



# Delirium

European Delirium Association /  
British Geriatrics Society Special  
Interest Group on Dementia and  
related disorders joint meeting

**3-4th September 2015,  
with 2nd September pre-conference Delirium Training Day**

**Franklin-Wilkins Building, Waterloo Campus,  
King's College London**

## **2nd September Pre-conference Delirium Training Day**

The EDA pre-conference is aimed at a multi-disciplinary audience, and presumes no background knowledge. There will be the opportunity to hear talks from experts and meet people with shared interests. Topics covered will include:

- What is delirium and how to make a diagnosis
- Prevention and management
- Delirium in special situations: medical, post-operative, palliative care etc.
- Challenging case studies

## **Main meeting: 3rd & 4th September**

Two day conference for all health professionals interested in delirium research, education and policy. Sessions include:

- Biological basis of delirium neuropsychiatry
- Critical care and perioperative delirium
- Palliative care and nursing home delirium
- Experimental models for delirium research
- Innovations in delirium education
- Setting up a delirium service

Keynote speaker: Dr Colm Cunningham, Trinity College Dublin



**@GeriSoc #BGS Conf  
@EDA\_delirium #Delirium**



**This event has been CPD accredited as follows:**

Wednesday	Code: 99538	6 hours
Thursday	Code: 99370	6 hours
Friday	Code: 99372	6 hours

**Organising Committee**

**European Delirium Association**

Daniel Davis, London (chair)  
Alasdair MacLulich, Edinburgh (co-chair)  
Dan Wilson, London  
Andrew Teodorczuk, Newcastle  
Valerie Page, Watford  
Alessandro Morandi (Cremona)  
Koen Milisen (Leuven)  
Stefan Kreisel (Bielefeld)  
Joaquim Cerejeira (Coimbra)

**British Geriatrics Society Special Interest Group Dementia and related disorders**

Emma Vardy, Newcastle (co-chair)  
Emma Reynish, Stirling  
[Alasdair MacLulich]  
Louise Allan, Newcastle  
Duncan Forsyth, Cambridge

Local representation  
[Dan Wilson, London]  
Stephen Jackson, London  
Finbarr Martin, London  
Claire Steves, London  
Judgeep Dhesi, London  
Judith Partridge, London  
Emma Ouldred, London  
Julie Whitney, London  
Thomas Jackson, Birmingham

**Meetings Secretariat**

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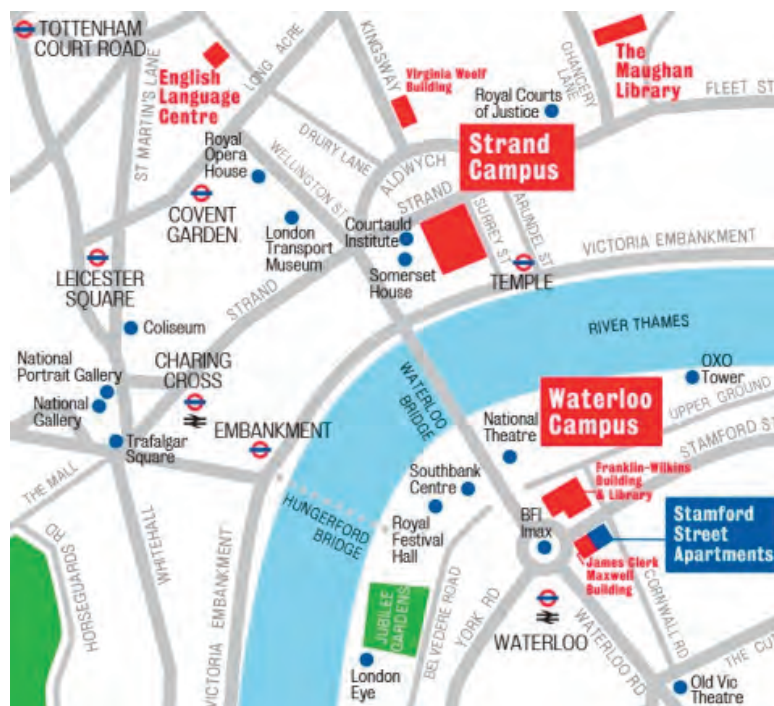


The programme is correct at the time of printing and the Secretariat accepts no liability for any changes made at a later date

## Information

The meeting is taking place in the Franklin-Wilkins Building, Stamford Street, London SE1 9NH.

Tel - +44 (0)20 7836 5454



## **Cloakroom**

A cloakroom is situated on the ground level before the registration desk. The cloakroom will be staffed half an hour before the official starting time of lectures through to closing time each day. Name badges must be shown in order to use the cloakroom facilities free of charge.

## **Security/ Badges**

Name badges must be worn at all times as these serve as the admission pass to all scientific sessions and exhibition.

## **Poster Exhibition**

The exhibition is located in the Restaurant on Level 1. It will be open for all times of the meeting.

## **Wi-fi**

The venue has freely accessible Wi-Fi throughout.

## **CPD Accreditation**

The meeting has been accredited for CPD. To claim CPD points, you are required to sign in at the desk next to the exhibition area.

Certificates of attendance will be distributed from 16.30 on Friday 4th September 2015 or on the day for those delegates attending one day only. An electronic version will be sent to the registered email address as well following the meeting.

Please note that sponsored symposia will only receive CPD accreditation if applied for by the sponsor. In accordance with the rules of the Federation of Royal Colleges, a maximum of 6 CPD points a day may be claimed.

## **Insurance**

The Organisers are unable to accept any responsibility for damage or loss of personal property during the conference. Delegates are advised that such items are adequately insured.

# Social Programme

Thursday 3rd September – 19.30

Stand up drinks and food reception (River Terrace, Strand Campus)

Drinks and finger food on the riverside terrace of KCL Strand Campus.

This is a short walk from the Franklin Wilkins building on Stamford Street, across Waterloo Bridge and past Somerset House. Please purchase a ticket in advance of attending: please enquire at registration. Cost to attend: £30.



