

Søgeprotokol for opdatering på NKR Nationale Kliniske Retningslinjer

Projekttitel/aspekt	NKR for forebyggelse og behandling af organisk delir. Guidelines version 2020
Projektgruppe	Jeanett Friis Rohde
Søgespecialist	Kirsten Birkefoss
Senest opdateret	20.01.2020

Baggrund	<p>Organisk delir (delir ved somatisk sygdom) er en alvorlig og hyppigt forekommende konfusionstilstand, der ofte ses hos alvorligt syge og ældre medicinske patienter. Udover kognitive forstyrrelser vil patienter med organisk delir ofte udvise svære adfærdsforstyrrelser og psykoselignende symptomer. Organisk delir er en progredierende tilstand, der kan udvikle sig over timer til få dage, hvor multimorbiditet, kognitiv dysfunktion og medikamentel behandling er disponerende faktorer. Tilstanden overses ofte, hvilket kan medføre forlænget indlæggelsestid, yderligere funktionstab og øget brug af medicin samt – i yderste konsekvens - en akut og livstruende tilstand. Organisk delir er særligt hyppigt forekommende hos beboere på plejecentre og hos patienter under indlæggelse på såvel medicinske som kirurgiske afdelinger, hvor forekomsten skønnes at være mellem 10 og 50 %. Når delir opstår under indlæggelse, behandles patientens delir typisk af de pågældende somatiske eller kirurgiske specialer, eventuelt efter rådgivning fra psykiatrien. Behandlingen består sædvanligvis i at behandle den underliggende sygdom og begrænse/seponere lægemidler, som man har en formodning om kan være udløsende for delirium. Det er muligt at undgå udviklingen af organisk delir, hvis patienter, der er i risiko for at udvikle tilstanden, identificeres tidligt og behandles relevant. Den nationale kliniske retningslinje skal derfor give evidensbaserede anbefalinger for forebyggelse, opsporing og behandling af organisk delir.</p>
Generelle søgetermer	<p>Engelske: Delirium, acute confusion Danske: Delirium, delir, konfusion Norske: Delirium, delir, konfusjon, akutt forvirring, forvirringstilstand Svenske: Delirium, konfusion, akut förvirring, förvirringstillstånd</p>
Inklusions- og eksklusionskriterier	<p>Sprog: Engelsk, dansk, norsk og svensk År: 2015-2020 Population: Alle Publikationstyper: Guidelines, MTV, Cochrane Reviews</p>

Informationskilder

Databaser	Interface	Fund	Dato for søgning
G-I-N International	http://www.g-i-n.net/	5	16.01.2020
Guideline Central	https://www.guidelinecentral.com/	4	16.01.2020
NICE (UK)	http://www.nice.org.uk/	1	16.01.2020
Trip Database	https://www.tripdatabase.com/	9	16.01.2020
Scottish Intercollegiate Guidelines Network (SIGN)	http://sign.ac.uk	1	16.01.2020
HTA Databasen (CRD database)	http://www.crd.york.ac.uk/CRDWeb/	4	16.01.2020
Netpunkt	http://old.netpunkt.dk	2	16.01.2020
Center for Kliniske Retningslinjer	http://cfkr.dk	1	16.01.2020
SBU, Sverige	http://www.sbu.se	3	16.01.2020
Socialstyrelsen, Sverige	http://www.socialstyrelsen.se	0	16.01.2020
Helsedirektoratet, Norge	https://helsedirektoratet.no/	0	16.01.2020
FHI, Norge	http://www.fhi.no/	0	16.01.2020
NHMRC, Australien	https://www.clinicalguidelines.gov.au/	0	16.01.2020
Canadian Medical Association, Canada	https://joulecma.ca/cpg/homepage	8	16.01.2020
CADTH, Canada	https://cadth.ca	7	16.01.2020

MEDLINE	OVID	123	20.01.2020
EMBASE	OVID	210	20.01.2020
CINAHL	EBSCO	134	20.01.2020

Note:

