Delirium

Information for patients and relatives

Delirium is common • Delirium is treatable • Relatives can stay to help us
**What is delirium?**

Delirium is caused by a disturbance of brain function. It is used to describe a state of sudden confusion and changes in a person’s behaviour and alertness.

**How common is delirium?**

It is very common and frequently occurs in patients in hospital with other problems. It is most common in people over 65 and those with pre-existing memory problems such as dementia. It is also more common in patients who are on a breathing machine, in intensive care for example.
What increases risk of developing a delirium?

Certain conditions and chemical changes in the brain can lead to an increased risk of developing a delirium. There is often more than one cause of delirium, and certain people may develop a delirium because of a less severe cause such as constipation. Some conditions that can lead to a delirium include:

- dementia;
- surgery – especially heart or hip surgery;
- an illness of the brain, such as a stroke or head injury;
- a terminal illness;
- depression;
- heart failure;
- an infection or sepsis;
- medications such as painkillers or sedatives;
- pain;
- malnutrition;
- constipation;
- poor eyesight and/or hearing.
What are the symptoms of delirium?

A person with a delirium can show symptoms including:

- confusion;
- distractibility;
- rambling speech;
- changes in alertness;
- agitation (sometimes leading to aggression);
- behavioural changes;
- changes in personality, including paranoia;
- hallucinations.

The symptoms are often worse at night, meaning that a person is awake at night and sleepy during the day.
What it is like to have delirium?

You may:

• be less aware of what is going on around you;
• be unsure of where you are or what you are doing there;
• be unable to follow a conversation or to speak clearly;
• hear noises or voices when there is nothing or no one to cause you harm;
• have vivid dreams or hallucinations which are often frightening and may carry on when you are awake;
• see people or things which aren’t there;
• worry that other people are trying to harm you;
• be very agitated or restless, unable to sit still;
• be very slow or sleepy;
• sleep during the day but wake up at night;
• have moods that can change quickly, eg frightened, anxious, depressed or irritable;
• be more confused at some times than others, often in the evening or at night;
• feel upset towards your family for not taking you home.
Helping someone with a delirium and coping as a carer

It can be very distressing to witness a relative or friend who is showing symptoms of a delirium.

It is important to remember that the person with a delirium is often unaware of the reality of who you are, where they are or why they are there.

This can cause them to become distressed and frightened and can make it difficult to engage and provide support to them. By regularly reminding them where they are and reassuring them that they are safe, you can help to calm their anxieties and fears.
Try to stay calm and speak slowly and softly, about familiar non-threatening topics to re-direct their thoughts towards things that help them become more content. This can include using music, items from home such as photographs, to engage with them.

The symptoms are normally short lived, but can last several weeks or sometimes months. The duration of the change depends on the severity and resolution of the underlying cause.

The ward staff may be able to keep you informed about the likely cause of delirium and will try to facilitate you staying with the person while they are having treatment, if they feel that it will be beneficial.
You can view the delirium animation at https://youtu.be/_c9M4FnDwOc