# Programme Overview

Wednesday 2nd September 2015				
1000-1700	Delirium training day			
Thursday 3rd September 2015				
0800	60m	Registration and opening		
0900	90m	Plenary session 1		
1030	30m	Coffee		
1100	90m	Session 2a Peri-operative delirium	Session 2b Assessing delirium in patients with impaired communication	Session 2c Delirium at end of life
1230	75m	Lunch and poster viewing		
1345	60m	Keynote talk: The use of animal models in building a conceptual framework for delirium		
1445	90m	Parallel 3a Experimental models	Parallel 3b Innovations in delirium education	Parallel 3c Updates in delirium
1615	30m	Coffee		
1645	60m	Workshop 4a Empowering carers	Workshop 4b Delirium detection in care homes	Symposium 4c Understanding specific causes of delirium
1745	15m	Close		
1930	Stand up drinks and food reception (River Terrace, Strand Campus)			

Friday 4th September 2015				
0800	30m	AGM and AOB		
0830	90m	Plenary session 5		
1000	30m	Coffee		
1030	75m	6a Delirium tremens	6b Developing a consensus on an undergraduate curriculum for delirium	6c Best practice for delirium in hip fracture: enhancing recovery
			6d Bridging community care	6e Cerebrospinal fluid studies
1145	75m	Lunch and poster viewing		
1300	90m	Special Round Table Engaging the public and policy-makers: advocating for delirium patients and their carers		
1430	30m	Coffee		
1500	90m	Parallel 7a Setting up a service	Parallel 7b Critical care delirium	
1630	15m	Close: prize giving and 2016 announcement		

# Full Programme

Wednesday 2nd September 2015

Delirium training day: pre-conference multidisciplinary educational session

<b>0900</b>	<b>Registration</b>	
<b>Location: B5 Auditorium</b>		
1000-1005	<b>Introduction and Welcome</b> <i>Emma Vardy, Co-chair of the Scientific Committee, Consultant Geriatrician, Salford Royal NHS Foundation Trust, UK</i>	
1005-1120	<b>Core Topics 1</b>	
1005	Update on the epidemiology and pathophysiology of delirium	<i>Thomas Jackson University of Birmingham, UK</i>
1030	Delirium detection in routine clinical practice	<i>Alasdair MacLulich University of Edinburgh, UK</i>
1055	Preaching Delirium: Educating the Flock	<i>James Rudolph VA Boston Healthcare System, USA</i>
<b>1120-1140</b>	<b>Coffee break</b>	
1140-1250	<b>Core Topics 2</b>	
1140	Delirium prevention	<i>John Young University of Leeds, UK</i>
1200	Nursing care of the patient with delirium	<i>Emma Ouldred King's College Hospital, London, UK</i>
1230	Pharmacotherapy	<i>David Meagher University of Limerick, Ireland</i>
<b>1250-1330</b>	<b>Lunch</b>	
1330-1500	<b>Delirium in special situations</b>	
1330	Delirium at the front door	<i>Lesley Young Sunderland Royal Hospital, UK</i>
1400	Delirium in surgical care	<i>Jason Cross and Ffion Pritchard St Thomas' Hospital London, UK</i>
1430	Delirium in palliative care	<i>Meera Agar Flinders and Sydney Universities, Australia</i>
<b>1500-1515</b>	<b>Coffee break</b>	
<b>Room 1.11</b>		
1515	A: Interactive session: John the Baker	<i>James Rudolph VA Boston Healthcare System, USA</i>
1600	B: Challenging cases	<i>Group discussion with expert panel</i>
<b>Room 1.10</b>		
1515	B: Challenging cases	<i>Group discussion with expert panel</i>
1600	A: Interactive session: John the Baker	<i>James Rudolph VA Boston Healthcare System, USA</i>
<b>1700</b>	<b>Close</b>	



## Thursday 3rd September 2015

<b>0800-0900</b>	<b>Registration and Opening</b>	
0900-1030	<b>SESSION 1 (Plenary)</b> <b>Chair: Alasdair MacLulich Location: B5 Auditorium</b>	
0900	Ageing, frailty and delirium risk	<i>Kenneth Rockwood Dalhousie University, Canada</i>
0930	Changing outcomes in delirium: will we ever have RCT evidence?	<i>Rowan Harwood University of Nottingham, UK</i>
1000	Impact of delirium on children and families	<i>Gillian Colville St George's Hospital, London, UK</i>
<b>1030-1100</b>	<b>Coffee</b>	
1100-1230	<b>SESSION 2A: Perioperative delirium</b> <b>Chair: Karin Neufeld Location: Stamford Street Lecture Theatre (opposite building)</b>	
1100	The overlap and trajectories of perioperative cognitive disorders	<i>Jude Partridge St Thomas' Hospital, London, UK</i>
1120	Can we intervene to prevent or treat perioperative delirium?	<i>Philip Braude Guy's and St Thomas' Hospital, London, UK</i>
1140	Potential intraoperative interventions to modify the course of delirium	<i>Dan Taylor St Thomas' Hospital, London, UK</i>
1200	Translating the evidence into clinical practice: the proactive care of older people going to have surgery (POPS) model	<i>Jugdeep Dhesi St Thomas' Hospital, London, UK</i>
1215	Panel discussion	
1100-1230	<b>SESSION 2B: Assessing delirium in patients with impaired communication</b> <b>Chair: Jan Schieveld Location: Room 1.10</b>	
1100	Testing inattention in patients with dementia	<i>Alessandro Morandi Hospital Ancelle, Cremona, Italy</i>
1120	Measurement of delirium in preverbal infants	<i>Heidi Smith Vanderbilt Hospital, Nashville, USA</i>
1140	Altered level of arousal in Delirium	<i>Zoë Tieges University of Edinburgh, UK</i>
1200	Assessing delirium in patients with impaired communication: Delirium in intubated patients	<i>Christopher Hughes Vanderbilt University School of Medicine</i>
1220	Panel discussion	
1100-1230	<b>SESSION 2C: Delirium at the end of life</b> <b>Chair: Meera Agar Location: Room 1.11</b>	
1100	Delirium in the context of palliative care	<i>Peter Lawlor University of Ottawa, Canada</i>
1110	Delirium assessment tools in palliative care: precision versus intrusion	<i>Peter Lawlor University of Ottawa, Canada</i>
1130	Inter-professional communication in delirium (by video)	<i>Annmarie Hosie University of Notre Dame, Sydney, Australia</i>
1135	Randomised double blind placebo controlled phase II trial of melatonin for prevention of delirium in inpatients with advanced cancer (abstract)	<i>Meera Agar Flinders and Sydney Universities, Australia</i>
1145	Prevalence, mortality and readmission of people with dementia, delirium and other cognitive spectrum disorders in the general hospital (abstract)	<i>Emma Reynish University of Stirling, UK</i>
1155	Development of delirium clinical practice guidelines for palliative care	<i>Shirley Bush University of Ottawa, Canada</i>
1215	Panel discussion	

