

HOW TO PREVENT DELIRIUM

- Get enough calories and fluids.
- Keep the brain active with puzzles, reading, talking about current events or sharing fond memories.
- Use glasses and/or hearing aids.
- Keep good sleep habits.
- Review medicines and doses with your doctor to see if any can lead to delirium.
- Keep the body active by walking or with exercise.

HOW TO HELP YOUR LOVED ONE IF THEY GET DELIRIUM

- Speak calmly and clearly.
- Use simple words and phrases.
- Remind him or her of today's day and date.
- Talk about family and friends.
- Bring his or her glasses or hearing aid and help put them to use.
- Bring familiar items that are reminders of home such as family pictures or favorite objects.
- Play his or her favorite music or TV shows.
- Comfort and soothe.
- Don't argue.
- Sit together.

MY NOTES

WHO CAN HELP?

My doctor:

My nurse:

My social worker:

My occupational therapist:

DELIRIUM IN CANCER CARE

A GUIDE FOR PATIENTS,
FAMILIES AND CAREGIVERS



1500 E. Duarte Road, Duarte, CA 91010
800-826-HOPE (4673)

CityofHope.org



DELIRIUM IN CANCER CARE

WHAT IS DELIRIUM?

Delirium is a state of confusion that can come on all of a sudden. It happens when the brain is temporarily affected by a severe medical problem.

Delirious patients may be confused, forgetful or distracted. They may hallucinate (such as hearing voices or seeing insects in their room) or have false beliefs. This kind of experience can feel very real and, at times, scary.

Delirium usually lasts several hours or days. For elderly patients and those who are very ill, it may last longer.

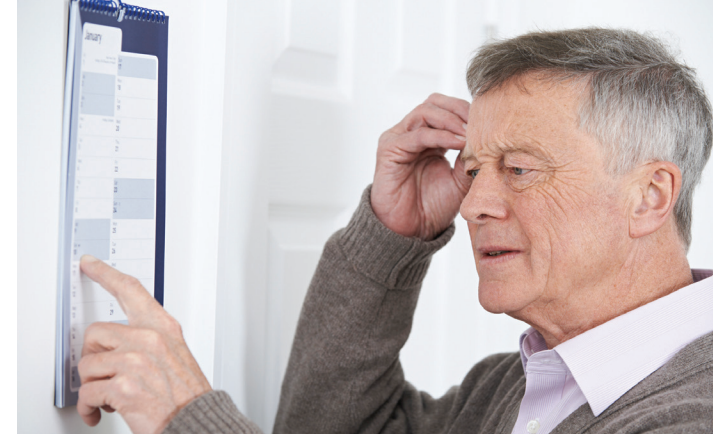
It may continue on and off for a period of time, even after the medical problem is taken care of. It can be scary and stressful for the patient and his or her family if the patient becomes delirious. The family can help by providing comfort and support by staying calm and being kind.

Delirium and dementia are not the same, but they can happen together. Dementia comes on slowly and is an ongoing problem that does not go away. It can also cause confusion, and trouble with memory and day-to-day functioning. Patients with a history of dementia are more likely to become delirious when they have cancer. If someone with dementia gets worse suddenly, it may be the first sign of delirium. Talk to your doctor if you have concerns about dementia.

WHO GETS DELIRIUM?

Patients with one or more of the factors below are more likely to get delirium:

- In the ICU
- Dementia
- Older age (65+)
- Surgery
- Depression
- Poor eyesight or hearing
- Infection
- Heart problems
- On bed rest
- Confusion in the past (previous delirium)
- Multiple medications
- Malnourished (not getting enough food)
- Dehydrated (not getting enough water)
- Use of alcohol and/or sedatives
- Ongoing physical illness
- Drug or alcohol withdrawal
- Functional disability
- Severe pain
- Troubled sleep wake cycle
- High blood pressure



SIGNS TO WATCH FOR

Tell your health care team if you (or your loved one) has any of these changes.

MENTAL CHANGES:

- Extreme confusion (for example, doesn't know where he or she is or what day it is)
- Can't think clearly
- Has trouble focusing
- Does not understand what is going on around him or her
- Uses the wrong words
- Can't follow directions

PHYSICAL CHANGES:

- Sees things that are not there
- Hears sounds that have not been made
- Makes new movements such as shaking or picking at things

EMOTIONAL CHANGES:

- Is suddenly mean or rude
- Becomes very quiet
- Mood changes from good to bad for no reason