



Delirium and Older Adults

Last reviewed March 2023

Delirium in Older Adults is Associated with Development of New Dementia: A Systematic Review and Meta-Analysis

<https://onlinelibrary.wiley.com/doi/abs/10.1002/gps.5508>

This systematic review examined and critically evaluated the literature regarding the association between delirium and dementia and calculated the odds of developing new dementia after having delirium. (PAID ACCESS)

Delirium Assessment in Critically Ill Older Adults: Considerations During the COVID-19 Pandemic

<https://pubmed.ncbi.nlm.nih.gov/33190768/>

This article discusses practical recommendations for delirium screening in the COVID-19 pandemic era, tips for training healthcare workers in delirium screening, validated tools for detecting delirium in critically ill older adults and approaches to special populations of older adults (i.e., sensory impairment, dementia, and acute neurologic injury). (OPEN ACCESS)

Risk Factors for Delirium in Older Adults in the Emergency Department: A Systematic Review and Meta-Analysis

<https://www.sciencedirect.com/science/article/abs/pii/S0196064421001943>

This systematic review and meta-analysis sought to identify risk factors for delirium in geriatric patients in the emergency department and to identify emergency department (ED)- based modifiable risk factors for developing delirium during hospitalization. (PAID ACCESS)

Delirium in Older Patients With COVID-19 Presenting to the Emergency Department

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2773106>

Delirium is common among older emergency department (ED) patients and is associated with high morbidity and mortality. This study sought to determine how frequently older adults with COVID-19 present to the ED with delirium and their associated hospital outcomes. (PAID ACCESS)

Sleep and Delirium in Older Adults

<https://link.springer.com/article/10.1007/s40675-020-00174-y>

Poor sleep and delirium are common in older patients, but recognition and management are challenging, particularly in the intensive care unit (ICU) setting. This review highlights current research on these conditions, their inter-relationship, measurement modes, and current management approaches. (PAID ACCESS)

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Effect of the Tailored, Family-Involved Hospital Elder Life Program on Postoperative Delirium and Function in Older Adults: A Randomized Clinical Trial

<https://pubmed.ncbi.nlm.nih.gov/31633738/>

This review sought to investigate the effectiveness of the Tailored, Family-Involved Hospital Elder Life Program (t-HELP) for preventing postoperative delirium (POD) and functional decline in older patients after a non-cardiac surgical procedure. (OPEN ACCESS)

A Delirium Prevalence Audit and A Pre and Post Evaluation of An Interprofessional Education Intervention to Increase Staff Knowledge About Delirium in Older Adults

<https://bmcnurs.biomedcentral.com/articles/10.1186/s12912-021-00692-2>

This study aimed to evaluate the knowledge of delirium amongst clinicians caring for patients at high risk of developing delirium and to determine whether education can improve the clinical assessment of delirium. (PAID ACCESS)

PAINT I: The Effect of Art Therapy in Preventing and Managing Delirium Among Hospitalized Older Adults in the PAINT I Study- A Proof -of- Concept Trial

<https://pubmed.ncbi.nlm.nih.gov/36280630/>

This study aimed to determine the effectiveness of art therapy as part of a multicomponent intervention in preventing and managing delirium in hospitalized older patients. (OPEN ACCESS)

Frailty and Delirium in Older Adults: A Systematic Review and Meta-Analysis of the Literature

<https://pubmed.ncbi.nlm.nih.gov/30238970/>

This systematic review and meta-analysis sought to evaluate the relationship between frailty and delirium. (PAID ACCESS)

Risk Factors for Incident Delirium Among Older People in Acute Hospital Medical Units: A Systematic Review and Meta-Analysis

<https://pubmed.ncbi.nlm.nih.gov/24610863/>

This study aimed to synthesize data on risk factors for incident delirium and conduct a meta-analysis of these. These factors help to highlight older acute medical inpatients at risk of developing delirium during their hospital stay. (PAID ACCESS)

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Melatonin for the Prevention of Postoperative Delirium in Older Adults: A Systematic Review and Meta-Analysis

<https://bmcgeriatr.biomedcentral.com/articles/10.1186/s12877-019-1297-6>

Non-pharmacological strategies are recommended for delirium prevention but have limited evidence for decreasing the incidence of delirium. This study aimed to assess whether perioperative melatonin decreases the incidence of delirium in older adults undergoing surgical problems. (PAID ACCESS)

Factors Predicting Incidence of Post-Operative Delirium in Older People Following Hip Fracture Surgery: A Systematic Review and Meta-Analysis

<https://onlinelibrary.wiley.com/doi/10.1002/gps.4655>

This study identified pre- and peri-operative factors associated with developing post-operative delirium following hip fracture surgery. (PAID ACCESS)

Delirium in Elderly Patients: Prospective Prevalence Across Hospital Services

<https://www.sciencedirect.com/science/article/abs/pii/S0163834320301237>

This prospective cohort study aimed to determine the 1-year prevalence of delirium and the impact of hospitalization characteristics on delirium across 34 services. (PAID ACCESS)

Delirium and Long-term Psychopathology Following Surgery in Older Adults

<https://pubmed.ncbi.nlm.nih.gov/35158180/>

The objective of this study was to describe the risk of postoperative delirium and long-term psychopathology (depression, anxiety, or post-traumatic stress syndrome (PTSS)) in older adults. (OPEN ACCESS)

The Inter-relationship Between Delirium and Dementia: The Importance of Delirium Prevention

<https://pubmed.ncbi.nlm.nih.gov/36028563/>

This review explores mechanisms that might be common to both delirium and dementia by reviewing evidence on shared biomarkers and discusses the importance of delirium recognition and prevention in people with dementia. (OPEN ACCESS)

Outcomes of a Delirium Prevention Program in Older Persons After Elective Surgery: A Stepped-Wedge Cluster Randomized Clinical Trial

<https://pubmed.ncbi.nlm.nih.gov/34910080/>

The objective of this study was to examine whether a multifaceted prevention intervention is effective in reducing postoperative delirium incidence and prevalence after various major surgical procedures. (OPEN ACCESS)

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Recent Advances in Preventing and Managing Postoperative Delirium

<https://pubmed.ncbi.nlm.nih.gov/31105934/>

This narrative review sought to examine the current understanding of delirium neurobiology and summarize the present state of prevention and management efforts. (OPEN ACCESS)

Can We Improve Delirium Prevention and Treatment in the Emergency Department? A Systematic Review

<https://pubmed.ncbi.nlm.nih.gov/35274738/>

This systematic review was conducted to evaluate any interventions to prevent incident delirium, or shorten the duration of prevalent delirium, in older adults presenting to the emergency department. (OPEN ACCESS)

Managing Delirium and Agitation in the Older Emergency Department Patient: The ADEPT Tool

<https://pubmed.ncbi.nlm.nih.gov/31563402/>

This study provides background for and explains the importance for emergency physicians to recognize the spectrum of underlying causes of behavioural changes and have the tools to screen older adults for those causes and methods to treat the underlying causes and alleviate their symptoms. (OPEN ACCESS)