

# Nursing Interventions to Prevent Delirium in Elderly Patients

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## INTRODUCTION

- Delirium is a rapid and significant cognitive impairment marked by confusion and disorientation about one's surroundings (1).
- Symptoms, which can be mistaken for dementia, emerge quickly and fluctuate throughout the day, often worsening at night or in unfamiliar environments (2).
- Delirium is common in hospital settings, affecting 18% to 35% of patients and up to 60% in intensive care units. However, experts believe many cases go undiagnosed (3).
- The healthcare literature indicates insufficient awareness of delirium's cognitive impact and gaps in prevention strategies, emphasizing the need for awareness among professionals (4).

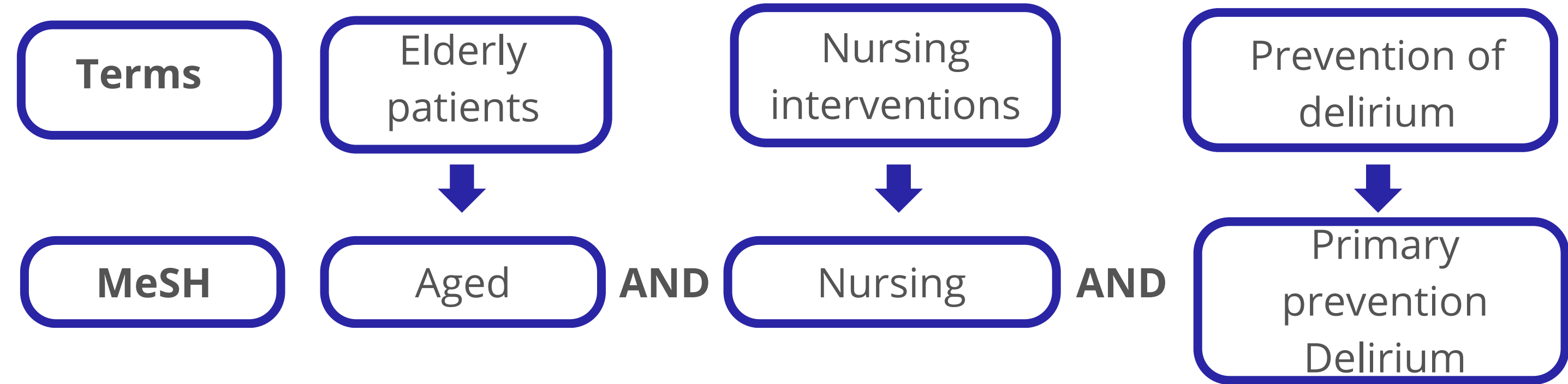
## OBJECTIVE

To identify the appropriate management practices for nursing professionals in preventing delirium among elderly patients

## METHODOLOGY

**Research question:** Which are the nursing interventions to prevent delirium in elderly patients?

**PICo structure:**



**Databases:** PubMed, CINAHL, PsycINFO

**Flowchart:**

**Limits:**



## RESULTS

### NON-PHARMACOLOGICAL TREATMENTS

- Maintaining patient well-being is crucial for delirium prevention, with interventions such as hydration, exercise, reorientation, and a quiet environment (5, 6).
- Health education for patients' families and healthcare professionals significantly reduces delirium incidence. Comprehensive educational interventions for hospital staff, including multifaceted strategies, effectively decrease delirium occurrence (5, 7).
- Accurate nurse assessments of risk factors like age, urinary issues, and alcohol abuse are crucial for preventing delirium as well as the use of The Confusion Assessment Method (CAM) (8).



### PHARMACOLOGICAL TREATMENTS



- Haloperidol is ineffective for delirium prevention, and its use is not recommended due to lack of evidence (9).
- Dexmedetomidine's efficacy is uncertain, with conflicting findings from eight systematic reviews, indicating varying opinions on its use (9).
- Acetaminophen plus dexmedetomidine demonstrates the lowest incidence of delirium, but a personalized approach is favored due to the multifaceted nature of delirium (10).

### HELP PROGRAM

- The HELP program, utilizing dedicated volunteers to enhance elderly patient care in hospitals, effectively prevents delirium and improves outcomes like falls and pressure ulcers (11).
- Mobile certified nursing assistant (CNA) visits focusing on delirium risk factors also prove beneficial in preventing delirium among long-term care elders (12).



## CONCLUSION

- Overall, nurses are essential in preserving patients' cognitive well-being and enhancing their quality of life through proactive delirium prevention measures. Preventing delirium is crucial for patients' cognitive health.
- Early adoption of programs like the HELP program and non-pharmacological approaches have shown effectiveness. Further research is needed to clarify the efficacy of pharmacological interventions.

**IMPLICATIONS:**

**Teaching:** Train professionals to detect risk factors



**Practice:** Increase the use of the HELP program



**Research:** More evidence of pharmacological treatments.



## REFERENCES

