

## Delirium Information Sheet

### What is delirium?

Delirium is a change in someone's thinking and behaviour caused by too much stress on the body and the brain. Many factors can cause delirium including infection, fever, head injury, untreated pain, being in an unfamiliar environment, interruptions in sleep patterns and medication side effects and withdrawal. About 1 in 4 infants, toddlers, or children in PICU can become delirious. There are treatments available for delirium, and generally, as the underlying physical condition improves, the confusion lessens and eventually goes away.

### Symptoms of delirium might include:

- Confusion about who and where they are.
- Agitation and restlessness.
- Little desire to interact with other people.
- Difficulty staying alert, paying attention, remembering things or speaking.
- Difficulty recognizing familiar faces.
- Pulling at lines, breathing tubes and wires.
- Being hard to comfort with the usual soothing methods.
- Sudden mood changes.
- Too much energy or being very sleepy.
- Sleeping too little or too much, or sleeping during the day and being awake at night.
- New or different behaviors like aggression, suspiciousness, or being withdrawn
- Talking in a way that doesn't make sense
- Hallucinations, that is, seeing or hearing things not really there.
- Delusions, that is, believing something is happening that is not really happening.

Children might experience delirium in different ways. Symptoms might vary greatly between different patients, for example some children might sleep a lot and be very still, while others might not sleep at all and be very restless. Your child may have delirium for a very short time, or a long while, or the symptoms may come and go. When a child is delirious, they do not act like themselves. It can be very frightening for both you and your child. The good news is that delirium in the ICU is temporary, and your child will not remain this way permanently.

## After PICU

It is common for children who have been in PICU to have strange memories or gaps in their memories from their time there. This tends to be more common in children who have experienced delirium. Memories from the time your child has delirium can be scary for both you and your child. You can help by:

- Reassuring your child that they may not remember everything about their stay in the hospital or the circumstances that led to their admission and that's ok.
- Reassuring your child that vivid dreams and nightmares are common after PICU and that talking to you about them might make them less scary.
- Correcting any false beliefs or memories that your child brings up. For example, if your child talks about things that didn't happen, or seeing things that you know weren't there, you could (a) reassure your child that in the hospital, treatments or medicines can give children funny thoughts sometimes, (b) tell your child that those things did not really happen, and (c) explain in simple facts what actually happened (e.g., you had a tube in your throat to help you breathe, you had some strange dreams, but then you got better and grandma came to visit the next morning). You may need to tell your child several times, but it is very helpful to correct your child's false and scary memories.
- Some children might find it hard to focus or pay attention in the weeks after an episode of delirium. It might be helpful to talk to your child's educators about this, and to ask them to let you know if your child has a hard time at childcare or with their schoolwork. If you have concerns, you can also talk to your children's GP.