



## What is delirium?

Delirium is a sudden and severe change in brain function that causes a person to appear confused or disoriented, or to have difficulties maintaining focus, thinking clearly, and remembering recent events, typically with a fluctuating course. It has a high mortality rate and requires prompt investigation and supportive care.

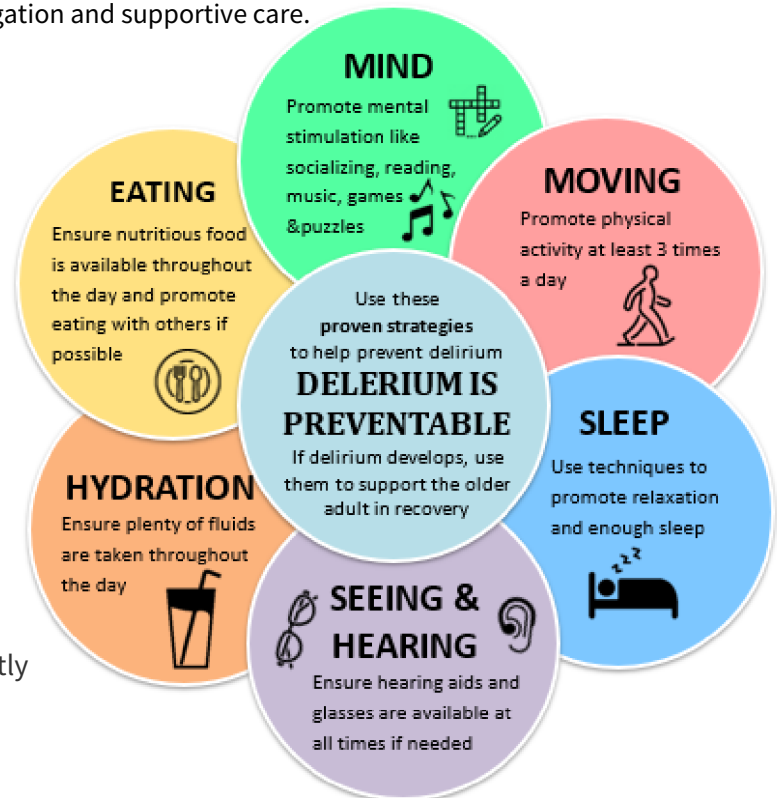
## Risk factors

Delirium usually has a multifactorial cause.

- advanced age
- medications
- malnutrition
- immobility
- acute illness
- pain
- sleep deprivation
- sensory overload or sensory deprivation
- dehydration
- cognitive impairment

## Hypo, Hyper or Mixed

Delirium can be hyperactive where one is mostly restless and agitated, hypoactive where one is mostly drowsy and inactive or a mix of both. Hypoactive delirium is often left undiagnosed and mistaken for dementia or depression.



## Assessment – CAM (Confusion Assessment Method)

**Early identification of delirium allows for care planning and intervention to start immediately to prevent prolonged hospital stays and poor outcomes.**

Answer these four questions:

- 1) Was the onset acute and does behaviour fluctuate? AND
- 2) Is there evidence of inattention? (difficulty focusing attention, shifting and keeping track)
- 3) Is there evidence of disorganized thinking? (incoherent, rambling, illogical flow of ideas)
- 4) Is there altered level of consciousness? (i.e. any state other than alert) (Alterations include hyperalert, lethargic, stuporous and comatose)

**AND EITHER  
OR**

**Features 1 and 2, and either 3 or 4 are required for a diagnosis of delirium**

## Treatment

Treatment involves identifying the cause and treating it when possible, and good supportive care as shown in the prevention graphic. Benzodiazepines should be avoided.



Up to 50% of all hospitalized patients will experience a delirium. Up to 30% of delirium cases can be prevented. It is often misdiagnosed or not detected.

Knowing a person's baseline cognition and function is essential for identifying delirium as it is an acute change unless dementia. It can take months for delirium to clear and may have residual effects.

Please refer to the [WRHA CPG on delirium](#) for practice guidance