

Integrated Literature Review of Delirium in Elderly Patients

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This article provides an integrated review of the literature on delirium in elderly patients; on the basis of this review, the characteristics of elderly delirium can be defined as follows: acute confusion with fluctuating changes in consciousness, orientation, attention, perceptions, emotion, thinking, sleeping patterns, and behaviors, which could develop and disappear in a short period. The related factors of elderly delirium include demographic and physical factors, as well as cognitive, functional, psychosocial, and other factors. Furthermore, scales for assessing elderly delirium include the short portable mental status questionnaire, mini-mental status examination, confusion assessment method-ICU (CAM-ICU), delirium observation screening scale, NEECHAM Confusion Scale, Groningen Frailty Indicator, and Hasegawa's Dementia Scale-Revised. Although the CAM-ICU has the least items and affords the fastest assessment, it lacks the items to measure orientation, perceptions, emotions, sleeping patterns, and behaviors, which are the characteristics of elderly delirium identified in the integrated literature review. Based on the literature review findings, the authors recommend that future studies should develop a comprehensive delirium assessment scale for elderly patients, including the related factors and defining characteristics, thus enabling health care professionals to care for and manage delirium problems effectively and efficiently. Moreover, the authors suggest developing an assessment scale to distinguish between the three problems (delirium, dementia, and depression) and reduce misdiagnosis rates, which would result in reduced hospitalization times, death rates, cost to the health care system, and patients being transferred to nursing homes. Based on the literature review findings, the authors recommend that future studies should develop a comprehensive delirium assessment scale for elderly patients, including the related factors and defining characteristics, thus enabling health care professionals to care for and manage delirium problems effectively and efficiently. Additionally, delirium problems in elderly patients are similar to the symptoms of dementia and depression (Fick et al., 2002; Insel & Badger, 2002; O'Connell & Ski, 2006), which might confuse health care professionals and create further difficulties in caring for elderly patients with 3D (delirium, dementia, depression). Therefore, the authors also suggest developing a 3D assessment scale to distinguish between the three problems and reduce misdiagnosis rates, which would result in reduced hospitalization times, death rates, cost to the health care system, and patients being transferred to nursing homes.

Title:

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Symposium

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References:

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Abstract Summary:

The integrated review of delirium in elderly patients includes definitions of the characteristics, related factors, assessment scales, and consequences of elderly delirium, with major emphasis on the findings from the literature.

Content Outline:

a) The characteristics of elderly delirium can be defined as follows: acute confusion with fluctuating changes in consciousness, orientation, attention, perceptions, emotion, thinking, sleeping patterns, and behaviors, which could develop and disappear in a short period.

b) The related factors of elderly delirium include demographic and physical factors, as well as cognitive, functional, psychosocial, and other factors.

c) Scales for assessing elderly delirium include the short portable mental status questionnaire, mini-mental status examination, confusion assessment method-ICU (CAM-ICU), delirium observation screening scale, NEECHAM Confusion Scale, Groningen Frailty Indicator, and Hasegawa's Dementia Scale-Revised.

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