

## A message for caregivers

A person with delirium may have trouble understanding what is happening around them, or feel that they are not being understood. This can be a confusing, frightening, unsettling experience for both the person and their family, and can make care at home much more challenging.

It's normal to feel frustrated, irritated, scared, upset or helpless when caring for someone with delirium. It can be very difficult not to take personality changes personally. Keep in mind that properly identifying the cause of delirium, and treating it (if it is possible to do so) may take several days. It's important for you to take breaks and ask for additional help.

Although the person may be thinking or acting in unusual ways, they may be trying to communicate emotional or spiritual experiences or needs. Remember that the essence of the person is still there.

.....  
*"You matter because you are you,  
and you matter to the last moment  
of your life."*

Dame Cicely Saunders  
founder of the modern Hospice movement  
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## For more information

Victoria Hospice supports people through the overwhelming emotions and realities of coping with life-limiting illness, death, and the grief journey.

We're here to help you navigate the end-of-life journey with compassionate care, practical support and helpful resources.

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# Delirium

## Understanding and responding: a palliative approach

## What is delirium?

When someone is very ill, a combination of changes in their body can affect the usual functioning of their brain. This can leave them confused, disoriented, and having a hard time thinking clearly.

Delirium is the medical term for a type of confusion that could have multiple causes:

- unrelieved pain
- trouble with bowel/bladder
- infections or medications
- chemical imbalances that are part of the dying process

Some causes can be treated, especially earlier in an illness, but others cannot.

Delirium involves a sudden change over hours or days. It is not the same as dementia, which develops over months to years. Often family members have a sense the person is somehow not themselves.

**Delirium develops for many people at the end of life and should be addressed quickly. If you or someone you are caring for are feeling newly confused or disoriented, let your health team know so that they can assess and respond according to your goals of care.**

## Signs of delirium

- trouble focusing attention, following conversation
- confused, easily distracted
- feeling “lost” or unsure of where they are, what time it is, or what they need to do
- personality or mood swings that change over the course of the day
  - uncharacteristically quiet, sluggish and sleepy
  - restless, agitated and irritable
  - a mix of the two
- withdrawal from usual activities or supports
- hallucinations – seeing or sensing things others do not
- delusions – strongly believing something that is untrue
- sleep and wake cycles reversed
- wandering
- trouble recognizing people they know; fear or suspicion of new people or routines

## What can be done for delirium?

Depending on where the person is in their illness, and their goals for their care, the health team will work to reduce distressing symptoms, and may also be able to investigate or treat the underlying cause. Here are some practical tips for communicating with someone with delirium:

- face the person when speaking to them, and use a calming voice
- speak slowly and simply, one idea at a time
- remind the person who you are, what time it is, and what you are doing before you do it
- avoid asking a lot of questions
- do not argue with their version of reality even if it makes no sense to you; instead shift their attention to something else
- try to maintain a quiet, calming environment with natural light
- try to maintain known routines and consistency
- make sure they have their glasses and hearing aids if needed
- encourage drinking fluids if able
- offer reassurance such as “I’m here with you,” “you are safe”