- Guidelines fra firmaet Hayes er fra valgt for denne NKR
- Søgetermer og inklusions- og eksklusionskriterier er tilpasset de enkelte databaser.
- Dubletter er så vidt muligt frasorteret ved hjælp af Covidence. De fundne referencer overføres til fagkonsulenten i Covidence.
- Fuldtekster præsenteres i Covidence i pdf-format eller som link
- Søgestrategi for hver enkelt database præsenteres – hvis muligt vises det eksplicit hvor mange referencer den enkelte søgestreng genererer
- Covidence = webbaseret referencehåndteringssystem og kvalitetsvurderingsværktøj

SØGESTRATEGI

GIN

5 fund (er lagt i Covidence)

Søgt på:

deliri* OR confusion*

Risk reduction and management of delirium (SIGN CPG 157)	SIGN (GB) - Scottish Intercollegiate Guidelines Network	Guideline	Mar 13, 2019	United Kingdom	Published
Delirium, Dementia, and Depression in Older Adults: Assessment and Care	RNAO (CA) - Registered Nurses' Association of Ontario	Guideline	Jul 29, 2016	International, Canada	Published
Multidisciplinary guideline for the home-based elderly with dementia and their carers	Ebpracticien et (BE) Working Group Development of Primary Care Guidelines	Guideline	Aug 16, 2017	Belgium	Published
Dementia: assessment, management and support for people living with dementia and their carers (NG97)	NICE (UK) - National Institute for Health and Care Excellence	Guideline	Jun 01, 2018	United Kingdom	Published
Dementia, disability and frailty in later	NICE (UK) - National Institute for	Guideline	Oct 01,	United Kingdom	Published



life – mid-life approaches to delay or prevent onset (NG16)	Health and Care Excellence		2015		
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Guideline Central

4 fund (er lagt i Covidence)

Søgt på hvert af ordene: Delirium, confusion

American Geriatrics Society American Geriatrics Society abstracted clinical practice guideline for postoperative delirium in older adults DATE 05/09/2016 DESCRIPTION National Guideline Clearinghouse (NGC). New Summary: American Geriatrics Society...

National Clinical Guideline Centre Care of dying adults in the last days of life DATE 05/09/2016 DESCRIPTION National Guideline Clearinghouse (NGC). New Summary: Care of dying adults in the...

World Health Organization, National Institute For Health And Care Excellence (NI... Screening, assessment, and care of anxiety and depressive symptoms in adults with cancer: an American Society of Clinical Oncology guideline adaptation. DATE 02/02/2015 DESCRIPTION National Guideline Clearinghouse (NGC). New Summary: Screening, assessment, and ...

American Geriatrics Society American Geriatrics Society 2015 updated Beers Criteria for potentially inappropriate medication use in older adults DATE 05/09/2016 DESCRIPTION National Guideline Clearinghouse (NGC). American Geriatrics Society 2015 updated...

NICE

1 fund (er lagt i Covidence)

Søgt på navigation: NICE guidance > Conditions and diseases > Mental health and behavioral conditions > Delirium

Delirium: prevention, diagnosis and management

Clinical guideline [CG103]Published date: July 2010 Last updated: March 2019

This guideline covers diagnosing and treating delirium in people aged 18 and over in hospital and in long-term residential care or a nursing home. It also covers identifying people at risk of developing delirium in these settings and preventing onset. It aims to improve diagnosis of delirium and reduce hospital stays and complications.



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In March 2019 we removed the use of olanzapine for the [treatment of delirium](#) in people who are distressed or considered a risk to themselves or others. See [update information](#) for further details.

NICE has published separate advice for the care of people with [alcohol-related physical health problems](#), including delirium related to alcohol use (known as delirium tremens).