## Thursday 3rd September 2015 continued

1230-1345	<b>Lunch and Poster Viewing</b>	
1345-1445	<p align="center"><b>Keynote talk: The use of animal models in building a conceptual framework for delirium</b>  <b>Dr Colm Cunningham, Trinity College Dublin</b>  <b>Chair: Alessandro Morandi Location: B5 Auditorium</b></p>	
1450-1615	<p align="center"><b>SESSION 3A: Approaches to biomarker measurement in delirium research</b>  <b>Chair: Sophia de Rooij Location: B5 Auditorium</b></p>	
1445	Imaging delirium with PET	<i>Gideon Caplan, University of New South Wales, Australia</i>
1505	Brain atrophy as assessed by baseline clinical CT scans predicts post-stroke delirium (abstract)	<i>Amanda Barugh University of Edinburgh, UK</i>
1515	Psychomotor disturbances in elderly medical inpatients (abstract)	<i>Geraldine McCarthy, Sligo Medical Academy, Ireland</i>
1525	Peripheral inflammatory markers in delirium after hip fracture (abstract)	<i>Roanna Hall University of Edinburgh, UK</i>
1535	Near infrared spectroscopy in peri-operative delirium	<i>Karin Neufeld Johns Hopkins University</i>
1555	Using EEG in delirium research	<i>Arendina van der Kooi University Medical Center Utrecht, Netherlands</i>
1450-1615	<p align="center"><b>SESSION 3B: Innovations in delirium education and implementation</b>  <b>Chair: Andrew Teodorczuk Location: Room 1.10</b></p>	
1445	Inter-professional education in delirium	<i>Sanjeev Sockalingam University of Toronto, Canada</i>
1505	Carer's knowledge and experience of delirium (abstract)	<i>Philip Thomas Good Hope Hospital, Birmingham, UK</i>
1515	Role of delirium clinic – identifying people at risk of developing dementia and improving the awareness of people at risk (abstract)	<i>Santhana Krishnan University Hospital of North Tees, UK</i>
1525	Diagnostic test accuracy of informant based tools to diagnose dementia in older hospital patients with delirium (abstract)	<i>Thomas Jackson University of Birmingham, UK</i>
1535	Changing practice through e-learning	<i>Lotte van de Steeg Netherlands Institute for Health Services Research, Utrecht, Netherlands</i>
1555	Effecting change through implementation science	<i>James Rudolph VA Boston Healthcare System, USA</i>
1445-1600	<p align="center"><b>SESSION 3C: Research updates in delirium</b>  <b>Chair: Daniel Davis Location: Room 1.11</b></p>	
1445	Hospital coding of delirium versus physician diagnosis in consecutive unselected unplanned admissions: implications for the use of big data	<i>Anne-Marie Haigh University of Oxford, UK</i>
1455	Dementia after delirium in old people after cardiac surgery	<i>Helena Lingehall Umeå University, Sweden</i>
1505	Evaluation of delirium screening tools in geriatric medical inpatients (abstract)	<i>Kirsty Hendry University of Glasgow, UK</i>
1515	Risk factors for delirium among elderly medical inpatients in northern Tanzania.	<i>Jessica Banks Newcastle University, UK</i>
1525	Identification of risk groups in elderly patients with acute medical conditions: new perspectives in the prevention of delirium	<i>Luísa Lagarto Universitário de Coimbra, Portugal</i>
1535	Predictors and aetiology of delirium in older medical inpatients	<i>Niamh O'Regan University College Cork, Ireland</i>
1545	Heterogeneous cognitive trajectories in the first year after hip fracture	<i>Sara Beishuizen University of Amsterdam, Netherlands</i>

## Thursday 3rd September 2015 continued

1615-1645	<b>Coffee</b>	
<b>Workshop 4a</b> <b>Location: Room 1.11</b>		
1645-1745	Empowering relatives and carers in delirium care	Emma Ouldred King's College Hospital, UK
<b>Workshop 4b</b> <b>Location: Room 1.16</b>		
1645-1745	Delirium detection and management in nursing homes	Najma Siddiqi Bradford District Care NHS Foundation Trust Nadine Schofield Let's Respect, UK
<b>Workshop 4c</b> <b>Location: Room 1.10</b>		
1645-1745	Specific causes of delirium: encephalopathies, non-convulsive status and other things not to miss	Debbie Shawcross King's College London, UK Christine Thomas Krankenhaus Bad Cannstatt, Stuttgart, Germany
<b>Workshop 4d</b> <b>Location: Room 1.13</b>		
1645-1745	Core Outcome Measures in Effectiveness Trials (COMET) of delirium	Working Group Meeting (by invitation)
1645	Core Outcome Measures in Effectiveness Trials (COMET) of delirium	Working Group Meeting (by invitation)
1930	<b>DRINKS RECEPTION</b> <b>River Terrace, Strand Campus</b>	

Friday 4th September 2015

<b>0830-0830</b>	<b>AGM and AOB</b> <b>Location: B5 Auditorium</b>	
0830-1000	<b>SESSION 5 (Plenary)</b> <b>Chair: Emma Vardy Location: B5 Auditorium</b>	
0830	Cultural attitudes as barriers to delirium recognition	<i>Andrew Teodorczuk Newcastle University, UK</i>
0900	Assessing brainstem dysfunction in ICU delirium	<i>Tarek Sharshar University of Versailles, France</i>
0930	Pharmacological RCTs in delirium in palliative care	<i>Meera Agar Flinders University and University of New South Wales</i>
<b>1000-1030</b>	<b>Coffee</b>	
<b>Workshop 6a</b> <b>Location: Room 1.11</b>		
1030	Delirium Tremens	<i>Jose Maldonado Stanford University, USA</i>
<b>Workshop 6b</b> <b>Location: Room 1.16</b>		
1030	Developing consensus statement on undergraduate medical curricula	<i>James Fisher Newcastle University, UK Claire Copeland University Hospital Crosshouse and Ayr, UK</i>
<b>Workshop 6c</b> <b>Location: Auditorium B5</b>		
1030	Best practice for delirium in hip fracture: enhancing recovery	<i>Chris Fox and Simon Hammond University of East Anglia; Martyn Patel Norfolk and Norwich University Hospital; Fiona Poland and Anna Varley and Nigel Lambert University of East Anglia</i>
<b>Workshop 6d</b> <b>Location: Room 1.10</b>		
1030	Bridging community care: innovative approaches to integrated psychogeriatric services	<i>Marc Mandell, Tammy Angel and Gemma Holland Watford General Hospital, UK Simon Thacker Royal Derby Hospital, UK</i>
<b>Workshop 6e</b> <b>Location: Room 1.13</b>		
1030	CSF studies in delirium research: lessons learned and future directions	<i>Roanna Hall, University of Edinburgh, UK Rikie Scholtens, University of Amsterdam Sara Beishuizen, Academic Medical Center, The Netherlands</i>
<b>1145-1300</b>	<b>Lunch and Poster Viewing</b>	
<b>Special Round Table</b>		
1300-1430	<i>Martin Prince, King's College London, UK Nadine Schofield, Let's Respect, UK Sophia de Rooij, University Medical Center Groningen, Netherlands Nicci Gerrard, John's Campaign and the Observer, UK</i> <b>Chair: Kenneth Rockwood</b> <b>Location: B5 Auditorium</b>	
<b>1430-1500</b>	<b>Coffee</b>	

