Assessment of Delirium, It's Possible Risk Factors and Outcome in Patient Admitted in Medical Intensive Care Unit

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Abstract : Introduction: Delirium is a complex, multifactorial neuropsychiatric syndrome comprising a broad range of cognitive and neurobehavioral symptoms. In critically ill patients, it may develop secondary to multiple predisposing factors. Although it can be transient and irreversible but if left untreated may lead to long term cognitive dysfunction. Early identification and assessment of risk factors usually help in appropriate management of delirium which in turn leads to decreased hospital stay, cost of therapy and mortality. Aim and Objective: Aim of the present study was to estimate the incidence of delirium using a validated scale in medical ICU patients and to determine the associated risk factors and outcomes. Material and Method: A prospective study in an 18-bed medical-intensive care unit (ICU) was undertaken. A total of 357 consecutive patients admitted to ICU for more than 24 hours were assessed. These patients were screened with the help of Confusion Assessment Method for Intensive Care Unit -CAM-ICU, Richmond Agitation and Sedation Scale, Screening Checklist for delirium and APACHE II. Appropiate statistical analysis was done to evaluate the risk factors influencing mortality in delirium. Results: Delirium occurred in 54.6% of 194 patients. Risk of delirium was independently associated with a history of hypertension, diabetes but not with severity of illness APACHE II score. Delirium was linked to longer ICU stay 13.08 \pm 9.6 ver 7.07 \pm 4.98 days, higher ICU mortality (35.8% % vs. 17.0%). Conclusion: Our study concluded that delirium poses a great risk factor in the outcome of the patient and carries high mortality, so a timely intervention helps in addressing these issues.

Keywords: delirium, risk factors, outcome, intervention

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