- Evidence update

- [Evidence update](#) PDF 350.42 KB 12 November 2014

- Supporting evidence

- Surveillance report

- [2018 surveillance of delirium: prevention, diagnosis and management \(NICE guideline CG103\)](#)

- [Appendix A: Summary of evidence from surveillance](#) PDF 924.72 KB 31 October 2018

- [Appendix B: Stakeholder consultation comments table](#) PDF 887.53 KB 31 October 2018

- Full guidance

- [Full guideline](#) PDF 5.93 MB 05 September 2011

Trip Database

9 fund (er lagt i Covidence)

Søgt på hvert af ordene:

Delirium, confusion

[Guidelines for Safe Care for Patients Sedated in Health Care Facilities for Acute Behavioural Disturbance](#)

Disturbance 1. INTRODUCTION Acute health-related behavioural disturbance (ABD) can occur in any health setting at any time. Whilst ABD may present secondary to acute mental illness, there are many underlying aetiologies of this phenomenon. Not uncommonly comorbid conditions, particularly substance-related disorders, are present. Agitated **delirium**, a common type of ABD may complicate virtually any medical or surgical condition. Details of clinical conditions may not be known at the time sedation

2018 Australian and New Zealand College of Anaesthetists

[Delirium, Dementia, and Depression in Older Adults: Assessment and Care, Second Edition](#)

Delirium, Dementia, and Depression in Older Adults: Assessment and Care, Second Edition Clinical Best Practice Guidelines JULY 2016 **Delirium**, Dementia, and Depression in Older Adults: Assessment and Care Second EditionDisclaimer These guidelines are not binding for nurses or the organizations that employ them. The use of these guidelines should be flexible based on individual needs and local circumstances. They neither constitute a liability nor discharge from liability. While every effort has (...) appears, the balance of



SUNDHEDSSTYRELSEN

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2016 Registered Nurses' Association of Ontario

Delirium

Delirium Scottish Palliative Care Guidelines - **Delirium** Scottish Palliative Care Guidelines search / / / **Delirium** **Delirium** Introduction In this guideline, **delirium** is defined as disturbed consciousness and inattention with cognitive impairment; acute onset and fluctuating course as a physiological consequence of disease or treatment. **Delirium** is often reversible. Other terms used to describe **delirium** include acute confusional state, agitation, and terminal restlessness, but the terms (...) restlessness and terminal agitation should be used once reversibility excluded. Assessment Common (30 to 85% of hospice patients), often reversible but diagnosed late Three types: hyperactive – increased arousal and agitation hypoactive – quiet, withdrawn and inactive: more common but often missed or misdiagnosed as depression mixed pattern Diagnosis depends mainly on careful clinical assessment; consider using Mini-mental state examination (MMSE) or **Confusion** assessment method (CAM) as a screening tool

2015 Scottish Palliative Care Guidelines

Frailty in Older Adults - Early Identification and Management

Frailty in Older Adults - Early Identification and Management Frailty in Older Adults - Early Identification and Management - Province of British Columbia theme_3_collection theme_3_frontend theme_3_collection theme_3_frontend Birth, Adoption, Death, Marriage & Divorce theme_1_collection theme_1_frontend theme_1_collection theme_1_frontend British Columbians & Our Governments theme_data_collection data_frontend theme_data_collection data_frontend Data theme_5_collection theme_5_frontend (...) theme_10_collection theme_10_frontend Sports, Recreation, Arts & Culture theme_8_collection theme_8_frontend theme_8_collection theme_8_frontend Taxes & Tax Credits theme_14_collection theme_14_frontend theme_14_collection theme_14_frontend Tourism & Immigration Search default_collection default_frontend Section Navigation Frailty in Older Adults - Early Identification and Management Effective Date: October 25th, 2017 Recommendations and Topics Scope This guideline addresses the early identification

2017 Clinical Practice Guidelines and Protocols in British Columbia

Integrated care for older people (?ICOPE)?: guidance for person-centred assessment and pathways in primary care