## Friday 4th September 2015 continued

1500-1630	<b>SESSION 7a: Setting up a service</b> <b>Chair: David Meagher</b> <b>Location: B5 Auditorium</b>	
1500	Delirium services: challenges and opportunities	<i>Dan Wilson</i> King's College Hospital, UK
1510	Dementia and Delirium Outreach Team (Service description)	<i>Lesley Young</i> Sunderland Royal Hospital, UK
1520	Occupational therapy and the management of delirium in rehabilitation settings (abstract)	<i>Christian Pozzi</i> Fondazione Camplani, Cremona, Italy
1530	When the coroner is involved: medico-legal aspects to designing delirium services (Service description)	<i>Michael Fertleman</i> St Mary's Hospital, UK
1540	Basel Dementia Delirium Program (Service description)	<i>Wolfgang Hasemann</i> University Hospital Basel, Switzerland
1550	The DaD Team: Improving dementia and delirium care in hospitals (Service description)	<i>Mark Kinirons</i> St Thomas' Hospital, London, UK
1600	Panel discussion	
1500-1630	<b>SESSION 7b: Delirium in critical care</b> <b>Chair: Valerie Page</b> <b>Location: 1.10</b>	
1500	Delirium and poor outcome: is there a causal link?	<i>Arjen Slooter</i> University Medical Center Utrecht, Netherlands
1525	The CAM-ICU-10 Delirium Severity Scale (abstract)	<i>Babar Khan</i> Indiana University School of Medicine, USA
1535	Systemic corticosteroids and transition to delirium in critically ill patients (abstract)	<i>Annemiek Wolters</i> University Medical Center Utrecht, Netherlands
1545	Investigating causes for mortality in ventilated, early deeply sedated patients (abstract)	<i>Björn Weiß</i> Charité-Universitätsmedizin, Berlin, Germany
1555	Delirium after cardiac surgery – definition does matter (abstract)	<i>Rakesh Arora</i> University of Manitoba
1605	Drug associated ICU delirium: Clarifying the confusion	<i>John Devlin</i> Northeastern University, Boston, USA
<b>1630-1645</b>	<b>Close: Prize Giving, EDA 2016 Announcement</b>	



# About the speakers

## Keynote Talk

*Colm Cunningham, Neuroscientist, Trinity College Institute of Neuroscience School of Biochemistry and Immunology Trinity College Dublin*

Dr Colm Cunningham is a Neuroscientist with a long standing interest in how systemic inflammation impacts upon the degenerating brain. His research, carried out in Trinity College Dublin, has been supported for many years by the Wellcome Trust who awarded him a Career Development Fellowship to establish the first animal models of delirium during dementia and a Senior Fellowship to further this work. His training in neurochemistry (PhD in TCD), experimental neuropathology and inflammation biology (Post-doc in Southampton with V Hugh Perry) and experimental psychology (Training with Bannerman and Rawlins in University of Oxford) has facilitated a genuinely multidisciplinary approach to the study of the fundamental neuroscience of delirium.



### Talk Abstract

Systemic inflammation has exaggerated effects in the vulnerable (neurodegenerating) brain

Exploiting this phenomenon in 3 neuropathological models (chronic synaptic loss, chronic hypocholinergia, beta-amyloidosis) has led to plausible modes of delirium during dementia

These models can explain and assist in interpretation of multiple observations in the clinical biomarker literature and have also made predictions that have been successfully tested in epidemiological cohorts

Systemic inflammation impacts upon cognitive function by multiple dissociable IL-1-dependent mechanisms and acute dysfunction appears to be dissociable from lasting injury.

## Wednesday

**Emma Vardy - co-chair Scientific Organising Committee and Consultant geriatrician, Newcastle University**

Dr Emma Vardy is a Consultant Geriatrician and Clinical dementia lead at Salford Royal hospital. She is a committee member for the Dementia and related disorders special interest group of the British Geriatrics Society. Having trained in various teaching hospitals in the North of England she acquired skills in the diagnosis of dementia whilst working in a tertiary referral centre in Manchester. She took up her first consultant post in Newcastle upon Tyne in 2011-2015 where she was a member of the dementia steering group and trust delirium lead. During her PhD she studied blood biomarkers in Alzheimer's disease and was subsequently involved in dementia imaging studies. Most recently she published a review of delirium in Parkinson's disease.

**Dr Thomas Jackson - Clinical Research Fellow, University of Birmingham**

Thomas Jackson is a clinical fellow in ageing research at the University of Birmingham and an honorary consultant in geriatric medicine. He is currently completing a PhD investigating pragmatic methods of screening and follow-up of suspected dementia in patients with delirium through a joint research fellowship from Age UK and the British Geriatrics Society. His other research interests include the neuroinflammatory hypothesis of delirium, and the biological and clinical correlates of frailty and sarcopenia.

**Professor Alasdair MacLullich – Professor of Geriatric Medicine, University of Edinburgh**

Following undergraduate medical training, including an intercalated BSc in Psychology at the University of Edinburgh, Alasdair MacLullich completed general medical training and went on to do a PhD on glucocorticoids and

cognitive ageing. He was Clinical Lecturer in Geriatric Medicine from 2000-2005 and an MRC Clinician Scientist Fellow from 2005-2009. He was appointed Professor of Geriatric Medicine at the University of Edinburgh in 2008. He co-founded the European Delirium Association in 2006 and is its current President.

He is active clinically, working in acute geriatric medicine and acute orthogeriatrics. He has a keen interest in improving the detection and management of delirium and dementia in acute hospital patients and leads the regional 'Delirium and Dementia Implementation Group'.

**Jim Rudolph**

Jim Rudolph is a geriatrician and palliative care physician with a passion for keeping older patients functioning in their environment. His innovative clinical research, program development and leadership involve identify at risk older patients during hospitalization and intervening at that critical juncture. He has developed and validated the Clock-in-the-Box, the mRASS, and the eNICE delirium prediction rule. He led the Delirium Toolbox and PILL programs which demonstrated improvements in patient outcomes and were cost-effective. Professionally, he is a Board Member of the American Delirium Society, which advances delirium science, education and practice and will be hosting its annual conference in Nashville TN in May 2016.

