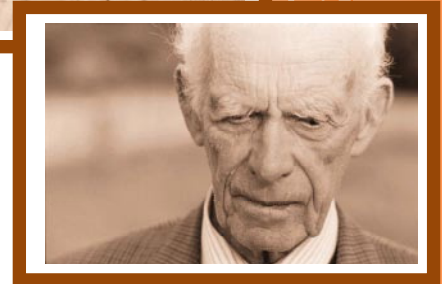
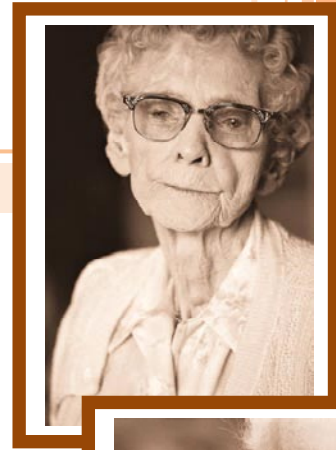


PRIMARY CARE OLDER ADULT DELIRIUM – Quick Facts



More than just a confused older person

- Delirium is a **common condition** affecting ill older people, especially those with some degree of dementia
- Delirium is a **medical emergency** which is an acute and fluctuating onset of confusion, disturbances in attention, disorganized thinking and/or decline in level of consciousness
 - Presentation can vary from hyperactive to hypoactive to mixed
- It's the most common **complication** of hospital admission for older people, prevalence ...
 - Lowest rates in community, about 1%
 - Hospitalized, about 7-38% (emergency department 24%)
 - Long-term care, about 64%
- The **recognition** of delirium rests solely on clinical skills as no diagnostic tests exist
 - It's undiagnosed in over half of older people with the condition (i.e., 32-70%)
 - Obtaining the history of the clinical course of any cognitive changes from a family member or caregiver is **KEY** to recognizing delirium
- **Suspect** Delirium:
 - When older people have ACUTE changes in behaviour or cognition
 - **Consider** – all older people presenting with confusion as having delirium until proven otherwise
- Delirium has very **serious complications**, including:
 - Prolonged hospital stays
 - Increased discharge mortality
 - Progressive physical and cognitive decline
 - Persistence of delirium symptoms
 - Admission to long-term care
 - Uncomfortable experience of recollection of delirium experience
- **Be aware** that the health care system can unintentionally stimulate or aggravate the development of delirium in older people
- **Remember:** delirium is frightening for the person experiencing it

References and Resources: www.rgpc.ca or www.viha.ca