How you can help care for a person with delirium

It can be reassuring for a person with delirium to see and hear familiar people.

- Help reorient them by telling them where they are, who they are, and who you are.
- Place a clock, calendar and personal objects where they can see them.
- Help them put on their glasses and hearing aids.
- Check that their hearing aids are working and make sure they have their dentures.
- Keep noise and visitors to a minimum.
- Ideally, keep their room light during the day with curtains open, and dark at night.
- Provide familiar items, such as family photos, comforters, blankets and sleepwear.

Questions?

If you have any questions, please speak with a member of your care team.

www.bruyere.org

Resource
Canadian Virtual Hospice
http://bit.ly/2dFlXUT

Word list

Delirium is common. It is a disturbance in brain function that can happen when a person is medically unwell. Delirium is a state of confusion that comes on very suddenly. This is why delirium is sometimes called an "acute confusional state" or "acute brain failure". Delirium usually improves after days or weeks, but can go on for longer.

Delirium is not the same as dementia, but both delirium and dementia can exist in a person at the same time.

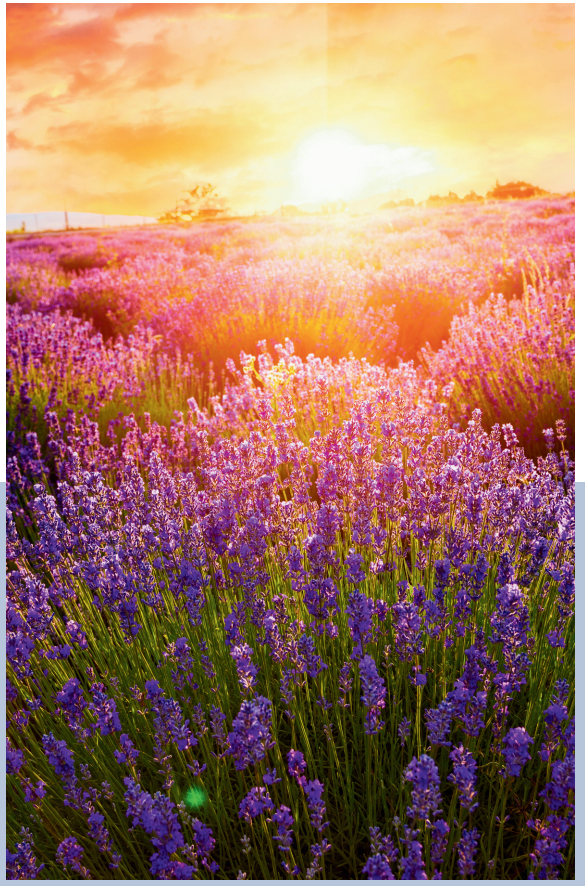
Dementia is a disorder that also affects the brain. Dementia is more common in older people. It develops slowly over months and is a permanent condition. People with dementia can have memory loss and difficulties with thinking, problem-solving or language, as well as changes in behaviour.

Hallucinations are seeing, feeling or hearing something that is not there. Hallucinations can seem very real to the person experiencing them.

Delusions are to strongly believe something that is not true. Delusions are false beliefs.

Completed with support from the Bruyère Health Academic Medical Organization. 2025.

Santé Bruyère Health



Delirium

Information for palliative care patients and their families

What is delirium?

When a person is very sick, many changes in their body can cause a disturbance in brain function called delirium. In a short period of time (days, hours or even minutes) the person may become confused and have a hard time thinking clearly or focusing on tasks or conversations.

Symptoms of delirium may change throughout the day. Many patients with a severe illness, including palliative care patients, may experience delirium.

Older frail people and people who have dementia are more likely to develop delirium. People who have had delirium in the past have a higher risk of developing delirium again.

Causes of delirium

- Often there is more than one cause contributing to the development of a person's delirium.
- Sometimes the cause of the delirium cannot be found.
- Common causes include medications and infections (such as chest or urine infection).
- Some causes of delirium are easier to reverse than other causes.

Signs and symptoms

People with delirium may:

- become quiet, withdrawn and sleepy, very restless and agitated, or aggressive
- wake up more often in the night and sleep more during the day
- experience hallucinations (seeing, feeling or hearing something that is not there) or delusions (strongly believing something that is not true)

If you feel more confused, restless or frightened, or are seeing things that are not there, let the care team know.

Family or friends should also inform the care team if they notice that the person seems more confused or if something seems not quite right with them.

Management of delirium

Delirium is a serious problem which should be addressed quickly. The care team will work to reduce the symptoms of delirium and depending on a person's goals of care, investigate and treat the underlying cause(s).

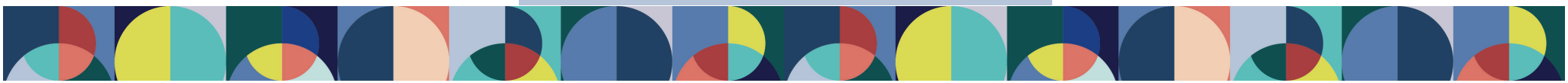
Depending on the cause of the delirium, the care team may adjust your current medications in addition to starting new ones. Medications may be used to help reduce hallucinations and agitation that you may be experiencing.

Experiencing delirium

Being in a delirious state is like dreaming while awake. This can be a pleasant dream or more like a nightmare. People may have many different feelings during their delirium, some of which can be frightening.

Many people remember being delirious. You may find it helpful to talk to your care team about your experience.

How to communicate with a person with delirium

A person with delirium may have a hard time understanding what people are saying and feel that they are not being understood. To optimize communication:

- Face the person when speaking to them.
- Use a calming voice.
- Speak slowly and in short simple sentences.
- Present one idea at a time.
- If needed, repeat what you've said;
- Avoid contradicting the person. Instead, accept what they say and use distraction to shift their attention to something else.
- Do not make quick movements or gestures as these may be misinterpreted as aggressive.
- If the person is distressed by touch, then comfort and redirect them verbally instead.