**John Young –Professor of Elderly Care Medicine, University of Leeds**

John is Professor of Elderly Care Medicine at the Leeds Institute of Health Sciences. He is Head of the Academic Unit of Elderly Care and Rehabilitation which is based in the Bradford Institute for Health Research. The unit has an established record of addressing key, clinically relevant questions in elderly care and stroke. Important quality improvement work includes involvement in the national

audits of dementia care and intermediate care. In 2009 he was awarded the Lady Illingworth prize for outstanding contributions to services for older people. He was recently appointed as National Clinical Director for Integration and Frail Elderly, NHS England. In this new position John will work with NHS England colleagues and others to improve services for older people nationally.

John trained at the Middlesex Hospital, University of London. He was appointed as a consultant geriatrician in Bradford, West Yorkshire, in 1986. He took on responsibilities as a clinical manager and developed numerous new services including an elderly care assessment unit, a stroke unit and an ortho-geriatric unit. Research interests became embedded in the clinical work and included evaluations (mostly by randomised controlled trial) of the day hospital, aspects of stroke care and intermediate care services.

#### **Emma Ouldred - Dementia Nurse Specialist, King's College Hospital**

Emma is Lead Dementia and Delirium Nurse at King's College Hospital NHS Foundation Trust and works in the Dementia and Delirium Team (DAD) and King's College Hospital (geriatrician-led) Memory Clinic. Emma undertook her general nurse training Thomas Guy and Lewisham School of Nursing. She has co-authored several dementia related articles and book chapters. Emma was also a member of the NICE Delirium guidelines development group. She is a member of the Memory Services National Accreditation Panel (MSNAP). Emma was project lead for the transformation of Marjory Warren Ward (elderly care ward at King's College hospital) into a dementia friendly environment as part of the King's Fund Enhancing the Healing Environment project. Emma is also leading a project at the Princess Royal University Hospital to create Dementia and Delirium champions across the site with funding from Health Education England.

#### **Mona Siyanga RGN BSc (Hons)**

Mona works in the DAD team at King's College Hospital and is the Trust Dementia Education and training lead. She trained in Zambia as an RGN and Nurse Tutor. She also studied inter-professional education at King's College London. Mona was on the steering group of the Marjory Warren project and remains actively involved in the development of Namaste and meaningful activity projects at the Trust.

#### **Sarah Priestley RMN BA (Hons)**

Sarah works in the DAD team at King's College Hospital and also within the Memory Clinic at King's. Sarah undertook her registered mental health nurse training at the Friern Hospital. She also has a post graduate diploma in psychodynamic counselling. She has extensive experience working with older people with dementia and delirium both in the community and the inpatient hospital settings. Sarah is passionate about carers needs and recently established a carers group at King's.

#### **Professor David Meagher- Professor of Psychiatry, University of Limerick, Ireland**

Professor David Meagher was appointed as Foundation Chair and Head of Teaching and Research in Psychiatry at University of Limerick School of Medicine, Ireland in 2009. He is a Consultant Psychiatrist at Midwestern Regional Hospital, Limerick and Vice-President of the European Delirium Association.

His Research interests include the neuropsychiatry of delirium across clinical settings with particular emphasis on palliative care, consultation-liaison psychiatry and elderly medical populations, including research activity focusing on definition and nosology, improving detection and assessment, clinical (motor activity) subtyping, management and prognostic indicators. David's recent work has focused upon the use of computerized technology / electronics in the detection and monitoring of patients with acute cognitive failure/delirium.

#### **Lesley Young - Consultant Geriatrician, Sunderland Royal Hospital**

Lesley qualified in Medicine from Newcastle University in 1989 and completed training in geriatric medicine in the northern region. She undertook a 2 year period of research on delirium, culminating in the publication by the Royal College of Physicians of the first national guidelines on the diagnosis and management of delirium.

She was appointed as a consultant in Sunderland in 1999, being part time since 2002. Lesley is clinical lead for dementia and Mental Capacity at Sunderland and has developed an innovative delirium and dementia outreach team which identifies and advise on cognitive problems throughout the hospital.

#### **Jason Cross, Clinical Nurse Specialist, St Thomas' Hospital, London**

Since qualifying as a staff nurse, Jason's career focus has centred on surgical patients. He has worked within trauma and orthopaedics and joined Guy's and St Thomas' in 2002 in the orthopaedic pre-admission clinic. Jason was one of the leading practitioners involved in developing and implementing the nurse led orthopaedic pre-assessment service. This model of care is now used in the Trust's central pre-operative assessment clinics.

Jason joined the POPS team in 2008 and divides his time between outpatient clinics and the wards. He works in the 'one stop shop' nurse-led clinic for colorectal patients and on the wards he liaises with the surgical teams, providing specialist nursing and medical advice for patients over the age of 65.

Jason also has input into medical student training and is a regular speaker on the surgical pre-assessment process for the anaesthetic department.

#### **Ffion Pritchard, Clinical Nurse Specialist, St Thomas' Hospital, London**

Since qualifying Ffion has worked on general surgery wards both in north Wales and London. She has experience in vascular, urology and breast surgery but took a particular interest in gastrointestinal surgery. She began working as a senior staff nurse on the gastro-intestinal unit at St Thomas' Hospital in 2012 and joined the POPS team in November 2014.

Ffion's current role focus is the integration of the POPS team into the gynaecology service at Guy's and St Thomas'. This involves the care of surgical gynaecology patients from clinic to discharge, utilising comprehensive assessment to support the patient throughout the surgical pathway.



**Meera Agar - Associate Professor, palliative medicine specialist, with academic appointments at the University of New South Wales and Flinders University**

Meera is the clinical trial director for the Ingham Institute of Applied Medical Research in South West Sydney, Australia. She completed her doctoral thesis on delirium in palliative care in 2014. Her research interests include delirium and cognitive impairment in advanced illness, and clinical trials in palliative care.

