



Delirium in Covid-19. A Single Centre Audit of Incidence of Delirium Among Patients

Presenting with Covid-19 to Beaumont Hospital

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Aims

- To identify the incidence and work-up of Covid-19 associated delirium in patients aged 65 years or older presenting to Beaumont Hospital.
- To compare incidence of delirium with standards set in the JAMA article *“Delirium in Older Patients With Covid-19 Presenting to the Emergency Department”* (Kennedy M et al.).

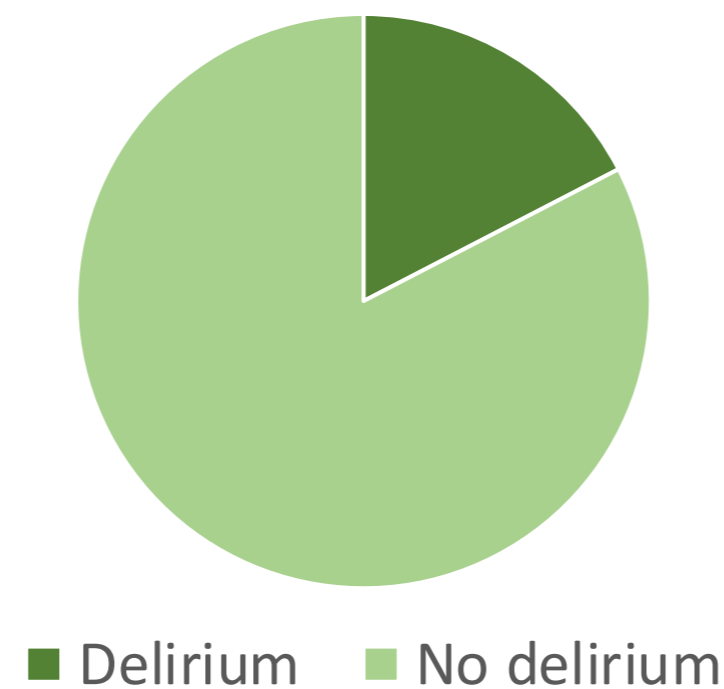
Background

- Delirium is the most common complication of hospitalization in older adults. It is associated with increased mortality and longer hospital stays.
- Recent studies showed delirium to be a common presentation in older adults with Covid-19 and was associated with poor hospital outcomes.

Methods

This is a single centre audit in Beaumont hospital. The participants were all inpatients under the care of the Infectious Diseases team aged 65 or older who tested positive for Covid-19 between January 1st 2021 and March 15th 2021. Data was collected from patients’ medical charts.

Patients presenting with delirium vs no delirium
n = 36



Results

- Overall there were 36 patients included in our cohort. The average age was 80.4.
- 56% were female and 44% male.
- Average length of stay (LOS) was 17 days.
- Delirium was documented as a presenting complaint in 17.4% of cases.
- There were significantly poorer outcomes in the delirium group. 71.4% of patients in the delirium cohort died compared to 7.2% in the no delirium cohort (p=0.0012).
- There was no significant difference in LOS between the delirium cohort and no delirium cohort (13.4 vs 18.07, p=0.373). This must be taken in context given the high mortality rate in the delirium group.

Conclusion

- Results should be viewed with caution due to the small number of patients included.
- However, in our audit, delirium appears to be an extremely poor prognostic indicator for patients aged 65 or older with Covid-19.

