Delirium or acute confusion

What can we do to help?

Promote healthy rest and sleep
- reduce noise and distractions
- keep light low or off - reduce unnecessary lighting during rest periods
- add comfort with a pillow, blanket, warm drink or back rub
- do not use sleeping pills if possible

Promote physical activity
- help with sitting and walking
- talk with your nurse about how you can help with exercises and safe activities
- avoid use of restraints

Promote hydration and healthy eating, after checking with staff
- encourage and help with eating
- offer fluids often

Promote healthy hearing
- encourage the wearing of hearing aids and amplifiers when needed
- make sure hearing aids are working, if in doubt, talk with the speech or hearing specialist

Promote healthy vision
- encourage the use of glasses and keep them clean
- use enough light
- consider a magnifying glass or an eye exam

Promote mental stimulation
- arrange for familiar people to visit often
- talk about current events and surroundings
- read out loud; try a large print or talking book

Learning about ...

Delirium or Acute Confusion

“My family member is not like this at home.”

“My family member is not like this at home,” is what many of our families say about their parent or loved one when experiencing delirium or acute confusion.

What is delirium?

Delirium is a sudden confused state of mind. It is sometimes called acute confusion. It may occur during an illness or after an operation.
What does delirium look like?

People with delirium can act confused and may:

- have trouble paying attention
- be restless and upset
- slur their speech
- not make any sense
- see and hear imaginary things
- mix up days and nights
- drift between sleep and wakefullness
- be forgetful
- have trouble concentrating
- be more alert than normal
- not know where they are
- have trouble staying awake
- sometimes be confused and then suddenly okay

What causes delirium?

Some of the causes of delirium are medications, infection and being in the hospital. Your family member is more likely to get delirium if he or she has any of these conditions:

- memory or thinking problems
- severe illness
- dehydration
- problems with seeing and hearing

How is delirium treated?

The cause of the delirium needs to be figured out before treatment begins. This usually means doing some tests and asking questions. Treatment may include a small amount of medication. There are also many other things you can do to help your family member. Please read the back page of this handout and talk with your health care provider about what you can do.

Will my family member return to normal?

Delirium often clears in a few days or weeks in many people. Some may not respond to treatment for many weeks. Others do not fully return to their normal selves. You may see some problems with memory and thinking that do not go away. Each person is different. Please talk with your health care provider about your family member or loved one.

You may want to ask your health care provider these questions:

- What is causing the delirium?
- How long will it last?
- Will my family member get better?
- How can we prevent it from happening again?
- Should changes be made in living arrangements?
- How can we as a family help?
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