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The effectiveness of early intervention in patients with delirium in the intensive care unit

Peng-Yi Liu B.S.[1,2], Shu-Nuen Chen M.S.[3]

[1] Assistant hand nurse, ICU Ward, Taipei City Hospital YangMing Branch, Taipei, Taiwan
[2] Master's Student, Chang Gung University of Science and Technology, Taiwan
[3] Nursing Supervisor, Department of Nursing, Taipei City Hospital YangMing Branch, Taipei, Taiwan

臺北市立聯合醫院 TAIPEI CITY HOSPITAL

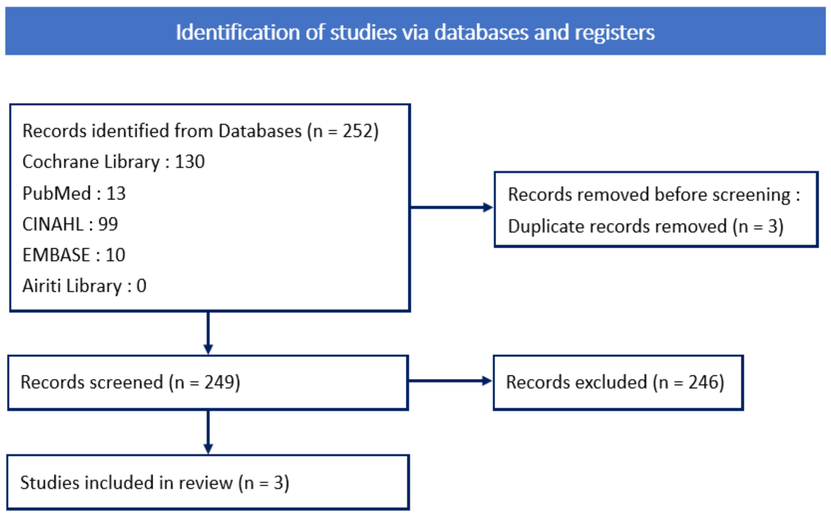
Objective

The environmental isolation and poor medical practices in the intensive care unit have a physical and mental impact on patients, leading to the occurrence of delirium in the intensive care unit. Clinically, the incidence rate of delirium caused by the intensive care unit is 40-76%, and it often occurs 24-48 hours after admission to the intensive care unit. The intensive care unit mainly focuses on the patient's acute physiological problems, and often ignores treatment and care of patients with delirium. Early intervention remains a subject of controversy and discussion, and the effectiveness of early intervention varies. The nursing unit wishes to conduct a systematic review and analysis of the literature to explore the effectiveness of early intervention in patients with delirium.

Methods

Through a systematic review, this article used Chinese and English keywords to search databases such as PubMed, Cochrane Library, CINAHL, EMBASE, and Airiti Library.

After eliminating duplicate and inconsistent literature, a total of three articles were included to conduct a high-quality literature review. To explore the effect of early mobilization in the treatment of delirium in ICU patients during hospitalization. The implementation period is from March 1 to 31, 2024.



Databases	Synonyms or keywords	Query the papers	Number of articles
Cochrane Library	(Intensive care ward patients OR Critically ill patient OR Intensive care) AND (early mobilization OR Mobilization OR active exercise ORT herapeutic exercise OR Passive Rang of motion OR resistive exercise OR Early Exercise) AND Delirium	130	3
PubMed	((((((((((Intensive care ward patients[Title/Abstract]) OR (Critically ill patient[Title/Abstract])) OR (Intensive care[Title/Abstract])) AND (early mobilization[Title/Abstract])) OR (Mobilization[Title/Abstract])) OR (active exercise[Title/Abstract])) OR (Therapeutic exercise[Title/Abstract])) OR (Passive Rang of motion[Title/Abstract])) OR (resistive exercise[Title/Abstract])) OR (Early Exercise[Title/Abstract])) AND (Delirium[Title/Abstract])	13	2(重複)
CINAHL	(Intensive care ward patients OR Critically ill patient OR Intensive care) AND (early mobilization OR Mobilization OR active exercise ORT herapeutic exercise OR Passive Rang of motion OR resistive exercise OR Early Exercise) AND Delirium	99	1(重複)
EMBASE	(Intensive care ward patients OR Critically ill patient OR Intensive care) AND (early mobilization OR Mobilization OR active exercise ORT herapeutic exercise OR Passive Rang of motion OR resistive exercise OR Early Exercise) AND Delirium	10	0
Airiti Library	(([ALL3]=(加護病房病人OR重症病人OR重症照護) AND [ALL3]=(早期活動)) AND [ALL3]=(譫妄))	0	0

Results

- **The study period:**

  Study From March 1 to March 31, 2024.
- **Included 52 critically ill patients in the ICU.**
- **Final results: According to the study results there are no chance of delirium.**

Implications for practice

Early mobilization intervention can significantly improve the delirium of patients in the intensive care unit, with a side effect of increasing the patient's neuromuscular strength. However, the brief intervention duration is limited by this article. Early mobilization is expected to be offered in the intensive care unit, given the benefits of early mobilization without harming the patient's body. Implementation improved patient quality.

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Keywords:

- Intensive care
- Early mobilization
- Delirium

Contact Details

Peng-Yi Liu AHN
E-mail：B4372@tpech.gov.tw
ICU Ward, Taipei City Hospital YangMing Branch, Taipei, Taiwan