

Delirium in the Intensive Care Unit

QE II

Delirium in the ICU

- About 2 out of 3 patients in the Intensive Care Unit (ICU) will get delirium.
- About 7 out of 10 patients will get delirium while using a ventilator (breathing machine) or shortly after using one.

What is delirium?

- Delirium is a medical condition that causes problems with thinking and understanding.
- It starts fast and usually goes away in a few days or weeks.
- Each person is different, but most people with delirium:
 - › are not suffering.
 - › will not remember the experience.

What increases the risk of delirium?

- › Infection
- › Other health conditions
- › Severe (very bad) illness
- › Medications
- › Suddenly stopping certain drugs, alcohol, or tobacco

- › Having surgery, especially if the person had sedation (medication to help you relax and fall asleep)
- › Being in a place that is not familiar, like in a hospital

What are the symptoms?

- › Being confused or forgetful, not able to think clearly
 - › Being less able to focus or understand
 - › Not knowing the right time and place, or understanding what is happening around them
 - › Slow or slurred speech
 - › Changes in behaviour
 - › Being very tired
 - › Seeing, hearing, or feeling things that are not real. These are called hallucinations.
 - › Sudden changes in emotions (like feeling sad, angry, upset, anxious)
 - › Being restless, agitated (upset), or withdrawn
 - › Not trusting others
- A person with delirium may have some or all of these symptoms. Symptoms are often worse at night.

Is delirium the same as dementia?

- No, delirium is **not** the same as dementia. Delirium happens suddenly, while dementia happens more slowly, over time.
- People with dementia have a higher risk of getting delirium when they are sick.

Is delirium a mental illness?

- No, delirium is **not** a mental illness, but some symptoms can be similar.

What can I do to support someone with delirium?

- Be calm.
 - › **Do not** argue or try to tell them they are wrong.
 - › **Do not** quiz, test, or challenge them.
- Comfort and support them.
- Talk slowly and clearly. Use simple words and talk about familiar topics.
 - › For example, talk about their family or friends.
- Remind them of the day, date, and where they are.

- Create a calm environment. Things like lights, electronics, noise, and visits from people may upset them. You may wish to:
 - › play soothing music.
 - › give them something soothing to hold, like a blanket.
- Bring familiar items from home.
 - › For example, a family photo, a calendar, or other personal items to decorate their room.
- Make sure they have their hearing aids and glasses on, if needed.
- Encourage them to rest.

Tell a member of the health care team if you see:

- › they are in pain or are not comfortable.
- › they are restless or their behaviour changes.

What will the health care team do?

- If your loved one has symptoms of delirium, their health care team will carefully assess them. Each day, at rounds, the team will talk about ways to prevent and lower your loved one's symptoms. They will:
 - › Review their medications
 - › Order tests to confirm their care needs
 - › Check for and treat pain
 - › Make sure they are eating and drinking well
 - › Support them to move when it is safe to do so
 - › Reorient them. For example, reminding them of the date and where they are
 - › Keep them on a day and night schedule. For example, by keeping bright lights on during the day and dimming lights at night
- If you have questions or concerns, please talk to your loved one's health care team.

For more information:

Critical Illness, Brain Dysfunction, and Survivorship (CIBS) Center

- › www.icudelirium.org/patients-and-families/overview

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Notes:

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