or helping the person eat.
- Make the hospital room quiet as possible. This might mean limiting the number of visitors at one time, and turning lights down at night.
- Remind the person often that they are in the hospital and why they are there.
- Help the person with sitting and walking.

What can you do to help?

- Visit often, especially when they are very confused. You being there can reduce anxiety and fear.
- Keep sentences short and simple.
- Gently remind them of the day and time, and where they are.
- Reassure them often that this will go away. This helps reduce any anxiety, fear, and anger that might happen.
- Report any sudden changes in their behaviour to healthcare team.
- Help them to rest and sleep by offering a warm drink or back rub, keeping noise down, and keeping lighting low or off.
- Help them with sitting and walking.
- Encourage them to eat and drink. Offer fluids often. Help them eat if needed.
- Bring in familiar items from home, such as pictures, music, food, a favourite blanket, and pillow.
- Bring in glasses, hearing aids (with spare batteries), and dentures. Be sure these are in good repair. Encourage them to use these items.
- Share this information with others.

For more information

Websites:

Canadian Coalition for
Seniors' Mental Health ccsmh.ca
(scroll down to 'Delirium' or use this link goo.gl/CtHQzr)

Vancouver Island Health
'Delirium in the Older Person' viha.ca
(search 'Delirium' or use this link goo.gl/7rxF6p)