

Information for patients and carers

Delirium

Decorative blue wavy lines at the bottom of the page, consisting of three overlapping bands of different shades of blue.

What is delirium?

Delirium is a serious but often treatable condition that can happen suddenly over a couple of days. It is much more common in older people, especially people living with dementia. Delirium can be the first sign that the person is becoming unwell.

Someone with delirium may:

- Be confused (or more confused than usual)
- Be easily distracted
- Be less aware of where they are or what time it is (disorientation)
- Suddenly not being able to do something as well as normal (e.g. walking, washing and dressing or eating)
- Be unable to speak clearly or follow a conversation
- Have sudden swings of mood

There are different types of delirium

Hyperactive delirium

- Restlessness
- Agitation e.g. walking about or pacing
- Struggling to concentrate/focus
- Resistive to care
- Suspicious
- Believing things that are not true
- Seeing and hearing things that are not there

Hypoactive delirium

- Withdrawn, lethargic and tired
- Drowsy
- Difficulties attending/concentrating
- Quiet
- Not moving around as much
- Not eating and drinking as much as usual

Mixed delirium

Mixed delirium is a mixture of both hyperactive and hypoactive delirium with periods of restlessness followed by periods of being withdrawn or drowsy. Symptoms may fluctuate throughout the day or be different from one day to the next.

How long does delirium last?

Delirium can last a few days but, in some cases, it can persist for weeks or even months. Delirium can continue even when all triggers have been addressed.

Unfortunately, not all people recover to the same mental function they had prior to the episode of delirium.

What causes delirium?

Delirium is common, especially among older people in hospital and especially people living with dementia. Common causes include:

- Pain
- Infection
- Poor nutrition (eating) and hydration (drinking)
- Constipation (not pooing) or urinary retention (not weeing)
- Having an operation with general anaesthetic
- Up to 50% of older people who have surgery develop delirium.
- People who have hip surgery are particularly high risk with research suggesting that 70-80% develop delirium
- Physical injury, such as bone fracture or head injury
- The effects of medication
- Abnormal metabolism (e.g. low levels of salts or sugar in the blood)
- Organ failure
- Environment-being in an unfamiliar environment with unfamiliar faces. Busy, loud or cluttered environments
- Not having glasses or hearing aids

Risk factors:

- Having dementia- this is the biggest risk factor for delirium
- Being older than 65
- Being frail and having multiple medical conditions
- Poor hearing or vision
- Being in an unfamiliar environment
- Being sleep deprived
- Not being able to sit up or move around
- Having had delirium in the past

What are the differences between delirium and dementia?

Dementia

- Dementia develops slowly over months and years
- Dementia is a long-term condition that gradually worsens
- Symptoms are usually similar from day to day

Delirium

- Starts suddenly, often within one or two days
- Symptoms can improve quickly with the right treatment
- Symptoms may change a lot throughout the day

How is delirium diagnosed?

It is extremely important that delirium is diagnosed quickly as it can severely impact on the person if it becomes severe and prolonged.

People who know the person best are most likely to notice if the person is not themselves, more confused or acting strangely.

It is very common for delirium to be missed or thought to be something else. Using a screening tool, such as a 4AT (the 4A's test), can help to identify delirium more accurately. This takes around two minutes to complete, the more mistakes the person makes, the more likely it is they have delirium. A healthcare professional can do this test.

Treatment

Delirium is treated by resolving the underlying causes such as infection, dehydration and medication side effects, and providing supportive, non-pharmacological care to manage symptoms.

Key approaches include reorientation, ensuring adequate hydration and nutrition, maintaining a calm environment. Medication for agitation or distress should be used as a last resort.

What can I do to help?

- Ask staff for a 'Forget Me Not' document so you can complete this with information about what is helpful/not helpful for the person
- Creating a calm environment where possible
- Ensuring the person is wearing glasses and/or hearing aids
- Being involved, if possible, to provide familiarity e.g. helping with mealtimes or visiting regularly- open visiting can be offered if this is helpful
- Bringing in familiar items or comfort items
- Bringing activities or things to look at such as magazines, photographs to provide mental stimulation/distraction
- Bringing in own clothing and toiletries to encourage washing, dressing and mobilising which provides a sense of routine, orientation and help people to maintain skills
- Supporting good sleep hygiene- bringing in night clothes to support this
- Keeping active during the daytime

Contact details

Should you require further advice or information please speak to the staff caring for the person in hospital.

Sources of further information

www.lancsteachinghospitals.nhs.uk

www.nhs.uk

www.accessable.co.uk

www.patient.co.uk

www.lancsteachinghospitals.nhs.uk/veteran-aware

<https://bepartofresearch.nihr.ac.uk/>

Dementia UK (2025). *Delirium and dementia: symptoms, causes and treatment*.

Available at: <https://www.dementiauk.org/information-and-support/health-advice/delirium/>

Alzheimer's Society (2026). *Delirium- symptoms, diagnosis and treatment*.

Available at: <https://www.alzheimers.org.uk/get-support/living-with-dementia/delirium>

NHS Inform (2026). *Delirium*.

Available at: <https://www.nhsinform.scot/illnesses-and-conditions/brain-nerves-and-spinal-cord/delirium/>

Advice and support

Age UK Lancashire - 0300 303 1234

Email- advice@ageuklancs.org.uk

Alzheimer's Society- Dementia support 0333 150 3456

Website- <https://www.alzheimers.org.uk/about-us/contact-us>

The Lancashire Carer's Service-03450 138 208 Website-

<https://www.n-compass.org.uk/get-support/carers/the-lancashire-carers-service/>

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patientexperienceandinvolem@LTHTR.nhs.uk

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