Study: Patients' Experiences of Delirium

Up to 90 percent of patients in the intensive care unit experience delirium and this can have a profound and lasting impact on them, according to a new study published in the November issue of the *American Journal of Critical Care (AJCC)*. The research aims to improve clinicians’ understanding of delirium and enable them to help their patients address ongoing concerns and emotional strain.

Lead author, Karen Whitehorne MN, RN, CPMHN(c), nurse therapist at Eastern Health, said in an email to *ICU Management*: “Caregivers need to be acutely aware of signs of delirium that can be very subtle. If an ICU patient has altered reality and is paranoid, he or she will try to hide the symptoms. An assessment of mental status that is superficial will not pick up on changes in attention or hallucinations and delusions. Early recognition of the mental status changes of delirium impacts how quickly the medical causes will be found and could save a patient’s life! Delirium may be the first sign of an infectious, cardiac or other event.”

Patients who experienced delirium while being treated in an ICU shared their personal stories of the distorted reality associated with delirium with researchers from Eastern Health in St. John's, Newfoundland, Canada, and the School of Nursing, Memorial University of Newfoundland, Canada.

The researchers’ interviews with these patients (7 men and 3 women, 46 to 70 years old) were held following patient transfer to a medical or surgical unit from intensive care – ie, the patients were no longer delirious and physically and mentally able to willingly participate in the study. Some patients later reviewed the thematic summary of interviews and participated in a follow-up phone conversation, reflecting further upon their experience.

The research team identified four overarching themes based on the participants’ personal perspectives about their experience with delirium:

- “I can’t remember” – The lack of recall about their experience was often accompanied by feelings of guilt and shame about their behaviour while delirious and a wish to apologise for what occurred during the lost time.
- “Wanting to make a connection” – Patients reported feeling disconnected while delirious and unable to communicate or move, leading to frustration and fear.
- “Trying to get it straight” – Participants discussed their struggle to make sense of their experience while delirious, both during and after being in the ICU. Vivid hallucinations and periods of disorientation made it difficult to differentiate between reality and delirium.
- “Fear and safety concerns” – Participants recalled thinking they or their family were in danger while they
were delirious. These feelings of fear were compounded by unusual experiences such as hallucinations, feeling helpless and weak, and being restrained.

**See Also:** Delirium in the ICU Linked to Fatal Outcomes

Whitehorne emphasised the importance of studying the condition: “Delirium puts additional emotional and physical stress on a patient whose health is already compromised, and our findings demonstrate how potentially psychologically harmful ICU delirium can be. The themes and their interrelationships illustrate how the person’s everyday life experiences were distorted while delirious.”

The researchers say critical care nurses are an important element to early recognition and treatment of delirium to positively influence patient outcomes. These nurses can also help patients and families learn about and deal with the psychological effects of the ICU experience.

Connie Barden, RN, MSN, CCRN-E, CCNS, chief clinical officer of the American Association of Critical-Care Nurses (AACN) said in an email to ICU Management: ”Understanding how delirium occurs from the patient’s perspective helps caregivers to not only recognise its presence, but to also intervene more quickly in an attempt to obviate its negative effects. Because of the potential long-term negative effects of delirium as well as the increased risk of mortality that accompanies the condition, caregivers in the ICU have a need to understand delirium – particularly the ‘real life’ experience of it.

**See Also:** Six ICU Patient and Family Info Resources

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Sources: American Association of Critical-Care Nurses; interview  
Image credit: Vanderbilt University Medical Center  
Published on: Wed, 11 Nov 2015