

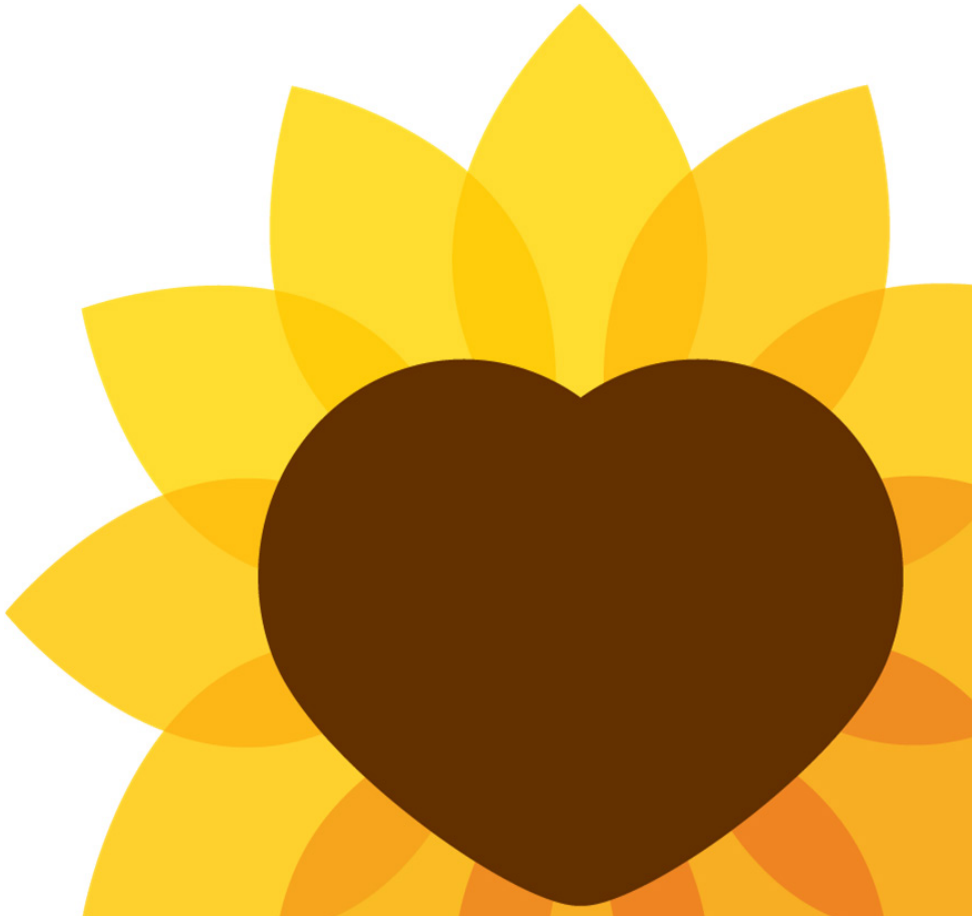


**East Cheshire
Hospice**

Where people come to live

Delirium in the Last Hours or Days of Life

Information for patients and those
important to them



What is delirium?

Delirium is an episode of confusion that occurs over a period of hours or days. It is caused by a physical illness and is different to the confusion that occurs in people who have conditions such as dementia, which can develop slowly over years.

We know that delirium is very common in people who are extremely unwell and may be nearing the end of their lives. Up to 85% of people may experience delirium in the last hours or days of their life.

Symptoms of delirium

As well as confusion, the person with delirium may experience a number of other symptoms including

- Agitation and restlessness
- Increased drowsiness or sleepiness in the day
- Disturbed sleep at night
- Hallucinations (seeing or hearing imaginary things)
- Delusions (false beliefs)
- Poor concentration
- Reduced ability to move about or look after oneself
- New or increased fears and anxieties
- Low mood and lack of interest
- Change in personality

The symptoms of delirium can fluctuate throughout the day and night. For instance, many people experience worsening confusion and other symptoms towards the evening and at night, with some improvement noted during the daytime.

Why do people experience delirium?

A person nearing the end of their life may have a number of reasons for developing delirium. In many cases there is no single reason and it may be a combination of some of the causes listed below combined with the fact that they are becoming increasingly unwell due to their underlying illness:

- Infections
- Certain medications such as some painkillers
- Heart, lung or kidney problems
- Abnormalities to the chemistry of the blood
- Constipation
- Difficulties emptying the bladder
- Poor fluid intake
- Withdrawal from certain medications or other substances such as alcohol or nicotine

The Hospice clinical team looking after the person experiencing delirium will make careful assessments of them to identify and treat these potential causes. Even if a reason is suspected or found, it may not always be possible to treat this effectively in a person felt to be in the last hours or days of their life. This will always be discussed with the person, if possible, and/or those important to them.

