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Northern Health Palliative Care

Delirium – Tips for Personal Support Workers

WHAT IS DELIRIUM?

Delirium is a physical state when the brain cannot send or receive information correctly. Many of the physical changes of a dying person can cause delirium:

- Infection, fever
- Dehydration
- Medication side effects
- Constipation
- Electrolyte imbalance

WHAT MIGHT YOU OBSERVE IN DELIRIUM?

Sudden changes in person’s cognition & behaviours:

- Difficulty focusing, paying attention
- Difficulty communicating thoughts & needs
- Difficulty reasoning or problem solving
- Difficulty remembering or sorting out
- Disturbed sleep-wake cycle
- Fear, paranoia

HOW MIGHT YOU IDENTIFY DELIRIUM?

Confusion **A**ssessment **M**ethod is a screening tool developed to identify delirium:

1. Acute onset and fluctuating course, and
2. Inattention, and
3. Disorganized thinking, **or**
4. Altered level of consciousness

PREVENTION IS MORE POWERFUL THAN TREATMENT	SUPPORT MEASURES DURING DELIRIUM	SUPPORT MEASURES WHEN DELIRIUM STOPS
<ul style="list-style-type: none"> • Be alert for early signs of delirium • Report and record: <ul style="list-style-type: none"> ❖ Delirium episode ❖ History of delirium ❖ History of traumatic themes • Provide a quiet, familiar, safe environment • Maintain person’s daily routines • Support consistent staffing • Offer liquids, especially when receiving opioids 	<ul style="list-style-type: none"> • Personal safety – avoid physical restraints • Emotional safety – presence of family / companion • Orient the person to reality • Reassurance • Support during hallucinations • Arrange for spiritual support • Coach through relaxation 	<p>Support for the family:</p> <ul style="list-style-type: none"> • Recognize family’s anticipatory grief of loss • Listen to their concerns • Provide reassurance – their loved one is not ‘crazy’ • Provide space for rest • Provide comfort items, e.g. warm blankets

Reference: Murray, Katherine (2014) Integrating a Palliative Approach: Essentials for Personal Support Workers. Life and Death Matters Ch. 4H