



Understanding delirium

What is delirium?

Delirium is a sudden change in a person's mental state. It is a serious condition that is sometimes mistaken for dementia or, more rarely, depression. Unlike dementia, delirium develops quickly and is usually temporary.

What causes delirium?

Delirium has many causes and often more than one thing causes it to develop. Some common causes are:

- A urine or chest infection
- Having a high temperature
- Side-effects of medication like steroids or painkillers
- Dehydration, low salt levels, anaemia
- Liver or kidney problems
- Major surgery
- Epilepsy
- Constipation
- Being in an unfamiliar place

Delirium often starts suddenly and usually lifts when the condition causing it gets better. It can be frightening, not only for the person who is unwell, but also for those around them. Delirium is usually worse at night.

How common is delirium?

Between a quarter and two-thirds of all hospice patients will experience delirium. It can affect anybody of any age, but is more common if you are:

- Aged 65 or older
- Have memory problems
- Have poor hearing or eyesight
- Have recently had major surgery
- Have a terminal illness
- Have an illness of the brain, such as an infection, a stroke or a head injury
- Have previously had delirium

What is it like to have delirium?

You may:

- Not notice what is going on around you
- Be unsure of where you are and why you're there
- Be unable to follow a conversation or speak clearly
- Be very agitated or restless
- Be very slow or sleepy
- Sleep during the day and wake up during the night
- Have fast-changing moods, and feel frightened, anxious, depressed or irritable
- Have vivid dreams that might carry on when you wake up
- Worry that people are trying to harm you
- Hear noises or voices when there is nothing or nobody to cause them
- See people or things that aren't there

How can I help someone with delirium?

You can help them feel calmer and more in control if you:

- Stay calm
- Talk in short, simple sentences and check they have understood you
- Repeat things if necessary
- Remind them of the time and date – make sure they can see a clock or a calendar
- Listen to them and reassure them
- Make sure they have their glasses and/or hearing aid
- Help them to eat and drink where appropriate
- Bring some familiar objects in from home
- Keep a light on at night so they can see where they are when they wake up
- Reassure them that they're safe
- Talk about familiar, non-threatening subjects to redirect their thoughts

If you or your loved ones notice sudden changes or fluctuations in behaviour or thoughts, please talk about it to one of our medical or nursing team members.

Treating delirium

We will carry out tests to find the cause(s) of delirium and begin the appropriate treatment when the source is identified.

Our In Patient Centre team will source further specialist advice whenever this is required. Sometimes medication will be prescribed to calm or treat hallucinations whilst the underlying cause of the delirium is being investigated and treated. This medication will be monitored and reviewed regularly and discontinued as soon as possible.

How long does it take to get better?

Delirium gets better when the cause is treated. You may get better very quickly, but it can take several days or weeks and leave vivid memories. People with dementia can take a particularly long time to get over delirium.

How do you feel afterwards?

You may not remember what has happened, particularly if you had memory problems beforehand. However, you may recall it almost as if it was a dream and remember the emotions you felt at the time, which can be unpleasant and frightening. We encourage you to talk to us about your experience as you become well again. We can go through a diary of what happened each day. It can also be helpful to talk things through with your loved ones. Most people feel relieved when they understand what happened and why.

Will it happen again?

You are more likely to have delirium again if you become medically unwell. People living with dementia are more likely to also have delirium. More information can be found on the Alzheimer's Society website.

Where can I find out more information?

“Delirium: prevention, diagnosis and management in hospital and long-term care” – NICE guideline, <https://www.nice.org.uk/guidance/cg103>

“Delirium in adults” – NICE quality standard <https://www.nice.org.uk/guidance/qs63>

Public delirium information leaflet – Royal College of Psychiatrists

<https://www.rcpsych.ac.uk/mental-health/problems-disorders/delirium>

Delirium awareness video – produced by Dr Sophia Bennett and Dr Mani Krishnan, part of the #icanpreventdelirium conversation

<https://www.youtube.com/watch?v=BPfZgBmcQB8>

Delirium – Alzheimer’s Society <https://www.alzheimers.org.uk/get-support/daily-living/delirium>

Delirium (confusion) – Dementia UK <https://www.dementiauk.org/delirium/>