3rd Annual Meeting of the American Delirium Society

A Huge Success

On June 2–4, 2013, over 115 participants from several disciplines (physicians, nurses, psychologists, pharmacists, nurse practitioners, physician assistants, administrators, basic scientists and clinical researchers) came together in Indianapolis, Indiana to advance the science of delirium.

The broad scope of topics along with the growth of networking among members, new and old, will undoubtedly contribute to the mission of the ADS, “to foster research, education, quality improvement, advocacy & implementation science to minimize the impact of delirium on short- and long-term health and well being, and the effects of delirium on the health care system as a whole.”
Keynote Speakers Galvanize American Delirium Society 2013 Annual Meeting

Kenneth Rockwood, MD, FRCPC, FRCP
Professor of Medicine (Geriatric Medicine & Neurology) Dalhousie University, Kathryn Allen Weldon Professor of Alzheimer’s Research University, Department of Medicine, QEII Health Sciences Centre, Halifax, Nova Scotia Canada

Delirium is a complex interaction of predisposing factors and precipitating events, making the pathophysiological process difficult to decipher and distinguish. Dr. Rockwood’s work as a researcher and a geriatrician has emphasized the complex ties between dementia, delirium, and frailty. During his keynote address, Dr. Kenneth Rockwood compounded the complexity of delirium, but also gave attendees a novel way to think about and measure the complexity of delirium: Frailty. Consistent use of better measures to examine the singular and cumulative effects of stressors on individuals with differing frailty indexes is needed to more fully identify the pathophysiological mechanisms of delirium and how to best measure them.

Donna Fick, PhD, GCNS-BC, FGSA, FAAN
Professor of Nursing; Professor of Medicine, Department of Psychiatry; Co-director, Hartford Center of Geriatric Nursing Excellence at Penn State; Editor, Journal of Gerontological Nursing

Dementia is the most common risk factor for the development of delirium, yet delirium superimposed on dementia remains poorly recognized by physicians, nurses, and other formal healthcare providers. Dr. Donna Fick continues to be a pioneer in nurse prevention, recognition, and management of delirium in the most vulnerable populations. Her keynote address challenged those in the audience to think about how far we have come in delirium science, particularly in nurse management of delirium, but also how far we have yet to go. Dr. Fick stressed the importance of delirium not only in older adults with dementia, but also within the context of accelerated aging. Also emphasized in this keynote was that delirium is a transdisciplinary syndrome and we need interventions that bridge individuals and contexts of care.

Synopsis of Keynote Addresses written by Andrea M. Yevchak, PhD©, GCNS-BC, RN, School of Nursing, Pennsylvania State University
What was covered at the 3rd Annual Meeting of the American Delirium Society

Number of Presentations

Pathophysiological Mechanisms and Biomarkers: 14
Models of Care: 10
Non-pharmacological Intervention Trials/Studies: 9
Review Lectures: 8
Screening, Diagnostic Tools and Prevention: 7
Consequences and Outcomes of Delirium: 6
Pharmacological Intervention Trials/Studies: 5
Drug use in Delirium: 4
Delirium in Advanced illness: 4
Observational Trials: 2
White Paper: 2
Pediatrics: 2

Any existing member of the ADS who wishes to engage with the research committee should contact the committee chair, Noll Campbell, at campbenl@iupui.edu. Several opportunities exist to participate in the current activity and generate new capabilities of the committee and the organization.
Innovative Models for Acute and Post-Acute Care Design: Reducing the Burden of Delirium

“The Madison VA Coordinated-Transitional Care (C-TraC) Program: a Low-Cost, Phone-Based Initiative to Improve Transitions for Hospitalized Veterans with Dementia, Delirium, Cognitive Impairment and Other High-Risk Conditions.”
Amy J. Kind MD PhD – University of Wisconsin School of Medicine and Public Health

“Critical Care Recovery Center-Making the Case for an Innovative Collaborative Care Model for the ICU Survivor”
Babar A. Khan MD MS – Indiana University School of Medicine

“Hospitalist-Acute Care of the Elderly (ACE) Service”
Heidi L. Wald MD MSPH – University of Colorado School of Medicine

“Acute Care Redesign Consortium for Hospitalized Older Adults with Cognitive Impairment”
Michael A. LaMantia MD MPH – Indiana University School of Medicine

Neural Substrates of Delirium: Animal Models, CSF and Neuroimaging Studies

“Moving Towards the Tipping Point: Using Animal Models to Unravel Delirium Susceptibility”
Colm Cunningham PhD – Trinity College Dublin

“Cerebrospinal Fluid Research in Delirium: Studies of Markers of Stress, Inflammation, and CNS Damage”
Roanna Hall MRCP – Edinburgh Delirium Research Group, University of Edinburgh

