How can I help care for someone with delirium?

Families and other carers can help the treating team to recognise and manage delirium. Here is how you can help:

Notice if the person you care for is more confused, sleepier or talking strangely and ask staff **"could this be delirium?"**

Have someone they know well (e.g. family or friend) to stay with them –it can help to organise 'shifts' so everyone gets a break

Help them put on their glasses and hearing aids if required

Bring personal and familiar items from home e.g. photos , blankets

Talk to them about familiar things, and let them talk about their fears and worries even if they seem irrational

Help them to sit out of bed or walk with them in discussion with their treating team

Encourage them to eat and drink in discussion with their treating team

Tell the treating team about their interests (e.g. names of their family members or pets, hobbies, significant life events)

Tell the treating team about their usual medication and alcohol use

Tell the treating team if you think they have pain

Important things to remember

Families and caregivers can help the health care team to recognise and manage delirium.

If you notice any changes or have concerns or questions about delirium, please speak to the health care team immediately.

Delirium can be a frightening experience. If you or your loved one experiences delirium, talking to a health care provider can help you understand what is happening.

Talk to your loved one about their delirium experience to lessen their fear or frustration.

For more information

Speak to the health care team

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http://www.delirium.org.au

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COULD IT BE DELIRIUM?

Recognising and managing delirium: a guide for family and other caregivers

What is delirium?

Delirium is a new state of confusion which causes a person's mind to become clouded and makes it hard for them to pay attention and focus their thoughts.

Delirium develops quickly over hours or days and can last a few days or weeks

Delirium is different from dementia which has a gradual onset and is a lasting condition, but people with dementia are at increased risk of delirium.

Delirium can be very frightening and can lead to slower recovery, longer stays in hospital and additional complications such as falls

What causes delirium?

Delirium can occur following operations or procedures and with many acute illnesses or medications. Many causes can contribute to delirium and often patients have several causes at once. These include:

- Pain
- Infections (e.g. chest or urine)
- Thirst/dehydration
- Hunger/poor nutrition
- Being less mobile than usual
- Drug side effects
- Drug or alcohol withdrawal
- Too much or too little sensory stimulation (e.g. noise, light)
- Sleep disturbance

How is it diagnosed and treated?

Delirium is diagnosed by a careful history and testing of thinking and attention. There is no blood test or scan to diagnose delirium. The medical team will order tests looking for underlying cause(s). Treating the underlying cause(s) is critical because there is no drug to treat the delirium itself.

Patients with delirium often need extra care to address causes and help them recover safely.

Signs of delirium checklist

Delirium can be different for different people. Symptoms can fluctuate throughout the day. This is a checklist of signs to observe.

People with delirium may:

- ☐ Seem different to their normal selves
- ☐ Be confused and forgetful
- ☐ Be very agitated or sleepy
- ☐ Have difficulty paying attention or keeping track of conversations
- ☐ Be unsure of the time of day or where they are
- ☐ Have changes in their sleeping patterns
- ☐ See or hear things that are not there
- ☐ Worry that other people are trying to harm them

If you are worried about yourself or a loved one, talk to a healthcare professional as soon as possible.