*Speaker abstract:*

*This session will outline the methodology and results of a recently completed adequately powered randomised controlled trial of antipsychotics to treat specific delirium symptoms in palliative care patients. The implications for trial design for delirium therapeutics and for clinical practice will be considered.*

## Thursday

### Session 1 (Plenary)

**Professor Kenneth Rockwood- Professor of Geriatric Medicine and Neurology**

Kenneth Rockwood has had a longstanding interest in clinical and epidemiological aspects of frailty, dementia and delirium. He has focused his investigations on the complexity of frailty, and on what can be termed 'clinico-mathematical correlation'. Prof. Rockwood has published more than 300 peer-reviewed scientific publications and seven books, including the seventh edition of the Brocklehurst's Textbook of Geriatric Medicine & Gerontology. He is the Kathryn Allen Weldon Professor of Alzheimer research at Dalhousie University, and a staff internist and geriatrician at the Capital District Health Authority in Halifax. He holds several CIHR grants, including as Principal Investigator of the Canada China Collaboration on Aging and Longevity and the Canadian Dementia Knowledge Translation Network. The latter is a national, multicentre project to provide better care for people with dementia by facilitating and carrying out translational research and knowledge translation. A native of Newfoundland, he became a Doctor of Medicine at Memorial University in 1985, completed internal medicine training at the University of Alberta and geriatric medicine at Dalhousie University, where he has been on staff since 1991.

**Rowan H Harwood – Consultant Geriatrician, Nottingham University Hospitals NHS Trust**

Rowan is a consultant geriatrician who maintains an active role in research and teaching. Appointed a consultant in 1996, and Honorary Professor in the University of Nottingham in 2006 he has wide clinical and research interests including delirium, dementia, stroke, continence, rehabilitation, end of life care, falls and clinical ethics. Following 10 years in stroke medicine, in 2009 embarked on a programme to develop and evaluate better ways to manage cognitively impaired older people in general hospitals, and other dementia-related research. He has written 4 books on stroke and dementia, and 80 academic papers.

**Gillian Colville - Consultant Clinical Psychologist, St George's University Hospitals NHS Foundation Trust**

Gillian qualified as a Clinical Psychologist in 1986 at the Institute of Psychiatry in London. After working at

Westminster Children's Hospital and Great Ormond Street Children's Hospital she moved to St George's Hospital in South London in 1995, where she is currently Head of the Paediatric Psychology Service. Her main research interest is the psychological impact on families of a child's admission to PICU. She has completed projects investigating children's memories of PICU, evaluating the impact of a PICU follow up clinic on parental distress and examining long term psychological outcomes in children and how these are associated with parents' symptoms.

*Speaker Abstract:*

*Delirium is increasingly being recognised in children in intensive care although as yet little is known about the risk factors or associated outcomes. In this presentation Gillian Colville will describe her research findings on children's experiences in this setting and, using clinical examples, will show how they can be supported.*

### Session 2A: Perioperative Delirium

**Dr Jude Partridge - Clinical Research Fellow, Guy's and St Thomas' NHS Foundation Trust**

Jude Partridge completed junior medical and registrar training in geriatric medicine in Bristol, Bath, Somerset and London. She obtained a Master's degree before starting her PhD at Guy's and St Thomas' Hospital in 2010. Jude became a permanent member of the POPS (Proactive care of older people going to have surgery) consultant staff in January 2015.

**Dr Philip Braude - ST7 registrar in geriatrics, general medicine, and specialising in perioperative medicine for older people**

Philip is currently working with the Guy's and St Thomas' Hospital POPS team on geriatric syndromes within cardiothoracic surgery.

**Dr Jugdeep Dhesi – Consultant Physician, Guy's and St Thomas' Foundation Trust**

Dr Jugdeep Dhesi trained in general internal medicine and geriatrics in Leicester and London. She was appointed consultant physician in the department of health and ageing at Guy's and St Thomas' in 2005. She is the clinical lead for the innovative POPS service, which began in 2003. The service has rapidly become established both locally and nationally as a clinically effective, high quality, award-winning service.

### Session 2B: Assessing Delirium in Patient with Impaired Communication

**Alessandro Morandi, Hospital Ancelle, Cremona, Italy  
Department of Rehabilitation and Aged Care of the Ancelle Hospital, Cremona, Italy**

Dr Morandi has been involved in several research studies exploring the outcomes related to delirium in intensive care unit patients. He has also investigated biological mechanisms of delirium along through the evaluation of serum biomarkers and neuroimaging techniques. Recently, he has focused on delirium superimposed on dementia (DSD), an emerging area in delirium research, exploring the related outcomes and the main issues related to the diagnosis of DSD.

### Speaker Abstract

Attention deficits are considered the cardinal feature of delirium by the DSM-5. Some authors suggest that the months of the year backwards or the days of the week backwards should be used as reference tests. However, there is a lack of consensus on which test should be routinely used and in particular in patients with dementia.

- Inattention is the cardinal feature of delirium
- Several tests are used to test inattention but there is no specific indications in particular in patients with dementia
- The months of the week backwards and the days of the week backwards might represent two reference test for inattention even in patients with dementia
- The relationship between delirium motor subtypes and attention test is an important and additional challenge

### Heidi Smith, Vanderbilt Hospital, Nashville, USA

Dr Heidi Smith is an Assistant Professor of Anesthesiology and is affiliated with Vanderbilt Hospital and Clinics. She received her medical degree from Sanford School of Medicine of the University of South Dakota and has been in practice for 16 years. She is one of 69 doctors at Vanderbilt Hospital and Clinics who specialise in Anesthesiology.

### Zoe Tiegies- Postdoctoral Research Fellow, University of Edinburgh, UK

Dr Zoë Tiegies obtained a MA (cum laude) in Psychology at the University of Amsterdam, followed by a PhD studying the effects of caffeine on cognitive control using EEG measures. She was a postdoctoral researcher at the University of Glasgow (2008-2010) looking at episodic memory in dementia. In 2010 she joined the Edinburgh Delirium Research Group (University of Edinburgh) led by Prof Alasdair MacLulich. She has a keen interest in delirium neuropsychology and methods for assessing inattention and level of arousal in delirium. Since 2014 she has co-led a UK Medical Research Council-funded multi-site project to develop a software app for detecting and monitoring delirium.

### Speaker Abstract:

- Background: altered level of arousal and the construct of delirium
- Why is assessment of level of arousal in delirium important?
- The 'untestable' patient
- Methods of assessment of level of arousal in research and clinical practice
- Future work

### Christopher G. Hughes- Associate Professor of Anesthesiology and Critical Care Medicine, Vanderbilt University School of Medicine

Christopher G. Hughes, MD is an Associate Professor in the Department of Anesthesiology, Division of Critical Care at Vanderbilt University School of Medicine. Dr. Hughes is an accomplished clinician, educator, and researcher. He is the Program Director for the Critical Care Anesthesiology fellowship and Chair of the Sedation Committee at Vanderbilt University Medical Center. He is one of the principal investigators in the multidisciplinary ICU Cognitive Impairment Study Group at Vanderbilt, and his primary research focuses on the roles of endothelial dysfunction and blood brain barrier injury in cognitive dysfunction after acute medical and surgical illness.

