

Effectiveness of Using Multiple Non-pharmacological Interventions to Prevent Delirium in the Hospitalized Elderly

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Abstract : Delirium is an acute state of confusion, which is mainly the result of the interaction of many factors, including: age>65 years, comorbidity, cognitive function and visual/auditory impairment, dehydration, pain, sleep disorder, pipeline retention, general anesthesia and major surgery... etc. Researches show the prevalence of delirium in hospitalized elderly patients over 50%. If it doesn't improve in time, may cause cognitive decline or impairment, not only prolong the length of hospital stay but also increase mortality. Some studies have shown that multiple nonpharmacological interventions are the most effective and common strategies, which are reorientation, early mobility, promoting sleep and nutritional support (including water intake), could improve or prevent delirium in the hospitalized elderly. In Taiwan, only one research to compare the delirium incidence of the older patients who have received orthopedic surgery between multi-nonpharmacological interventions and general routine care. Therefore, the purpose of this study is to address the prevention or improvement of delirium incidence density in medical hospitalized elderly, provide clinical nurses as a reference for clinical implementation, and develop follow-up related research. This study is a quasi-experimental design using purposive sampling. Samples are from two wards: the geriatric ward and the general medicine ward at a medical center in central Taiwan. The sample size estimated at least 100, and then the data will be collected through a self-administered structured questionnaire, including: demographic and professional evaluation items. Case recruiting from 5/13/2023. The research results will be analyzed by SPSS for Windows 22.0 software, including descriptive statistics and inferential statistics: logistic regression, Generalized Estimating Equation(GEE), multivariate analysis of variance(MANOVA).

Keywords : multiple nonpharmacological interventions, hospitalized elderly, delirium incidence, delirium

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