



DementiaUK

Helping families face dementia



Delirium (Confusion)

Understanding
changes in behaviour
in dementia

Delirium (confusion)

A sudden change in a person's mental state is known as delirium. Delirium could lead to increased confusion, disorientation, or difficulty with concentration, and can come on very quickly. It can occur when you are medically unwell and can be caused by infections, pain or dehydration. It can have a significant impact on the way a person behaves and functions, especially if they also have dementia. Delirium can be very distressing both for the individual and the people who are caring for them.



Delirium and dementia

Delirium is a treatable condition and may co-exist with dementia. However, it is sometimes difficult to recognise in people with dementia because it has similar symptoms such as confusion and difficulties with thinking and concentration.

Delirium can last for a few days, weeks or even months but it may take longer for people with dementia to recover.

In hospitals, approximately 20-30% of older people on medical wards will have delirium and up to 50% of people with dementia. Between 10-50% of people having surgery can develop delirium.

Older people with delirium and dementia have been found to have longer stays in hospital; be at increased risk of complications such as falls, accidents or pressure sores; and be more likely to be admitted into long-term care.

In extreme cases delirium can be fatal, so it's vital that the person receives treatment as soon as possible.





Symptoms of delirium

There are two types of delirium. People with **hyperactive** delirium experience increased confusion that fluctuates throughout the day and can feel agitated or restless. People with **hypoactive** delirium may feel more sleepy and be less responsive.

Other symptoms of delirium include: seeing things that are not there or having vivid dreams that are worse at night; difficulty in focusing attention; and problems with following a conversation.

People who have had delirium say they:

- felt unsure of their whereabouts
- worried that other people were trying to harm them
- felt afraid, irritable, anxious or depressed
- felt slow and sleepy
- felt agitated and restless
- had vivid dreams that continued when they woke up
- found it hard to follow what is being said
- found it difficult to speak clearly
- saw and heard things that were not there.

Who is more at risk of delirium?

- People with dementia
- People who are dehydrated or have a poor appetite
- People with an infection (although low level infection may not show up on tests)
- People who are constipated or have urine retention
- Older people
- People who have had surgery, particularly hip surgery
- Older people taking multiple medications
- People with sight and hearing difficulties
- People who are nearing the end of their life
- People who are in pain
- People in an unfamiliar or distressing environment.

What to do

Contact the person's GP for an urgent assessment and advice. If a GP is unavailable and the confusion or disorientation has come on suddenly, contact the duty doctor who, if necessary, will arrange an ambulance.

How is delirium treated?

The doctor may request blood and urine tests and will be able to decide on appropriate treatment. They may also want to review any medication that could be contributing to the delirium.

There is also evidence that delirium can be prevented by targeting potential causes. You can avoid some of the causes of the confusion, like constipation, dehydration and infection, by ensuring the person stays well hydrated, observes hand hygiene and follows any advice they're given about wound care and medical devices (such as urinary catheters). If possible, you should also avoid the person moving beds or wards in hospital.



What can I do to help someone with delirium?

If you have contacted the person's GP and are awaiting treatment, there are a few things you could do to make the situation a little easier for them:

- keep calm and reassure the person
- use short simple sentences when talking
- observe the person to see if they are in any pain
- make sure there's nothing obscuring their senses, and have their glasses and hearing aid to hand if they use them
- use familiar photos and objects to distract the person and provide familiarity
- help ground the person by making sure they know the time and date
- help the person to find the toilet if needed
- avoid too much stimulation and having too many people around if possible
- keep a low light on at night
- avoid disagreeing with the person too much; change the subject if they express ideas that seem odd to you
- offer them drinks to maintain hydration.

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If you're caring for someone with dementia or if you have any other concerns or questions, call or email our Admiral Nurses for specialist support and advice.

Call **0800 888 6678** or email **helpline@dementiauk.org**

Open Monday – Friday, 9am – 9pm

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