### Focus and Learning Objectives

Assessing delirium in patients with impaired communication: Delirium in intubated patients. Attendees will be presented with methods for using validated instruments to assess patients for delirium while mechanically ventilated, including the Richmond Agitation Sedation Scale (RASS) or Riker Sedation Agitation Scale (SAS) to assess level of arousal followed by the Confusion Assessment Method for Intensive Care Unit (CAM-ICU) or Intensive Care Delirium Screening Checklist (ICDSC) to assess for delirium.

### Session 2C: Delirium at the end of life

### Dr Peter Lawlor- Associate Professor in the Division of Palliative Care and Dept of Medicine, University of Ottawa

Dr Lawlor graduated from medical school in Dublin in 1983. Following postgraduate training in Dublin and a general practice trainee year in the UK, he immigrated to Canada. He completed a Palliative Medicine Fellowship at the University of Alberta in 1996 and subsequently worked with the Edmonton Palliative Care Program. He moved to Ottawa in 2010 to work as Medical Director of an inpatient palliative care unit. He is an Associate Professor in the Division of Palliative Care and Dept of Medicine, University of Ottawa. His research interests include pain assessment, opioid side-effects and delirium. He has published and lectured extensively on these topics.

### Speaker Abstract

Delirium is highly prevalent in palliative care settings. It occurs in the majority of patients in the last hours or days of life and thus is frequently perceived as both a harbinger and irreversible accompaniment of the terminal phase of life. However, certain episodes of delirium such as those associated with hypercalcemia or medication toxicity are still potentially reversible. In adopting an unduly fatalistic approach, we may assume that an episode of delirium is terminal, not investigate it and the assumption then becomes a self-fulfilling prophecy. Alternatively, an overly aggressive approach may expose patients to unnecessary burdensome investigations and interventions. These specific contextual challenges of delirium assessment (including tools) and management decisions in palliative care settings will be addressed in this session.

### AnnMarie Hosie University of Notre Dame, Sydney, Australia

Annmarie Hosie is a palliative care nurse currently undertaking a PhD in delirium in palliative care patients. She is a palliative care clinical nurse specialist, working in the Community Palliative Care Team at Calvary Health Care Sydney and a PhD candidate within the School of Nursing at the University of Notre Dame, Sydney.

### Dr Shirley Bush - Assistant Professor in the Department of Medicine (Division of Palliative Care). University of Ottawa

Dr Shirley Bush is an Assistant Professor in the Department of Medicine (Division of Palliative Care) at the University of Ottawa, Clinical Scientist at the Bruyère Research Institute and a palliative care physician at Bruyère Continuing Care. Originally a London (UK) family physician, she became a Palliative Medicine specialist in Australia.

Dr Bush's primary areas of research include delirium guidelines and management for palliative care patients, the impact of delirium on family and professional caregivers, and undergraduate medical education. She is a co-investigator on a feasibility study for a RCT on the preventative role of melatonin in advanced cancer patients.

### Session 3A: Approaches to biomarker measurement in delirium research

Gideon Caplan - Director of Post Acute Care Services and Director of Geriatric Medicine at Prince of Wales Hospital and a Conjoint Associate Professor at the University of NSW in Sydney, Australia

Gideon Caplan is Director of Post Acute Care Services and Director of Geriatric Medicine at Prince of Wales Hospital and a Conjoint Associate Professor at the University of NSW in Sydney, Australia.

His research involves developing and rigorously testing new health services; he has been a chief investigator on 5 investigator-initiated RCTs, and the pathophysiology of delirium, where he works with a consortium of international investigators.

He has served as a consultant to Commonwealth and State Health Departments. He is also the founding President of the Australasian Delirium Association, and their next biennial conference is in Sydney 14-15 July 2016.

#### Speaker Abstract

*CSF glucose metabolism during delirium correlates with delirium severity and outcomes.*

*<sup>18</sup>FDG PET measures brain glucose uptake. We are studying patients during and after delirium, compared to normal older people and people with stable Alzheimer's.*

*Pilot data indicates different patterns of altered glucose uptake during delirium including areas of decreased and increased uptake. Overall the pattern indicates decreased glucose uptake. Resolution of delirium is uniformly associated with increased brain glucose uptake. Conclusion: FDG PET confirms changes in glucose metabolism in the CNS during delirium.*

Doctor Karin Neufeld - Director, General Hospital Psychiatry, The Johns Hopkins Hospital

Dr Karin Neufeld is Director of General Hospital Psychiatry, at The Johns Hopkins Hospital and Associate Professor of Psychiatry and Behavioral Sciences. Her research interests include the detection and treatment of delirium, addiction treatment, and the study of the epidemiology, measurement and prevention of delirium in the healthcare setting.

Arendina Wilhelmina Van der Kooi

Arendina Wilhelmina van der Kooi graduated in 2010 (cum laude) for her master's in 'Technical Medicine' with a specialization in medical signaling. In 2011 she began her research in the field of delirium and electroencephalography as PhD candidate at the Department of Intensive Care Medicine of the University Medical Center Utrecht under the supervision of dr. A.J.C. Slooter and prof.dr. J. Kesecioglu. She received her PhD on the fifteenth of May 2014. From January 2014, she has been working for the department of Medical Technology and Clinical Physics of the University Medical Center Utrecht in the field of ventricular assist devices.

#### Speaker abstract

*This session will be covering a review on electroencephalography (EEG) and electrooculography (EOG) in delirium research. Some particular aspects will be highlighted as location of EEG electrodes, EEG parameters and duration of EEG measurement.*

Dr Sanjeev Sockalingam- Associate Professor, University of Toronto, Canada

Sanjeev is associate Professor at the University of Toronto. His research activities are focused on two major themes: (1) identification and treatment of psychosocial morbidity in medically ill patient populations, and (2) approaches to translating knowledge on best practices in Psychiatry to better patient care. His clinical interests are medical psychiatry and collaborative mental health care, with a specific focus on the areas of bariatric surgery, hepatology and delirium care.

Lotte Van de Steeg

Lotte van de Steeg, MSc, has worked as a researcher for the research program Organisation and quality of health care at the Netherlands Institute for Health Services Research (NIVEL) since 2010. She is currently finishing her PhD research on improving care for hospitalised older patients and is involved in several research projects focusing on e-learning, patient safety and quality of care. She also holds a position in the editorial office of the Dutch journal for quality and safety in healthcare, KIZ.

#### Speaker Abstract

- An e-learning course for nursing staff significantly improved knowledge of delirium.
- Adherence to guidelines on delirium care also improved.
- Contrary to other studies, baseline delirium knowledge was already high.
- A suspected key aspect to the success of this course, was that hospitals were already working on improving delirium care.

