

A guide to understanding delirium

You may find this leaflet helpful if:

- you have experienced delirium
- you know someone with delirium
- you are looking after someone with delirium.

What is delirium?

Delirium is a state of mental confusion that can happen if you become unwell. It is also known as an 'acute confusional state'.

Illness, surgery and medications can all cause delirium. It often starts suddenly, but usually improves when the condition causing it gets better. It can be frightening – not only for the person who is unwell, but also for those around them.

It is very common to develop delirium on top of another already diagnosed condition that may cause confusion such as dementia.

Delirium can affect 20 in 100 to 30 in 100 people on medical wards and 10 in 100 to 50 in 100 of people having surgery.

What is it like to have delirium?

You may:

- be less aware of what is going on around you
- be unsure about where you are or what you are doing.

Some people may:

- be unable to follow a conversation or to speak clearly
- have vivid dreams, which are often frightening and may carry on when you wake up
- hear noises or voices when there is nothing or no one to cause them
- see people or things which aren't there
- worry that other people are trying to harm you
- be very agitated or restless, unable to sit still and wandering about
- be very slow or sleepy
- sleep during the day, but wake up at night
- have moods that change quickly
- be frightened, anxious, depressed or irritable
- be more confused at some times than at others – often in the evening or at night.

Who is at risk of developing delirium?

- Older people – the risk increases with age.
- Older people taking many different sorts of medicines.
- People with dementia.
- People who are dehydrated (loss of water in their body).
- People with an infection.
- Severely ill people.
- People who have had surgery, especially hip surgery.
- People who are nearing the end of their life.
- People with sight or hearing difficulties.
- People who have a temperature or are in pain.
- Older people with constipation or urinary retention.

How can I help someone with delirium?

- Stay calm and reassure them.
- Explain things to them in short simple sentences.
- Check that they have understood you and repeat if necessary.
- Try not to agree with any unusual or incorrect ideas, but tactfully disagree or change the subject. Remind them of what is happening and how they are doing.
- Remind them of the time, place and date and what is happening.
- Make sure they can see a clock or a calendar.
- Try to ensure someone familiar is with them and a light is on. This is often most important during the evening, when delirium often gets worse. If they are in hospital, bring in some familiar objects from home.
- Make sure they wear their glasses and hearing aid.
- Help them to eat and drink.
- Have a light on at night so that they can see where they are if they wake up.

Delirium is distressing for everyone, but once the underlying cause for this severe confusion has been treated, the distressing symptoms will usually improve.

Some people may still be a little more confused or less able than usual to carry out their daily tasks when they leave the hospital, and in a small number of cases, the symptoms do not completely go away. When planning for a person to leave hospital, the team will arrange a follow-up appointment for them and ensure they receive the right level of support including rehabilitation. Most people will slowly get better, but if you are concerned, please speak to your GP.

We encourage patients, relatives and carers to talk openly about their experiences following delirium as this may help to speed up the patient's recovery.

If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

We try to ensure that all our information given to patients is accurate, balanced and based on the most up-to-date scientific evidence. If you would like to have details about the sources used please contact **patient.information@christie.nhs.uk**

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