# GUIDE

## **Delirium A guide for caregivers**



The Ottawa | L'Hôpital Hospital | d'Ottawa

#### Disclaimer

This is general information developed by The Ottawa Hospital. It is not intended to replace the advice of a qualified health-care provider. Please consult your health-care provider who will be able to determine the appropriateness of the information for your specific situation.

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#### What is delirium?

Delirium is when a person suddenly gets really confused when they are sick. The person may not be able to think clearly, follow a conversation or remember things. The person may also behave differently (for example, they may not recognize family members or not cooperate with care-givers). These symptoms may come and go during the day and might get worse at night. If a person has had delirium in the past, they may get it again.

#### Is this the same as dementia or Alzheimer's disease?

No. Delirium and dementia are different and are treated very differently. Dementia is a word that describes several brain illnesses, and one of them is Alzheimer's disease. These illnesses usually affect a person's memory and how well they can do daily activities. They happen slowly and are usually permanent, so they are different from delirium. However, people who already have dementia are more likely to get delirium if they get sick.

### How can I tell if my family member has delirium?

Your family member may:

- mix up where they are or why they are at the hospital
- be restless, try to climb out of bed, or constantly pick at their blankets or tubes
- · drift between asleep and awake
- have trouble following a conversation
- seem confused sometimes but not at other times
- say things that do not make sense
- be more forgetful than usual
- mix up dates or days of the week
- mix up day and night (they may sleep during the day and be awake and restless at night)
- seem to see or hear things that aren't really there (hallucinations)

Some people with delirium may be very upset. Others have a "quiet delirium" and may just be sleepy, withdrawn or worried. Some people will be upset one minute and quiet the next.

If you think your relative has delirium, talk to the nurses and doctors.

#### Who can get delirium?

Anyone can get delirium but some people are more likely to get it.

Older adults may get delirium after an operation (e.g. for a broken hip) or if they have an infection (e.g. a bladder infection or lung infection). Sometimes a person may get delirium for no obvious reason. People who drink alcohol or take sleeping pills every day may get delirium when they come to the hospital because they suddenly stop drinking or taking pills and go into withdrawal.

Delirium is a warning sign that something is wrong.

#### What causes delirium?

Delirium may show that there is a serious medical problem that you don't know about yet. Some of the common causes could be:

- a new illness or injury (e.g. broken hip)
- an infection (e.g. bladder or lung)
- medications (pills) (e.g. new prescription, too many pills, medications which may interact with other pills)
- not drinking enough water (dehydration); kidney problems
- · problems seeing or hearing
- pain

 withdrawal (suddenly stopping drinking alcohol or some types of pills)

Very often there is more than one cause.

#### How is delirium treated?

To treat delirium, you must find out what is causing it. The doctors and nurses will:

- Ask questions about how your family member was before the illness:
  - Did they have trouble with remembering or thinking rationally?
  - Has this ever happened before?
- Do blood tests, x-rays or other tests to see what is causing delirium
- Adjust medications
- Treat pain, infections or other causes
- · Assess each day for improvement

Once they find the causes, they can provide the best treatment.

#### Will it go away?

Delirium *usually* lasts a few days to a few weeks, although older people sometimes take longer to get better. Some people may never return to their normal selves again. You should tell your doctor if you notice

that your family member's memory **does not** improve over time.

#### How can I help?

Tell the nurse or doctor what your family member was like before getting sick.

- Did they need help bathing or showering?
- Did they need help walking?
- Did they have trouble taking their pills properly?
- Could they make a meal by themselves?
- Did they have any memory problems? Have you ever been told that they have dementia? Do they take medicine to help their memory?
- Have they ever been confused like this before when they were sick or in the hospital?

#### Please ask the nurses what you can do to help.

Here are some things you could do to help your family member:

- Reassure them that they are safe. Talk to the nurse to see if you should stay after visiting hours are over.
- **Gently** remind them that they are in the hospital and why they are here.
- Give them more time to answer questions (sometimes a person's thinking becomes slower).
- Bring a calendar and clock. Give gentle reminders of the date and time.

- Make sure they have their glasses and hearing aids.
- Help them sleep by being quiet and turning the lights down at bedtime.
- Ask if you can help feed them. If they are allowed to drink, give them water often (a few sips every 30 to 60 minutes).
- Read to them. Hold their hand.
- Bring in something from home that they know (e.g. pictures of family, blanket, stuffed toy).
- Bring a radio or music that they enjoy.
- Make a list of important phone numbers to keep beside the bed.
- Offer simple instructions, one step at a time.

#### Do not

- · Argue with them or say "Don't..."
- Try to test them with questions that they do not know the answer to.
- Ask them "Why did you...?"

Please ask the nurse or doctor if you have any other questions.

Notes and questions:				

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