Integrated care for older people (?ICOPE)?: guidance for person-centred assessment and pathways in primary care INTEGRATED CARE FOR OLDER PEOPLE Guidance on person-centred assessment and



pathways in primary care HandbookINTEGRATED CARE FOR OLDER PEOPLE Guidance on person-centred assessment and pathways in primary care HandbookIntegrated care for older people (ICOPE): Guidance for person-centred assessment and pathways in primary care WHO/FWC/ALC/19.1 © World Health Organization 2019 Some rights (...) the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization. Suggested citation. Integrated care for older people (ICOPE): Guidance for person-centred assessment and pathways in primary care. Geneva: World Health Organization; 2019 (WHO/FWC/ALC/19.1). Licence: CC BY-NC-SA 3.0 IGO. Cataloguing-in-Publication (CIP) data. CIP data are available at <http://apps.who.int/iris>. Sales, rights and licensing. To purchase WHO publications, see [http](http://apps.who.int)

2019 World Health Organisation Guidelines

WHO Guidelines on Integrated Care for Older People (ICOPE)

WHO Guidelines on Integrated Care for Older People (ICOPE) Integrated care for older people Guidelines on community-level interventions to manage declines in intrinsic capacity Integrated care for older people Guidelines on community-level interventions to manage declines in intrinsic capacity Integrated care for older people: guidelines on community-level interventions to manage declines in intrinsic capacity ISBN 978-92-4-155010-9 © World Health Organization 2017 Some rights reserved (...) the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization. Suggested citation. Integrated care for older people: guidelines on community-level interventions to manage declines in intrinsic capacity. Geneva: World Health Organization; 2017. Licence: CC BY-NC-SA 3.0 IGO. Cataloguing-in-Publication (CIP) data. CIP data are available at <http://apps.who.int/iris>. Sales, rights and licensing. To purchase WHO publications, see <http://apps.who.int>

2017 World Health Organisation Guidelines

Acute Mental Status Change, Delirium, and New Onset Psychosis

be frequently encountered [3,5-7,10,11]. Management is based on treatment of the underlying cause, control of symptoms with nonpharmacological approaches, medication when deemed appropriate, as well as effective after-care planning [3,6,11]. The economic impact of **delirium** in the United States is profound, with total costs estimated at \$38 to \$152 billion each year [12]. Psychiatric consultation and screening tools, such as the **Confusion** Assessment Method (CAM) and briefer CAM variants (ie, CAM-ICU, B-CAM (...), Brennan N. Computerized tomography of the brain for elderly patients presenting to the emergency department with acute **confusion**. Emerg Med Australas 2008;20:420-4. 39. Lai MM, Wong Tin Niam DM. Intracranial cause of **delirium**: computed tomography yield and predictive factors. Intern Med J 2012;42:422-7. 40. Vijayakrishnan R, Ramasubramanian A, Dhand S. Utility of Head CT Scan for Acute Inpatient **Delirium**. Hosp Top 2015;93:9-12. 41. Hufschmidt A, Shabarin V. Diagnostic yield of cerebral imaging

2019 American College of Radiology



Guidelines for the Prevention and Management of Pain, Agitation/Sedation, Delirium, Immobility, and Sleep Disruption in Adult Patients in the ICU

Guidelines for the Prevention and Management of Pain, Agitation/Sedation, **Delirium**, Immobility, and Sleep Disruption in Adult Patients in the ICU Clinical Practice Guidelines for the Prevention and Manageme... : Critical Care Medicine You may be trying to access this site from a secured browser on the server. Please enable scripts and reload this page. Login No user account? Lippincott Journals Subscribers , use your username or email along with your password to log in. Remember me (...) Note Procite Reference Manager Save my selection doi: 10.1097/CCM.00000000000003299 Online Special Article Free Objective: To update and expand the 2013 Clinical Practice Guidelines for the Management of Pain , Agitation, and **Delirium** in Adult Patients in the ICU. Design: Thirty-two international experts, four methodologists, and four critical illness survivors met virtually at least monthly. All section groups gathered face-to-face at annual Society of Critical Care Medicine congresses; virtual

