Delirium in hospital elders: common, recognized, and undiagnosed – a call for a validated screening program

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Background

Delirium is a frequent complication in older patients, causing multiple stress factors and prolonged need of healthcare services. Despite being a robust predictor of morbidity and mortality, most hospitals do not have a standard delirium-screening program.

Purpose

To determine the prevalence of delirium in randomly selected surgical and non-surgical patients. Furthermore, to compare documentation of delirium symptoms with delirium diagnosis (ICD-10) in the patients' medical records.

Method

A point prevalence measurement (24 hours) was conducted at a university hospital in western Norway in March 2018. Patients (N=123) aged ≥ 65 years (52% women), admitted to 14 randomly selected surgical (n=8) and non-surgical (n=6) departments were included. Delirium was assessed using the 4AT and defined as a score of 4+. Delirium sub-types were measured with the Delirium Motor Subtype Scale (DMSS).

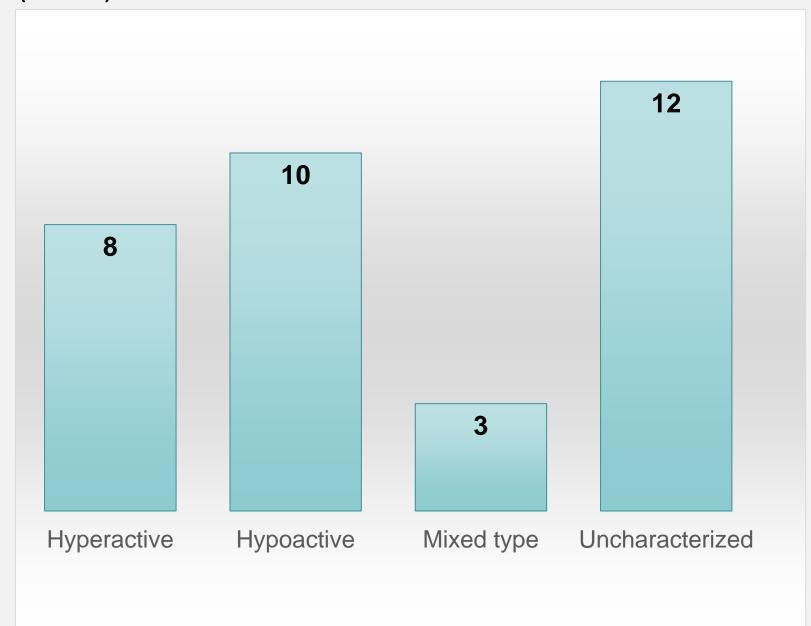
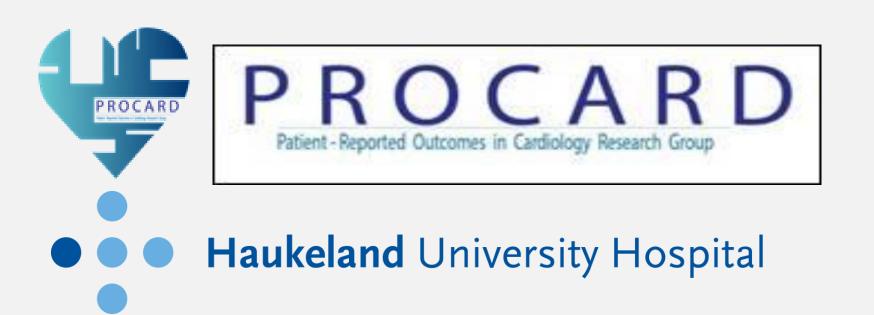


Figure 1. Frequencies of delirium sub-types



Results

Delirium was identified in 33 (27%) of the patients (18 women). Delirium prevalence was associated with age; highest in the age group 85-89 years (n=8, 24%) and lowest in the age group 65-69 (n=2, 6%). Among delirium subtypes, uncharacterized subtype of delirium was most common (n=12, 36%), followed by the hypoactive (n=10, 30%), hyperactive (n=8, 24%) and mixed type (n=3, 9%). The prevalence was highest in The Accident and Emergency Department (n=7, 21%) and the Department of Gastrointestinal Surgery (n=7, 21%). Surprisingly, the lowest prevalence was in the Department of Heart Disease, Section of Cardiothoracic Surgery (0%). ICD-10 code for delirium (F05) was only documented in two medical records (6%), despite descriptions of delirium symptoms by involved healthcare professionals in 23 patients (70%).

	Number of screened patients	Incidence of delirium
The Accident and Emergency	23	7
Department		
Department of Gastrointestinal	24	7
Surgery		
Department of Lung Diseases	21	6
Department of Orthopaedic	17	6
Surgery		
Department of Heart Disease,	16	3
Medical Unit		
Department of Urological Surgery	11	3
Department of Vascular Surgery	5	1
Department of Heart Diseases,	6	0
Surgical Unit		

Table 1. Incidence of delirium related to departments

Conclusion

The point prevalence measurement found that one fourth of the screened patients tested positive for delirium the indexed day. The high prevalence of detected delirium in addition to scarce journal documentation highlight the need for a validated screening program in hospital patient care.

The authors have no conflict of interest to declare irene.instenes@helse-bergen.no