Prevention of the Post - Intensive Care Syndrome (PICS) by Implementation of an ICU Delirium Prevention Strategy (DPB)

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Abstract: In recent years, it became clear that much intensive care (ICU) survivors develop a post-intensive care syndrome (PICS) consisting of psychiatric, cognitive and physical problems for a prolonged period after their ICU stay. Physical inactivity and delirium during the ICU stay are the main determinants of the post-ICU PICS. This presentation will focus on delirium, its epidemiology, prevalence, effect on outcome, risk factors and the current standard of care for managing delirium. Because ICU delirium is a predictor of prolonged length-of-stay in the ICU and of death, the use of a delirium prevention bundle (DPB) becomes mandatory in every ICU. In this presentation, a DPB bundle will be discussed consisting of six components: pain, sedation, sleep, sensory and intellectual stimulation, early mobilization, and hydration. For every of the six components, what to do and what not to do will be discussed. The author will present his own institutional policy on pharmacological and non-pharmacological interventions in the management of delirium. The component 'early mobilization' will be discussed more in detail, as this component is extremely important in the prevention of delirium as well as in the prevention of the PICS. The author will conclude his presentation with the remaining areas of uncertainties/work and research to be done.

Keywords: delirium, delirium prevention bundle, early mobilisation in intensive care (ICU), post-intensive care syndrome (PICS)

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