# What can we all do to help?

**SPEAK** to your nurse if your loved one is not him or herself.

**REMIND** your loved one often of the day, time and current situation.

**BRING** glasses or hearing aids.

**DECORATE** room with calendars, personal items & family photos.

**TALK** about family, friends & familiar topics.

**WRITE** in an ICU diary. Ask your nurse about our ICU diary program and why it may be helpful.

## **Notes**

# ICU Survivors Peer Support Group

Connect and learn from other patients and family members who have been through the ICU.

We are still learning about ways to both prevent and to treat PICS. Some patients have found that meeting with others who share similar experiences is beneficial. They find it can provide opportunities for participants to gain practical skills and self-care strategies from those ahead of them in the healing process.

## **ICU Survivors Peer Support Group**

When: The third Thursday of every month

6:00-7:15 PM

Where: This group currently meets on Zoom

If you are interested in attending please ask your nurse for more information. You can also email ICUSupport.group@cmc-nh.org to register. Following registration you will be provided with Zoom meeting information.

For more information contact: ICUSupport.group@cmc-nh.org



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# Delirium & Post-Intensive Care Syndrome

A brief guide for patients and families





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## **Delirium**

## Is your loved one confused?

Delirium is common among ICU patients. In fact, two out of three ICU patients develop delirium. Patients on a breathing machine are at higher risk for developing delirium during their ICU stay.

Delirium may begin rapidly or come on gradually. It may come and go quickly or last for days or weeks. Delirium can cause patients to feel frightened, angry, lonely and ashamed.

## Causes of delirium:

- Chemical changes in the brain
- Preexisting illness or current illness
- Unfamiliar surroundings
- Some medications, especially sedatives and pain medicine
- Infections
- Withdrawal from alcohol or nicotine

## People with delirium:

- Cannot think clearly
- Have trouble paying attention
- Have a hard time understanding what is going on around them
- May see or hear things that are not there
- May be withdrawn or agitated

## After the ICU

Leaving the hospital and returning home is a major step in your recovery; however it may take some time to get back to your normal life. Allow yourself enough time to recover fully and take advantage of resources to support you.

## What is Post-Intensive Care Syndrome (PICS)?

Post-intensive care syndrome (PICS) is a collection of symptoms that persist after a patient is discharged from the intensive care unit. PICS can affect the physical, emotional, and psychological well-being of ICU survivors.

### Who is at risk?

Anyone who survives a critical illness that warranted admission to an intensive care unit (ICU) is susceptible to developing post-intensive care syndrome (PICS). The same mental and emotional symptoms of PICS can also affect a patient's family and loved ones who provide care and support during a patient's illness. This condition is called PICS-F.

#### What causes PICS?

Patients receiving care in the ICU are exposed to multiple stressors. Serious medical conditions (such as respiratory failure and sepsis), use of life-sustaining equipment (such as breathing tubes) and use of sedation and pain medicines can all contribute to the development of PICS.

# What are the symptoms?

## Brain (Cognitive)

- Memory difficulties, trouble concentrating
- Trouble organizing and problem solving
- Difficulty completing tasks

## Emotional (Psychological)

- Post-traumatic stress disorder
- Anxiety & depression
- Sleep problems

## Physical

- Muscle weakness and balance problems
- Fatigue
  - Difficulty breathing
  - Pain or numbness

## PICS-F

- Anxiety & depression
- Feeling overwhelmed
- Post-traumatic stress disorder
- Sleep problems

## How is it treated?

The healthcare team will use many approaches to prevent and treat PICS in the hospital setting including monitoring for delirium, minimizing sedative medications, and getting the patient moving as soon as possible to help minimize weakness.

Upon returning home, it is important to speak with your PCP about any symptoms that you may be experiencing. They can evaluate your symptoms and refer you to the appropriate specialists if warranted.