2018 Society of Critical Care Medicine

Delirium in Adult Cancer Patients: ESMO Clinical Practice Guidelines

setting [18]: six out of the 69 (8.6%) patients (aged 33–70 years) with head and neck cancer and receiving outpatient treatment developed **delirium**, based on assessment with the **Confusion** Assessment Method (CAM). However, 45% of their caregivers reported **delirium** retrospectively as part of a subsequent mixed-methods study. The literature review found one study of 243 patients presenting to an emergency department [10]. The reported prevalence of **delirium** is dependent on the patient setting: 10 (...), benzodiazepines, corticosteroids and antipsychotics [45] (Table 1). In a study of 140 hospitalised, **confused** adult cancer patients, 31% had a single determinant factor for their **delirium**, whereas 69% had multiple factors, with a median of three probable causes [46]. One-hundred and two patients (73%) were known to have metastatic cancer, with brain or leptomeningeal metastases present in 36 patients (25%). Contributory precipitants of **delirium** included: medications (predominantly opioids) in 64

2018 European Society for Medical Oncology

SIGN

Søgt på alle emner

1 fund (er lagt i Covidence)

Risk reduction and management of delirium

Delirium is among the most common of medical emergencies. Prevalence is around 20% in adult acute general medical patients, and higher in particular clinical groups, such as patients in intensive care units. It



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affects up to 50% of those who have hip fracture and up to 75% in intensive care. Preventative measures can reduce the incidence of delirium.

Remit and target users

This guideline provides recommendations based on current evidence for best practice in the detection, assessment, treatment and follow up of adults with delirium, as well as reducing the risk of delirium. The guideline applies to all settings: home, long-term care, hospital, and hospice. The remit excludes delirium secondary solely to alcohol and illicit substances use. It also excludes delirium in children.

[Full guideline](#) (PDF)

[Quick reference guide](#) (PDF)

[Reference poster](#) (PDF)

Supporting material

[Consultation report](#) (PDF)

[Search narrative](#) (PDF)

[Search flow chart](#) (PDF)

HTA

4 fund (lagt i Covidence)

Søgt på:

(deliri* or confusion) IN HTA FROM 2015 TO 2020

Netpunkt

2 fund (lagt i Covidence)

Søgt på:

(delir? eller konfusion) og (guideline? eller retningslin? eller vejledning? eller medicinsk teknologi? eller mtv eller anbefal?) og sp=dan og (ma=bå eller ma=ap) og år>2014

Center for Kliniske Retningslinjer

1 fund (er lagt i Covidence)

Søgt på: delir, delirium, konfusion



VURDERING AF PÆDIATRISK DELIRIUM HOS KRITISK SYGE HOSPITALSINDLAGTE BØRN I ALDEREN 0-18 ÅR.

Klinisk retningslinje

Dansk resume

English summary

SBU

3 fund

Søgt på hver af ordene:

Delirium, konfusion, akut forvirring, forvirringstilstand

- [Klometiazol till natten vid demenssjukdom och kvarvarande konfusion och samtidig sömnstörning efter utredning av bakomliggande orsaker och icke-farmakologisk behandling jämfört med frånvaro av åtgärden](#)

Publicerad 2018-10-24

Klometiazol till natten vid demenssjukdom och kvarvarande konfusion och samtidig sömnstörning efter utredning av bakomliggande orsaker och icke-farmakologisk behandling jämfört med frånvaro av

- [Risperidon vid demenssjukdom och kvarvarande konfusion efter utredning av bakomliggande orsaker och icke-farmakologisk behandling jämfört med frånvaro av åtgärden](#)

Publicerad 2018-10-23

Risperidon vid demenssjukdom och kvarvarande konfusion efter utredning av bakomliggande orsaker och icke-farmakologisk behandling jämfört med frånvaro av åtgärden Risperidon vid demenssjukdom och

- [Haloperidol vid demenssjukdom och kvarvarande konfusion efter utredning av bakomliggande orsaker och icke-farmakologisk behandling jämfört med frånvaro av åtgärden](#)

Publicerad 2018-10-23

Haloperidol vid demenssjukdom och kvarvarande konfusion efter utredning av bakomliggande orsaker och icke-farmakologisk behandling jämfört med frånvaro av åtgärden Haloperidol vid demenssjukdom och