“Assessment of Anticholinergic Activity and Inflammatory Biomarkers in Cerebrospinal Fluid from Hip Fracture Patients with and without Delirium”
Leiv Otto Watne MD – Institute of Clinical Medicine, University of Oslo

“Neuroimaging Biomarkers of Delirium Risk”
Alasdair MJ MacLullich BSc MB ChB PhD MRCP – University of Edinburgh
Advances in Nursing Science for Delirium Care

“RADAR: A new screening tool to improve the recognition of delirium among older persons”
Phillippe Voyer RN PhD – Université Laval– Center for Excellence in Aging

“Barriers and Facilitators to Implementing Unit Champion Rounds in a Clinical Trial Across Three Diverse Hospital Settings”
Andrea M. Yevchak GCNS-BC RN – Penn State School of Nursing

“Delirium in Sensory Impaired LTC Elders Implications for Practice”
Pamela Z. Cacchione PhD CRNP BC – University of Pennsylvania School of Nursing

“Lifetime Pattern of Cognitive Reserve in Persons with Delirium and Dementia”
Ann Kolanowski PhD RN—Penn State School of Nursing

New Knowledge in Delirium Science Part I

“Advancing the State of Delirium Recognition and Treatment: A White Paper from the American Delirium Society to Benefit Clinicians and Researchers”
Noll Campbell PharmD — Purdue University College of Pharmacy

“Developmental Anchor Points to Facilitate Delirium Diagnosis in Critically Ill Children”
Gabrielle H. Silver MD – Weill Cornell Medical College

“A Quick and Easy Delirium Assessment for Non-Physician Research Personnel”
Jin H. Han MD MSc — Vanderbilt University

“A Comparative Study of Intensive Care Follow-Up Programs in Scandinavia”
Ingrid E. Egerod RN MSN PhD — Copenhagen University Hospital

“Dementia and Delirium as Predictors of Recovery in Walking after Hip Fracture”
Ann L. Gruber-Baldini PhD — University of Maryland School of Medicine
New Knowledge in Delirium Science Part II

“Re-imaging Delirium: A Novel Pathophysiology Model and Neuroimaging Approach”
Mark Lachmann MD MHSc FCFP FRCP – University of Toronto School of Medicine

“Relationships Between Deficits in Sustained Attention and EEG Power Spectrum Induced by Cholinergic Disruption in Rats”
Paula T. Trzepacz MD – Eli Lilly Company

“Cerebral Oximetry and Cardiac Critical Care Delirium”
Tanya Mailhot RN – Montreal Heart Institute

“Post-Traumatic Stress Disorder Symptoms After Acute Lung Injury: 2-year Prospective Longitudinal Study”
O. Joseph Bienvenu MD PhD – Johns Hopkins University School of Medicine

“Valproic Acid as an Adjunct Treatment for Hyperactive Delirium: Case Series and Literature Review”
Yelizaveta Sher MD – Stanford School of Medicine

“A Multidisciplinary Approach to Implementing a Hospital-Wide Delirium Prevention and Management Program”

“ADAPT: Hospital Wide Delirium Workgroup”
Christine M. Waszynski RN MSN GNP-BC – Hartford Hospital

“Innovative Electronic Solutions at the Point of Care to Support the Prevention, Identification, and Management of Delirium Patient & Best Outcomes”
Julie Michaelson RN Clinical Consulting Analyst – Hartford Hospital

“Pharmacists Make A Difference”
Elizabeth E.C Udeh PharmD BCPS – Hartford Hospital

“Changing Practice Through Focused Process & Outcome Based Education”
Lanetta Gann RN GN-C – Hartford Hospital
Mary C. Eanniello RN MSN ONC CHPN – Hartford Hospital
Current and Future State of Pharmacotherapy in the Prevention and Treatment of Delirium

“Reducing Delirium and Its Burden in the Critically Ill: Wakefulness, Mobilization, Sedative Choice and Sleep”
Annette M. Rowden PharmD BCPS – The Johns Hopkins Hospital Department of Pharmacy

“Antipsychotic Therapy for the Prevention and Treatment of Delirium: Friend or Foe?”
John W. Devlin PharmD FCCM FCCP – Northeastern University College of Pharmacy

“Application of Pharmacogenomics in Delirium”
Noll L. Campbell PharmD BCPP – Purdue University College of Pharmacy

Acute Brain Injury in the Setting of Acute Systemic Illness

“Acute Systemic Illness and Brain Dysfunction”
Alasdair MJ MacLullich BSc MB ChB PhD MRCP – University of Edinburgh

“Long-term Impairment after Critical Illness”
Pratik P. Pandharipande MD MSCI – Vanderbilt University School of Medicine

“Delirium and Terminal Cognitive Decline in relation to Dementia Neuro-pathology”
Daniel Davis MB ChB MPhil MRCP – University of Cambridge

“Using Mouse Models to Delineate Pathophysiological Mechanisms of Brain Injury after Systemic Inflammation”
Colm Cunningham PhD – Trinity College Dublin

Delirium Pathophysiology and Biomarkers – Mystery Solved?

