



How delirium is treated

To explain how care treats causes, supports the person and reduces further stress on the brain.

There is no single treatment plan

Care should be chosen for each person. The clinical team should find and treat the likely cause or causes, then review how the person responds.

Treat possible causes

Care may include treating an illness, correcting low oxygen or another problem in the body, relieving pain, managing constipation or difficulty passing urine, and reviewing medicines. Tests and treatments should fit the person, rather than being the same for everyone.

Support the body and brain

- Offer suitable food and fluids, following any swallowing advice or fluid restriction.
- Support safe movement and avoid unnecessary time in bed.
- Make glasses, hearing aids and dentures available when appropriate.
- Reduce avoidable noise and disruption, especially around sleep.
- Use familiar staff, surroundings and routines where possible, and avoid unnecessary moves.

Reduce confusion and distress

Staff and family can explain where the person is and what is happening, using calm and simple language. A clock, calendar and familiar objects may help. If the person is distressed or at risk, staff should first try calm reassurance, simple choices, reducing noise and giving the person space. Decisions about medicines require individual clinical assessment.

Questions families can ask

- What causes are being treated or still investigated?
- What is the plan for pain, fluids, food, movement, sleep, glasses and hearing aids?
- How can family members help safely?
- Has delirium been recorded and communicated to the wider care team?

Urgent action New, sudden confusion at home needs emergency assessment. In the UK, call 999 or go to A&E now and do not drive yourself. If a person already receiving care suddenly worsens, becomes much less responsive or causes immediate concern, alert staff at once. Outside the UK, use your local emergency number or emergency service.

Verified sources

- [NHS: Sudden confusion \(delirium\)](#)
- [NHS inform: Treatment and recovery from delirium](#)
- [NICE CG103: Treating delirium](#)
- [SIGN 157: Risk reduction and management of delirium](#)

Use and review: UK-focused general education. This resource supports but does not replace clinical assessment, individual advice or current local guidance. Prepared from source materials curated by Professor Alasdair MacLulich, University of Edinburgh; AI-assisted production. Professor MacLulich led development of the 4AT and reports no financial interest in its uptake. Final named human clinical approval is required before use in patient care. Independent resource; not an official University of Edinburgh or NHS publication.