# Delirium or dementia? The differences at a glance

The two conditions most often confused with each other, by families and by professionals. If you can put a date on the change, or even a time of day, think delirium.

| | Delirium | Dementia |
|---|---|---|
| **How it starts** | Over hours or days. You can often put a date on it. | Over months or years. Usually seen looking back. |
| **How it runs** | Comes and goes through the day. Often worse at night. | Usually slower and steadier, though Lewy body dementia can fluctuate and vascular dementia may change stepwise. |
| **Attention** | Poor. Conversations fall apart. | Usually holds in early Alzheimer's disease; patterns differ in other dementias. |
| **Alertness** | Often changed: agitated and restless, or sleepy and less responsive. Hard to wake is an emergency. | Usually normal in early Alzheimer's disease; patterns differ in other dementias. |
| **Hallucinations** | Common, often visual and frightening. | Less common overall. Lewy body dementia can cause hallucinations. |
| **Cause** | A new physical problem: infection, medication change, dehydration, surgery, pain. | Diseases of the brain, most often Alzheimer's disease. |
| **What happens next** | Usually improves when the causes are treated, though recovery can be slow. | Usually progresses slowly; vascular dementia may change stepwise. No cure at present. |

## When the person already has dementia

Up to half of older people with dementia develop delirium in hospital. A sudden drop below the person's normal level should be treated as possible delirium or another acute medical problem until assessed. Lewy body dementia can fluctuate and cause hallucinations; vascular dementia may change stepwise. Say it plainly: "She has dementia, but this is different. On Tuesday she was feeding herself and chatting. Today she can't stay awake. Please could she be assessed for delirium?"

**New sudden confusion needs medical assessment now. Contact the urgent or emergency medical service where the person is. In England, call 999 or go to A&E. In Scotland, contact the GP urgently if open; otherwise phone NHS 24 on 111. Outside the UK, follow local health-service guidance. If the person is hard to wake, has collapsed, has stroke signs or is struggling to breathe, call the local emergency number immediately (999 in the UK).**