Help with the symptoms of delirium

Looking for and treating any possible reversible causes of the delirium will be an important aspect of treatment. As previously described this may not always be possible, however, there are many interventions that may help reduce the symptoms of delirium. Simple changes that

do not involve medications will always be tried first. These approaches, listed below, can often be made most effective by involving the person experiencing delirium and those important to them:

- Regular contact with familiar people is very important in order to help the person feel calm and orientated.
- A well lit environment
- Access to calendars and clocks
- Relieving boredom i.e. keeping up with known enjoyable activities such as reading, crosswords, drawing, radio and TV programmes, familiar music
- Ensuring hearing aids/spectacles are present and functional
- Maintaining normal sleeping patterns i.e. awake during the day and sleeping at night (if appropriate for the individual).
- Calm reassurance if agitation and restlessness are present.

These interventions may be all that is required to improve the state of delirium. However, should the symptoms continue to be distressing the clinical team will consider the use of medications to help relieve such symptoms as hallucinations, restlessness or agitation. The lowest doses needed to help control the symptoms will be used and the reasons for the use of medications will be explained by the clinical team. Occasionally the symptoms can be very challenging to control and may not be fully resolved with the above measures.

Coping with delirium

Delirium can be very frightening for the person affected and for those important to them.

If you are a relative, friend or carer of a person experiencing delirium it may be upsetting to see such changes in a loved one's personality or to see them agitated and confused. At this time it is very common to experience a number of different emotions such as fear, sadness and anger. Please make contact with the clinical team looking after your loved one if you feel this way. You may require advice or ongoing help and support during this difficult time.

Who to contact

If you have any further questions relating to strong opioids or if you are having problems in controlling your pain you should contact the person responsible for your care, such as your GP, Hospice Team or palliative care nurse specialist.

Useful contact numbers

East Cheshire Hospice 24hr Advice line 01625 666999
Hospital Specialist Palliative Care Team 01625 663177
(9am-5pm, Mon to Fri)

GP.....

GP Out of hours.....

District nurses.....

Other.....

For large print, audio, Braille version or translation, contact the Hospice Engagement Team. 01625 666991 or rallcock@echospice.org.uk

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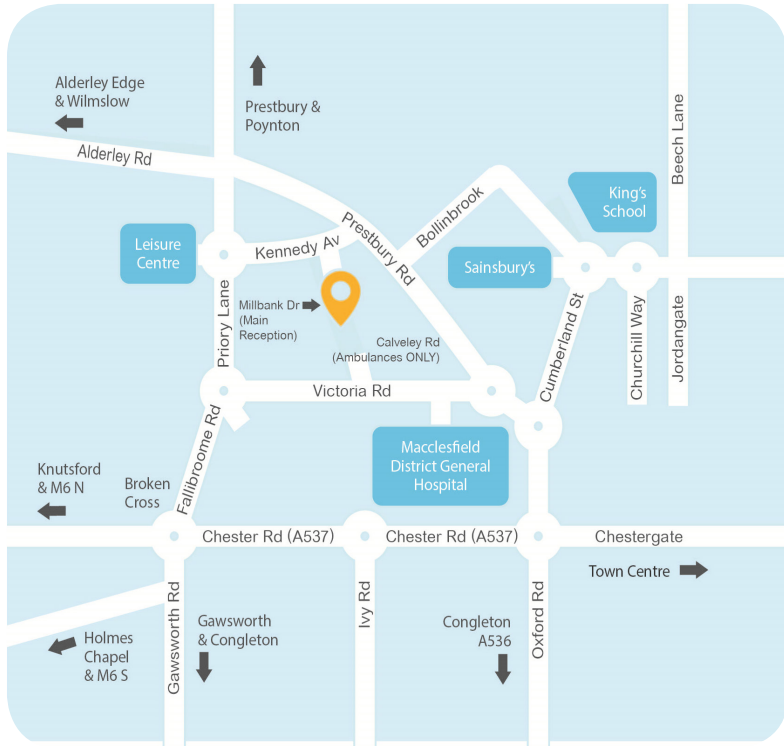
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