Socialstyrelsen

0 fund

Gennemgået: Liste over nationella riktlinjer

HelseDirektoratet

0 fund

Gennemgået: Index over nasjonale faglige retningslinjer

Folkehelseinstituttet (FHI)

Søgt på: Innhold A-Å: Eldres helse

0 fund

NHMRC, Australien

Søgt på hver af ordene:

Delirium, confusion

0 fund

Canadian Medical Association, Canada

8 fund

Søgt på hver af ordene:

Delirium, confusion

1. Cognitive impairment : part 2: diagnosis to management

Toward Optimized Practice [Alberta]

Published on: 2017-02

[Details](#)

2. Cognitive impairment : part 1: symptoms to diagnosis

Toward Optimized Practice [Alberta]



4. Choosing Wisely Canada recommendation - Don't routinely obtain head computed tomography (CT) scans, in hospitalized patients with delirium in the absence of risk factors

Canadian Society of Hospital Medicine

Published on: 2017-06

[Details](#)

5. Choosing Wisely Canada recommendation - Don't use antipsychotics as first choice to treat behavioural and psychological symptoms of dementia

Canadian Geriatrics Society

Published on: 2017-06

[Details](#)

7. Canadian guidelines on alcohol use disorder among older adults

Canadian Coalition for seniors' Mental Health

Published on: 2019-11

[Details](#)

9. Choosing Wisely Canada recommendation - Don't use benzodiazepines and other sedative-hypnotics in older adults as first choice for insomnia, agitation or delirium

Canadian Society of Hospital Medicine

Published on: 2017-06

[Details](#)

10. Choosing Wisely Canada recommendation - Don't use benzodiazepines or other sedative-hypnotics in older adults as first choice for insomnia, agitation or delirium

Canadian Geriatrics Society

Published on: 2017-06

[Details](#)

12. Palliative care for the patient with incurable cancer or advanced disease - part 2: pain and symptom management

Family Practice Oncology Network

Guidelines and Protocols Advisory Committee (BC)

Published on: 2017-02

[Details](#)



CADTH

7 fund (er lagt i Covidence)

[Delirium Screening Tools for Patients in Critical Care: Clinical Evidence and Guidelines](#)

Last Updated: October 11, 2011

Result type: Reports

Product Line: [Rapid Response](#)

Research Type: Devices and Systems

[Details](#)

[The Use of Restraints and Excited Delirium or Positional Asphyxia: A Review of the Safety and Guidelines](#)

Last Updated: August 11, 2016

Result type: Reports

Product Line: [Rapid Response](#)

Research Type: Devices and Systems

[Details](#)

[Constant Observation Monitors for Geriatric Patients with Dementia or Delirium: Clinical and Cost-Effectiveness](#)

Last Updated: September 10, 2015

Result type: Reports

Product Line: [Rapid Response](#)

Research Type: Devices and Systems

[Details](#)

[Fall Prevention Guidelines for Patients in Wheelchairs or Patients with Delirium: A Review of Evidence-Based Guidelines](#)

Last Updated: July 19, 2019

Result type: Reports

Product Line: [Rapid Response](#)

Research Type: Devices and Systems

[Details](#)

[Treatment of Older Adults with Insomnia, Agitation, or Delirium with Benzodiazepines: Clinical Effectiveness and Guidelines](#)

Last Updated: January 14, 2016

Result type: Reports

Product Line: [Rapid Response](#)

Research Type: Drug

[Details](#)

[Sleep Medications for the Treatment or Prevention of Delirium: Clinical Effectiveness and Guidelines](#)

Last Updated: December 9, 2016

Result type: Reports

Product Line: [Rapid Response](#)

Research Type: Drug

[Details](#)

Treatment of Older Adults with Insomnia, Agitation, or Delirium With Benzodiazepines: Clinical Effectiveness and Guidelines

Last Updated: April 23, 2015

Result type: Reports

Product Line: [Rapid Response](#)

Research Type: Drug

[Details](#)

Medline

123 fund (lagt i Covidence)

