

Delirium Prevention and Care with Older Adults

LEARN MORE + PROTECT YOUR BRAIN



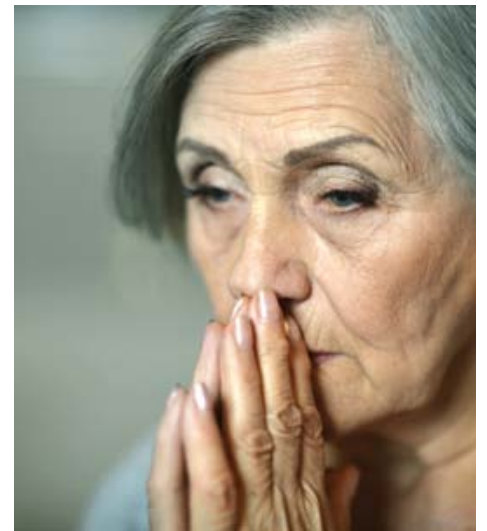
Delirium is a medical emergency.

What is Delirium?

Delirium is a sudden and severe disturbance in thinking. It can cause changes in a person's ability to stay alert, remember, be oriented to time or place, speak or reason clearly.

A person with dementia can experience delirium too. Sometimes, delirium can look like dementia. The difference is that delirium comes on quickly. See or talk to a healthcare provider right away if any of the following signs suddenly appear – even if the signs come and go.

- Having trouble paying attention.
- Being distracted or unable to follow a conversation.
- Saying or doing things that do not make sense.
- Hearing voices or seeing things that other people do not.
- Developing strange beliefs or thinking people are trying to cause you harm.
- Being withdrawn, quieter or slower than usual.
- Being restless, worried, annoyed or angry.
- Having trouble staying awake during the day and/or not sleeping at night.



What can cause delirium?

Delirium can be caused by a mix of factors. Some of the more common ones include:

- An infection, for example in the bladder or lungs.
- Recent surgery.
- Various medical conditions.
- Untreated pain.
- Starting or increasing the dose of some medicines.
- Stopping some medicines, such as pain or sleep pills.
- Stopping alcohol, if a heavy drinker.
- Not eating well or drinking enough water.
- Not getting enough sleep.
- Not wearing hearing aids or glasses.

Delirium is more common among older people. It can often be prevented or treated.

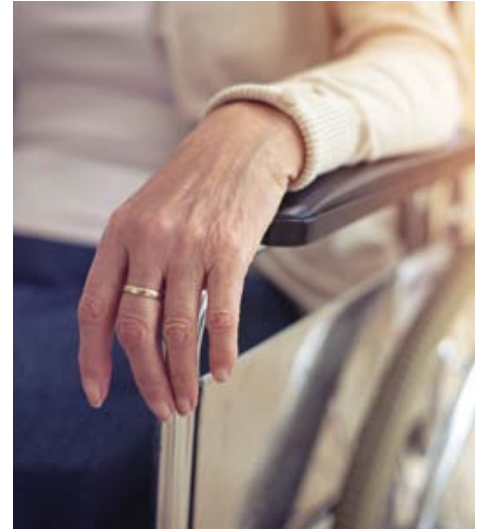
How is delirium treated?

There is no single treatment for delirium.

Most often, the healthcare team will work with the patient and his or her family to learn about and then fix what caused the delirium. The delirium will often improve once the cause of it is found. For example, if an infection caused the delirium, the infection will be treated. If a medicine caused the delirium, it might be stopped, taken at a lower dose or a new medicine may be tried.

In some cases, a person may need medicine to treat their behaviours while experiencing delirium. This is most often in cases when the person is a danger to themselves or others.

The healthcare team will watch the signs of the delirium to see if these signs go away. They may make changes to your treatment until you get better.



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How is delirium prevented?

