Doncaster Virtual Ward

NHS
Doncaster and Bassetlaw Teaching Hospitals
NHS Foundation Trust

Delirium

A guide for Patient's, Relatives and Carers



We care

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Delirium

Delirium is a sudden change in mental state, which may be confusion, agitation, personality change, and difficulties with understanding and memory. A patient who is delirious is often experiencing a world that makes no sense to us but is very real to them. Delirium can change quickly, one minute you can be having an ordinary conversation and the next minute they can be saying something that makes no sense.

A person with delirium may:

- Find it difficult to follow a conversation and may be easily distracted
- Have vivid dreams or hallucinations, which may also be frightening and upsetting
- Become agitated and paranoid and need a lot of reassurance
- Become sleepy and slow, and may appear withdrawn
- Be confused at sometimes more than others, especially at night.

Please notify a member of staff if you notice a change in your relatives or friends behaviour.

How common is it?

About 1 in 10 people in hospital have a period of delirium.

Who gets delirium?

Anyone can get delirium if their illness is serious enough. Older frail patients, those with dementia and patients with poor hearing or eyesight are more likely to develop delirium.

Common medical causes:

- Infection
- Medications Surgery Pain
- Constipation
- Malnutrition and dehydration.

How long is it going to last?

Everyone is different some recover in hours others days or weeks. However people with dementia or head injuries may take longer to get better and may not fully recover from a delirious episode. You are also more prone to delirium if the patient has already experienced a previous episode.

It is important to inform staff on admission if there has been a previous delirious episode.

How is delirium treated?

If delirium is suspected tests will be carried out to look for positive causes. For example blood tests, urine tests, a heart tracing (ECG) and x-rays. **If indicated a CT head.**

Treating the underlying cause treats the delirium. Staff will also implement a delirium tool known by the acronym TIME AND SPACE

T	**toilet**	**A**	**anxiety/depression**	**S**	**sleep**
I	**infection**	**N**	**nutrition/dehydration**	**P**	**pain**
M	**medication**	**D**	**disorientation**	**A**	**alcohol/drugs**
E	**electrolytes**			**C**	**constipation**
				E	**environment**

Very occasionally sedatives are used. However on some occasions this could make confusion worse and should only be used for:

- **Essential investigation or treatment**
- **Prevent harm.**

They should be used for a short time and have regular review.

How can you help?

Whilst it can be frightening and upsetting for you to see your loved one confused and agitated it is important to stay calm.

- Discuss with staff as much background information as you can
- Reassure your relative
- Talk in short simple sentences, talk about familiar topics
- Gently remind them where they are, the date, time and why they are in hospital
- Bring in their own calendar and small clock
- Make sure they have their usual glasses and hearing aids, dentures and encourage them to wear them

- Encourage them to eat and drink, give assistance if necessary Bring in familiar photos from home
- Ensure they have clothing to be able to get dressed in the day
- Avoid over stimulation but keeping them occupied with simple activities can help.

How can we help?

Ward staff will follow the delirium guidelines to try and establish and treat the underlying cause. We have a holistic care team within our trust and a referral may be initiated by the ward for advice.
Ask the Nurse in Charge about additional visiting.
If you would like to speak to the holistic care team please email for the Holistic Care Team is dbth.holisticcareteam@nhs.net

Moving on…

Following discharge you may feel your relative/friend has little memory of what has happened to them in hospital and they may find this distressing. You can help by explaining the events of their hospital admission. You may find that they require further help from their GP on discharge.

For more information:

- National Institute for Health and Care Excellence Guideline 103 www.nice.org.uk
- TIME AND SPACE Yorkshire and Humber Clinical Networks http://www.yhcn.nhs.uk/

Patient Advice & Liaison Service (PALS)

The team are available to help with any concerns, complaints or questions you may have about your experience at the Trust. Their office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email.

The contact details are:

Telephone: 01302 642764 or 0800 028 8059
Email: dbth.pals.dbh@nhs.net