Prevalence, symptoms and outcomes of delirium associated with inpatient Parkinson’s disease

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1. Introduction

• Parkinson’s disease (PD) is a complex neurodegenerative disease with a wide range of motor and non-motor symptoms which affects 6.1 million individuals globally. (1, 2)
• Delirium is the acute onset of disturbance in attention, awareness and consciousness with a fluctuating course. (3)
• PD patients have a higher risk of developing delirium. Delirium in PD inpatients (DIPDI) is often associated with adverse outcomes and might increase the risk of dementia and death. (1)
• Delirium may be missed due to overlapping symptoms with PD such as anxiety, hallucinations, delusions, sleep wake disturbance and fluctuating attention. (1)
• This may cause delirium to be poorly recognised, underdiagnosed and undertreated as there is no evidence base as to which assessments should be used in PD. (1)

2. Aims

• To determine which assessments or tests are impaired in DIPDI.
• To classify symptoms associated with delirium including hallucinations, delusions, confusion and sleep disturbance as well as determine their prevalence in DIPDI.
• To determine the prevalence of adverse outcomes associated with DIPDI, including length of stay in hospital, falls and change in package of care.

3. Method

- Invitation letter sent out to PD patients
- Set up electronic notification system
- Recruitment period (4 months)
  • Consented PD inpatients being assessed only once for delirium

4. Results

Aim 1

(b) Memory tests

(a) Attention tests

(c) Orientation Test

(d) Impaired months of year backward

(e) Impaired three stage command

Figure 1: Tests used to assess DIPDI. (a) Attention tests. (b) Memory tests. (c) Orientation test. (d) Impaired months of year backward. (e) Impaired three stage command.

Aim 2

Figure 2: Symptoms of DIPDI.

5. Conclusion

• We identified symptoms and tests which may be useful in detecting DIPDI; this is useful for clinicians to help diagnose and managed DIPDI more effectively and minimise adverse outcomes.
• Prolonged hospital stays might have implication of increase in total hospital costs and risk of contracting hospital acquired disease.
• Future studies could use the findings in this study to inform interventions or clinical trials in delirium in Parkinson’s.

References


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