

# Nurse studies delirium in older patients

October 18 2016, by Christopher Allbritton

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One of the most distressing things that can happen after an older family member enters the hospital is that they return ... different. Before, maybe they were calm and happy, but now they act agitated and angry, or withdrawn when they were earlier outgoing. Nina Flanagan, assistant professor of nursing at Binghamton University, has made a career of studying these behavioral changes—usually caused by delirium—in post-acute care, so that long-term health issues might be avoided.

Delirium is "an acute change in [mental status](#) characterized by inattention and fluctuating mental status," Flanagan says. No one is really sure what causes it, but [delirium](#) can occur in 25-80 percent of hospitalized [older adults](#) and can lead to increase in morbidity and mortality. It can also lead to other serious [health issues](#), including dementia.

That's why she has examined the correlation between two different tools to measure delirium: the Confusion Assessment Method (CAM) and the Confusion Assessment Method-Family Assessment Method (FAM-CAM). The CAM, she says, is the "gold standard," but it's limited to the observations of geriatric patients by healthcare professionals. The FAM-CAM is aimed at getting families involved in assessing whether a patient has delirium. "My study was one of the first that looked at the comparison of the family members and the provider," she says.

In the end, Flanagan, a nurse practitioner for more than 25 years, found a strong correlation between the CAM and the FAM-CAM, meaning that family members can play a role in catching delirium early. She published

her findings in two nursing journals in 2015.

It's important for healthcare providers and family members alike to recognize delirium so they can figure out what's causing it, she said, and what can be done to try to limit its duration.

"The longer they stay delirious, the more likely they are to develop dementia," Flanagan says. "In older adults, they have a 12½-fold more likelihood of developing dementia."

What she found while researching her dissertation was that family members will notice subtle things not known or noticed by [healthcare professionals](#). "You really have to rely on the family members or caregiver to give you the picture of what this person is like," she says. "You know, pre-hospital or pre-rehab. What were they like at home? How are they managing?"

The impact of Flanagan's research is that the FAM-CAM can be a starting point in getting a clearer picture of what's happening with the patient. It's also, she says, a way to introduce the topic of delirium and get [family members](#) to understand it.

"I think that's probably the biggest impact, opening a window to some education about what delirium is and how it happens," she says. "You know, as a team, the family and the provider and the patient can all work together to try to make things better. So it's really about that collaboration between the family and nurse."

Provided by Binghamton University

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