

The Team may suggest going directly home from the RD&E with support and follow up. This reduces further moves to Community Hospitals which can increase confusion. Often patients with dementia are better in their own home environment and this can reduce the risk of becoming de-skilled and dependent on nursing staff.

What Family, Carers and Friends can do to help:

1. Fill out the Alzheimers Society 'This Is Me' leaflet.
2. Be available to sit with the patient if they are more confused than usual (having a familiar person near them is often extremely reassuring and reduces the need for sedation).
3. Be available to help at mealtimes and also help maintain fluid intake where appropriate.
4. Bring in familiar things and photos
5. When appropriate bring in clothing, shoes and mobility aids such as walking sticks, all marked with the patient's name.

Here to help

We encourage you and your family or carers to raise any concerns or queries with the nurse in charge on the ward at the time.

The Royal Devon and Exeter Hospital has a 'Dementia Steering Group' that provides guidance and monitors hospital care standards for those with dementia and their carers.

The Royal Devon and Exeter **Patient Advice and Liaison Service (PALS)** can provide information and advice and liaise with hospital staff and relevant organisations, where appropriate, to help sort out an immediate problem and find a solution in a confidential and practical way. Call **01392 402093** during office hours.

Care Direct provides information and help for older people, vulnerable adults and their carers. Call **0845 1551 007**.

Alzheimer's Society website: www.alzheimers.org.uk

South West Dementia Partnership website:
www.southwestdementiapartnership.org.uk

Information on dementia and delirium in hospital



This leaflet explains the difference between dementia and acute confusion

Sometimes, when people are admitted to hospital they feel more confused. Increased confusion can be caused by the condition that has brought you into hospital in the first place. It could also be caused by the change in environment, the change in routine and the number of new people you will meet. All these factors can make a person feel more confused. Whilst this acute confusion can be very distressing to you and your family, carers and friends, this type of confusion is not dementia.

Dementia is a term given to people who have chronic (lasting at least six months), significant short term memory loss, disorientation, and inability to carry out day to day functioning. Dementia is usually progressive and although currently there is no cure, how fast it will progress is dependent on the type of dementia and on the individual. There are some drugs which have been developed to reduce the symptoms.

There are three main types of illness which lead to dementia:

Alzheimer's Disease

This is the commonest form of dementia. There is gradual and progressive decrease in cognitive function usually starting off with the loss of short term memory. A person can then develop problems with skilled motor tasks, speech and language, visual processing, and problems organising complex tasks such as paying bills.

Alzheimer's is characterised by microscopic changes within the brain cells consisting of tangles and plaques and cerebral atrophy (shrinkage of the brain).

Treatment for Alzheimer's Disease: Medication such as acetylcholinesterase inhibitors are available for patients with Alzheimer's disease and can sometimes help with memory as well as mood and behavioural symptoms.

Vascular/Multi infarct Dementia

Gradual deterioration of small areas of the brain tissue caused by a lack of blood supply eg a clot (like multiple mini strokes)which affect the person's memory and abilities to carry out day to day functioning. The deterioration may be in steps.

Treatment for vascular dementia: is addressing all cardiovascular risk factors such as controlling blood pressure, high cholesterol, high glucose

suggesting diabetes, stopping smoking and having regular exercise as well as a healthy diet. Anti platelet therapy (eg aspirin) is also indicated in some patients.

Dementia with Lewy Bodies

People with dementia with Lewy Bodies will typically have some symptoms of Alzheimer's and Parkinson's disease. They often experience memory loss, spacial disorientation, communication difficulties, and symptoms of Parkinson's disease such as slowness, muscle stiffness, trembling of the limbs and a tendency to shuffle when walking, loss of facial expression and changes in the strength and tone of the voice. Their abilities tend to fluctuate daily even hourly and they often have falls or funny turns. They also experience visual hallucinations often of people or animals.

Treatment for dementia with Lewy Bodies: Some acetylcholinesterase inhibitors have been shown to improve symptoms.

Delirium (acute confusion)

Acute confusion is most common in patients with dementia but may affect patients with no previous dementia or memory impairment. Another word for acute confusion is delirium which has an abrupt onset and a fluctuating course throughout the day. The person's attention is often impaired and they have disorganised thoughts and misbeliefs as well as hallucinations. They can be extremely agitated or very still. There are many causes of acute confusion which include infection, cardiac illnesses, respiratory disorders, electrolyte imbalance, endocrine disorders, drugs and drug withdrawal, urine retention, constipation, neurological problems, trauma including surgery and change of environment.

While in hospital the medical and nursing teams will try and find out the cause of the acute confusion by doing simple tests which will include blood tests and x-rays.

Sometimes cause of acute confusion is not clear. Acute confusion can last for several weeks. The person will not always make a full recovery. This is why the doctors may ask to follow you up with regards to your memory as not all patients who have an episode of acute confusion go on to develop dementia.