



Geriatric Fast Facts

Topic: Delirium vs. Dementia*

<i>Delirium</i>	<i>Dementia</i>
Sudden onset	Usually gradual onset
Often reversible with treatment	Slowly progressive
Short duration (days to weeks)	Long duration (years)
Fluctuations (over minutes or hours)	Good days, bad days
Altered level of consciousness	Normal level of consciousness
Variable disorientation	Disorientation to time and place
Obvious inattention	Shorter attention span in late stages
Typically associated with drug use, withdrawal or acute illness	Typically, no association with drug use or acute illness
Impaired but variable memory	Memory loss, especially for recent events (short term memory)
Usually slow, incoherent, inappropriate language	Possible word finding difficulty
Almost always worse at night	Often worse at night
Disorganized delusions, illusions, hallucinations (mostly visual)	Delusions of people stealing things are common, possible hallucinations in later stages
Impaired psychomotor activity (increased, reduced or unpredictable and fluctuating)	Psychomotor activity is usually normal until later stages

***Dementia may co-exist with Delirium**