

Delirium in the ICU

Information for patients in
 Critical Care and their families



What is delirium?

- A reversible state that causes a patient to quickly become confused
- Can cause a patient to have trouble paying attention, thinking clearly, and knowing what is going on around them
- May cause patients to see or hear things that are not there, but these things seem very real, and are often scary to the patient

Is delirium common in ICU?

- About 2 out of 3 patients in ICUs will have delirium
- About 7 out of 10 patients on a breathing machine will have delirium

What causes delirium?

- A change in the way the brain works due to:
 - less oxygen to the brain
 - certain medications
 - lack of fluids
 - infection
 - severe pain
 - liquor (alcohol), nicotine, or pain killers

Is delirium the same as dementia?

- No.
- Delirium often comes on quickly (hours or days) and often clears up quickly (a few days to a week)
- Dementia can be a lasting state that comes on over months or even years
- Sometimes, patients who have delirium will have dementia-like thinking problems that may last for months after they leave the hospital

Content adapted and modified with permissions from:

- "Delirium: Information for Patients Families and Friends" (2016). University Health Network Patient Education and Engagement.
- "Delirium in the Intensive Care Unit: A Guide for Families and Patients" (2010). Vanderbilt University. www.ICUDelirium.org

What does delirium look like?

Patients may:

- be confused, restless, very quiet, violent (aggressive) or fearful
- use bad (swear) words
- be unable to follow directions
- be unsure about where they are
- be unsure about the date or time of day
- see or hear things that are not there
- think or believe things which are not real
- have changes in sleep habits
- have movements that are not normal
- forget things
- seem to no longer act or look like themselves

How is delirium stopped and fixed?

- Patients are screened in Horizon's ICUs for signs of delirium
- We focus on keeping the patient safe and calm
- We work to find the causes of delirium including:
 - reviewing and changing medications
 - treating infections
 - treating low oxygen levels
 - fixing chemical in the body
 - treating low fluids

How can you help?

- Speak slow and use simple words or phrases
- Remind the patient of the day and date and time
- Talk about things like family members and friends
- Bring patient's glasses and/or hearing aids
- Remind the patient of home with pictures and/or familiar objects
- Provide the patient with their favourite music or TV shows
- Avoid loud noises, a lot of visitors
- Avoid dark room, bright lights, or complete silence
- If your loved one has delirium, you may be asked to sit and help calm them