COMPARATIVE ANALYSIS OF DIAGNOSING OF DELIRIUM IN ELDERLY INPATIENTS OF GENERAL HOSPITAL

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Introduction: Confusional state is a common disorder in geriatric inpatients in general hospital. The diagnosis of this disease in the elderly is especially difficult due to imprecision of clinical. It is a hard challenge both to specialists non psychiatrists and even psychiatrists. Delirium often is misdiagnosed in 30-50% inpatients and on admission.

Aim: To compare the rate of misdiagnosis of delirium in the elderly by a psychiatrist and general medical personnel.

Methods: Interview of physicians and nurses of the general medicine and traumatology units to identify inpatients 65 years old and older with delirium diagnosed by the respondents. Subsequent screening of all the inpatients of 65 years old and older by a psychiatrist for delirium detecting.

Results: The rate of delirium misdiagnosis in the traumatology unit was 28.6%. Overdiagnosis of delirium in the general medicine unit was 22.2%. Incorrect diagnoses of delirium by specialist psychiatrist was 8.7%.

Conclusions: Satisfactory results of diagnosis of delirium provided by specialist psychiatrist are caused by combination of clinical assessment of anamnesis and present state by skilled psychiatrical survey and usage of standard psychometric scales. The results of diagnosis by specialists non-psychiatrists primarily are caused by their insufficient in-depth knowledge in delirium. It confirms high demand in comprehensible and rational diagnostic schemas for general medical staff, for providing basic psychiatry knowledge for them and more active usage of standard psychometric scales by specialists non-psychiatrists and especially nurses to improve their recognition of mental disorders.