Database(s): **Ovid MEDLINE(R) and Epub Ahead of Print, In-Process & Other Non-Indexed Citations, Daily and Versions(R)** 1946 to January 17, 2020

Search Strategy:

#	Searches	Results
1	Delirium/	8922
2	Confusion/	4704
3	deliri*.ti,ab,bt,kw,kf.	15230
4	(acute adj3 (confusion* or brain syndrome* or brain failure* or brain dysfunction* or psycho-organic syndrome* or organic psychosynrome*)).ti,ab,bt,kw,kf.	1387
5	(fluctuat* adj3 confusion*).ti,ab,bt,kw,kf.	37
6	(terminal* adj3 restless*).ti,ab,bt,kw,kf.	48
7	(toxic* adj3 confusion*).ti,ab,bt,kw,kf.	83
8	or/1-7	21887
9	exp *Substance Withdrawal Syndrome/	14347
10	exp *Alcohol-Related Disorders/	83525
11	or/9-10	94937
12	8 not 11	20258
13	limit 12 to (guideline or practice guideline)	50
14	(Guideline* or hta or health technology assessment* or consensus or recommendations).ti,bt,kw,kf.	138452
15	cochrane.jw.	14891
16	or/14-15	153334
17	12 and 16	264
18	13 or 17	283
19	limit 18 to (yr="2015-2020" and (english or danish or norwegian or swedish))	123

Embase

210 fund

Database(s): **Embase** 1974 to 2020 January 17

Search Strategy:

#	Searches	Results
1	Delirium/	25878
2	postoperative delirium/	2174
3	acute confusion/	548
4	deliri*.ti,ab,kw.	23486
5	(acute adj3 (confusion* or brain syndrome* or brain failure* or brain dysfunction* or psycho-organic syndrome* or organic psychosyndrome*)).ti,ab,kw.	2137
6	(fluctuat* adj3 confusion*).ti,ab,kw.	78
7	(terminal* adj3 restless*).ti,ab,kw.	64
8	(toxic* adj3 confusion*).ti,ab,kw.	112
9	or/1-8	34971
10	exp *withdrawal syndrome/	14021
11	exp *alcoholism/	74061
12	exp *alcohol psychosis/	1385
13	*alcohol withdrawal/	2870
14	*delirium tremens/	996
15	or/10-14	88837
16	9 not 15	33177
17	(Guideline* or hta or health technology assessment* or consensus or recommendations).ti,kw.	187479
18	cochrane.jx.	21267
19	or/17-18	208729
20	16 and 19	537
21	limit 20 to (yr="2015-2020" and (english or danish or norwegian or swedish))	210



134 fund

#	Query	Limiters/Expanders	Results
S12	S11	Limiters - Published Date: 20150101-20200131; Language: Danish, English, Norwegian, Swedish	134
S11	S6 AND S10		326
S10	S7 OR S8 OR S9		128,907
S9	SU (Guideline* or practice guideline* or clinical guideline* or guidance or consensus or recommendations or hta or health technology assessment* or consensus)		83,802
S8	TI (Guideline* or practice guideline* or clinical guideline* or guidance or consensus or recommendations or hta or health technology assessment* or consensus)		68,570
S7	PT Practice guidelines OR MH Practice guidelines		78,343
S6	S1 OR S2 OR S3 OR S4 OR S5		9,246
S5	SU ((fluctuat* N3 confusion*) OR (terminal* N3 restless*) OR (toxic* N3 confusion*))		0
S4	TI ((fluctuat* N3 confusion*) OR (terminal* N3 restless*) OR (toxic* N3 confusion*))		28
S3	SU (deliri* OR (acute N3 (confusion* or brain syndrome* or brain failure* or brain dysfunction* or psycho-organic syndrome* or organic psychosyndrome*)))		6,395
S2	TI (deliri* OR (acute N3 (confusion* or brain syndrome* or brain failure* or brain dysfunction* or psycho-organic syndrome* or organic psychosyndrome*)))		4,827
S1	(MH "Confusion+" OR MH "Delirium Management (Iowa NIC)" OR MH "ICU Psychosis")		7,997