To help prevent delirium:

- Make sure those caring for you know all your medications and how you take them. They should be taken as prescribed. Pay extra attention to how you are feeling if you are starting or stopping a medicine or when you are changing how much medicine you take. Talk with your healthcare provider if you are not feeling right.
- Stay physically active.
- Get enough to eat and drink.
- Try to sleep at night (without the help of sleep medicines, if possible).
- Wear your glasses and hearing aids.
- Keep doing hobbies and activities that you enjoy.
- Reduce how much alcohol you drink. Don't stop abruptly.
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If you are going to the hospital for surgery or other treatment:

- Find out if your hospital has a delirium prevention program. Ask if you can be part of the program.
- Speak to your healthcare team about your risk of delirium after surgery.
- If you experience delirium while in hospital it might be difficult for you to understand your choices for care, make decisions about them and communicate your wishes. Before your surgery or other treatment, let people know what kind of care you would want if you were unable to speak for yourself. See link to *Advance Care Planning* site under *Other Resources* for more information.

Whether in hospital, in a long-term care facility or at home, you can help your family member feel safe and calm.

How can I help my family member who has delirium?

Stay with your loved one whenever possible, especially in the evening and overnight.

Being near your loved one can help. If you are not able to stay, have family or a friend stay with them instead. If your loved one is in hospital or a care home, familiar pictures or other items may help calm them. If needed, you can help your loved one talk with their healthcare team.



Talk with your family member.**Let them know you are there and want to help.**

- Speak softly and slowly. Be calm, kind and comforting.
- Keep your statements short, stating one idea at a time.
- Give the person time to take in the information and time to answer. You may have to repeat information.
- Be supportive. What the person is thinking, feeling, seeing and hearing is real to them.
- Tell your loved one who you are, remind them of where they are and how long they have been there.
- If your loved one is upset or unable to understand, move on and talk about other things.

A person with delirium may not recognize you or make sense. They might say hurtful things too. Even though it is hard, try not to take it personally.

Support a regular daytime routine.

Make sure that there is good lighting and curtains are open to let in natural light. This will help your loved one know where they are and what time it is. It can also help with being awake and sleeping at the right times. Having a clock or calendar nearby might help set a routine.

Support a regular nighttime routine.

- Lower light at night to help with rest and sleep.
- Give a slow back massage, warm milk, play soft music, take a short walk and provide a comfortable pillow and warm blanket.
- Limit noise.

Help your loved one eat well and drink enough water.

Eating and drinking in the right amounts is important. If your loved one finds this difficult, ask your healthcare provider for ideas to help. Ask if you should encourage them to drink while you are visiting.

Make glasses, hearing aids and dentures available.

Not being able to see or hear well can increase the risk of delirium and falls. Encourage your relative to wear their glasses and/or hearing aids. Make sure their glasses are clean and their hearing aids are working. Having their dentures in will also make it much easier for your family member to eat and talk.



Talk with your family member. Let them know you are there and want to help.

Support being active.

Find out how active your loved one should be and ask how you can help with this.

If your loved one drives, find out when it will be safe to drive again.

Focus on getting better.

Do not remind your loved one of the things that they said or did while they had delirium. These actions were signs of delirium. It can be scary and embarrassing to hear about it. Instead, focus on helping your loved one get better.

Help prevent future delirium.

Talk with your loved one's healthcare provider to find out what might have caused the delirium. Help your loved one find out what can be done to help prevent delirium in the future.

This brochure is adapted from the Canadian Coalition for Seniors' Mental Health (CCSMH) *National Guidelines for Seniors' Mental Health: The Assessment and Treatment of Delirium*.

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Disclaimer: This brochure is intended for information purposes only. It is not intended to be interpreted or used as a standard of medical practice.



Canadian Coalition for
Seniors' Mental Health
Coalition Canadienne pour la Santé
Mentale des Personnes Âgées

Other resources about delirium

Canadian Coalition for Seniors' Mental Health (CCSMH)

www.ccsmh.ca

Vancouver Island Health Authority (VIHA)

www.viha.ca/mhas/resources/delirium/

Government of Canada Seniors Website

www.canada.ca/seniors

This is Not My Mom

www.thisisnotmymom.ca

Advance Care Planning

<http://www.advancecareplanning.ca/resource-library>