Roundtable Participants Included:
Babar A. Kahn MD MS – Indiana University School of Medicine
José R. Maldonado MD FAPM FACFE – Stanford University School of Medicine
Colm Cunningham PhD – Trinity College Dublin
Pratik P. Pandharipande MD MSCI – Vanderbilt University School of Medicine
Management of Delirium in the Context of Advanced or Life-threatening Illness

Workshop Leaders Included:
Michelle T. Weckmann MD MS – University of Iowa Carver College of Medicine
Lyle Fettig MD – Indiana University School of Medicine

Clinical Trials Update

“Haloperidol to Prevent Conversion from Subsyndromal Delirium to Delirium in Critically Ill Adults”
John W. Devlin PharmD FCCM FCCP – Northeastern University College of Pharmacy

“The RESERVE-DSD Study: Delirium Management in Post Acute Care”
Ann M. Kolanowski PhD RN FGSA FAAN – Penn State School of Nursing

“Mid-trial update of MIND-USA”
E. Wesley Ely MD MPH – Vanderbilt University School of Medicine

“Establishing a Clinical Trial Environment for Surgical Patients with Dementia in the United Kingdom -The PERFECTED Project”
Chris Fox MD – Norwich Medical School and University of East Anglia

“The Effect of New Dedicated Pre- and Post-operative Orthogeriatric Service on Cognitive Function in Patients with Hip Fractures”
Leiv Otto Watne MD – Institute of Clinical Medicine, University of Oslo

Delirium in the Geriatric Patient: Innovative Practices and Outcomes

“Setting the Stage: Older Adults, Nursing Practice, and Delirium Screening”
Sharon Gunn MSN MA RN ACNS-BC CCRN – Baylor Health Care System

“Leading Change: Delirium Prevention and Screening in Acute Care”
Sonya A. Flanders MSN RN ACNS-BC CCRN – Baylor Health Care System

“Nursing Research: Delirium Prevention in the Geriatric Patient”
Megan Wheeler MSN RN ACNS-BC – Baylor University Medical Center

If you would like to give us a sentence or a paragraph about something related to Delirium that you would like other members to know about, please email Dr. Joseph Flaherty, Editor-in-Chief, at flahertyinchina@yahoo.com and we will try to put it into the next newsletter. It can be an update on your research, your clinical care, a conference, a recent lecture or something you’ve recently published. It can even be something about Delirium (outside your work) that you think is important.
The Abstract and Poster Session:
One of the Busiest and Best Times of the Conference!
Best Student Poster Award

Roanna Hall MRCP – Edinburgh Delirium Research Group, University of Edinburgh

Loss of Normal Eye Contact in Delirium as Assessed by the Observational Scale of Level of Alertness

Take home message: Abnormal eye contact was not present in all cases of delirium, but where present it was highly specific. Abnormal eye contact correlated significantly with DRS-98 scores and objective measurements of attention using the Edinburgh Delirium Test Box 1.

Best Poster Award

Padmini E. Paul, MSN PMHNP CRNP
Johns Hopkins University School of Nursing

Early Predictors of Potential Post-ictal Delirium After Electro Convulsive Therapy (ECT)

Take home message: Bilateral ECT treatments produced more delirium than right unilateral treatments.

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It can be an update on your research, your clinical care, a conference, a recent lecture or something you’ve recently published. It can even be something about Delirium (outside your work) that you think is important.
Faces of Delirium
the American Society
First to the ADS President, Dr. Karin J. Neufeld, for all her hard work this past year in preparing for this year’s conference. And for your leadership in the upcoming year ahead.

Second, to all involved with the Conference Planning Committee: Rakesh Arora, Noll Campbell, Malaz Boustani, Chris Waszynski, Joyce Parks, Michelle Weckmann, Jose Maldonado, Yesne Alici, Sharon Gordon, Jeff Silverstein, Ella Bowman, Dongxin Wang, Ingrid Egerod, Gideon Caplan.

Lastly, a huge thank you to Tom Moses. He remembers the details, he knows the details, and gets the details done, while leading us and guiding us, in his own special way.
Thanks Tom,
For helping us build the ADS....
Join us **next year** as we travel the road from Indianapolis to our **2014 conference destination: Baltimore, MD**

Mark your calendar for June 1 – 3, 2014 at the Historic Tremont Hotel in Baltimore, MD

For more information, contact us at info@americandeliriumsociety.org
And good luck to our president-elect, Dr. Rakesh C. Arora
Who will be heading up next year’s Conference Planning Committee
Please feel free to contact him if you are interested in getting involved: rakeshcarora@gmail.com