### Workshop 4B

Najma Siddiqi - Consultant Psychiatrist & Research Director at Bradford District Care NHS Foundation Trust and honorary Senior Lecturer at the University of Leeds, Institute of Health Sciences.

Najma is a Consultant Psychiatrist & Research Director at Bradford District Care NHS Foundation Trust; and honorary Senior Lecturer at the University of Leeds, Institute of Health Sciences. Her research focuses on the interface between physical and mental health, including delirium in care homes. Current projects include work to develop and evaluate Stop Delirium! -an enhanced educational package aimed at care home staff to help address delirium risk factors in care home residents; validation of a delirium screening tool in care homes and Cochrane reviews of delirium prevention in care homes and in hospitalised patients.

Elizabeth Teale - Clinical Senior Lecturer and Consultant in Elderly Care Medicine, Bradford Institute for Health Research

Elizabeth Teale is a Clinical Senior Lecturer and Consultant in Elderly Care Medicine at the Bradford Institute for Health Research

Nadine Schofield- Founding Director, Let's Respect

Nadine Schofield Founding Director of Let's Respect – a not for profit organisation dedicated to promoting better care for older people with mental illness. Following a clinical career in mental health nursing and more latterly, operational and strategic whole system transformation and redesign, Nadine served as the National Lead for Later Life Mental Health with

CSIP / Department of Health, UK (2005 – 2009).  
Currently the Lead Commissioner for Older People across health & social care in Worcestershire, UK, she is an advisory board member for the NIHR funded PERFECTED Programme hosted by the University of East Anglia. Following conference presentations in Australia and Germany, her current focus is the second iteration of the Let's Respect resource box to include translation into German (collaborator, Prof Christine Thomas, Klinikum Stuttgart) and supporting the proposed trial of Let's Respect delirium resources within Intensive Care in British Columbia, Canada, with Professor Yoanna Skrobik.

#### *Speaker abstract*

*Delirium is everybody's business: a whole system issue, requiring a whole system response.*

*We know that the prevention, detection and management of delirium is highly variable still, despite efforts to raise awareness, educate and inform clinicians, care staff and the general public. There are areas of excellence of course, but in terms of a coherent and sustained policy focus and more general awareness, delirium remains far from widely or properly recognised, much less understood or adequately cared for.*

*Set against a contemporary context of finite and often reducing resources, competing priorities and demographic challenge, Nadine will explore issues considered key in influencing policy and funding decisions and ultimately, the provision of front line services.*

#### **Workshop: Delirium in care homes: detection, prevention & management**

**Dr Najma Siddiqi, Dr Elizabeth Teale, Nadine Schofield**

The workshop will explore the challenges and pitfalls of detecting delirium in care homes and develop consensus on the optimum approach for both clinical practice and research purposes. It will also present educational packages designed to help care home staff to prevent and manage delirium.

#### **Workshop 4C**

**Debbie Shawcross**

Debbie Shawcross is a Clinician Scientist based at the Institute of Liver Studies, King's College Hospital. She held a HEFCE Clinical Senior Fellowship between 2008 and 2013 and works as a Consultant Hepatologist on the King's Liver Unit. She is lead for Education and Training within the Abdominal Clinical Academic Group in the Academic Health Sciences Centre and is the Training Programme Director for Gastroenterology Specialist Training in South Thames. The aims of her research programme are to characterise the molecular mechanisms underlying the predisposition to infection in liver failure focusing specifically on the synergistic relationship between systemic inflammation and ammonia in the context of delirium and hepatic encephalopathy.

**Christine Thomas- Medical Director, Krankenhaus Bad Cannstatt, Stuttgart, Germany**

#### **Friday Session 5 (Plenary)**

**Dr Andrew Teodorczuk, Consultant Psychiatrist & Honorary Clinical Senior Lecturer, Northumberland Tyne and Wear NHS Foundation Trust and Newcastle University**

Teodorczuk is a Consultant Old Age Psychiatrist working at the Campus for Ageing and Vitality, Newcastle upon Tyne and an Honorary Clinical Senior Lecturer at Newcastle University. He is also a board member on the European Delirium Association.

He has a research interest in dementia and delirium education in the acute hospital and was awarded a Medical Doctorate in 2011 for his thesis entitled, "Developing Educational Approaches for Liaison Old Age Psychiatry Teams". The Grounded Theory research involved exploring the learning needs of general hospital staff by means of qualitative methodology and integrating with educational theory to develop effective strategies to address them. The thesis won the Newcastle University Medical Sciences Doctorate prize and the findings are being successfully implemented within Northumbria Healthcare Trust.

**Tarek Sharshar, University of Versailles, France**

After his training in Neurology and Intensive Care Medicine in Paris, he completed a PhD at the Imperial College of London. He is a Hospital practitioner in the Raymond Poincaré Hospital ICU and Professor at the Versailles University. He has recently joined the Laboratory of Human Histology and animal models at Institute Pasteur (Paris). His research topics are brain dysfunction in critical illness, osmoregulation alteration in sepsis and neuromuscular disorders.

#### *Speaker abstract*

*The brainstem is a highly protected and complex structure that notably controls the arousal, the vital functions and the immune response. Motor and sensory pathways are also passing through the brainstem. Our hypothesis is that brainstem dysfunction is a component of the critical related brain failure, and could particularly account for its association with increased mortality. Assessable clinically and neurophysiologically, this brainstem dysfunction might result from a neuroinflammatory process.*

#### **Workshop 6a**

**Dr Jose Maldonado- Associate Professor of Psychiatry and Behavioural Sciences, Stanford University, USA**

Dr Jose Maldonado is Associate Professor of Psychiatry and Behavioural Sciences at Stanford University Medical Center. He is currently a member of the Board of Directors of the American Delirium Society. Jose has achieved numerous honours and awards, including 2 Dorfman Awards for Best Case Report and Best Original Research for the Academy of Psychosomatic Medicine. In 2004 he also won the DLIN/Fischer Award for significant achievement in clinical research in this field.

#### **Workshop 6b**

**Dr James Fisher, Newcastle University, UK**

Dr James Fisher is a Specialist Trainee in Geriatric and General Internal Medicine at Newcastle University. He is the Co-founder and Treasurer of the Associate of Elderly Medicine Education (AEME), an organization that aims to

organize, promote and support educational activities in the field of Geriatric Medicine. James is also the Trainee Representative for the British Geriatrics Society Movement Disorders Section.

**Dr Claire Copeland - Consultant Physician in Care of the Elderly and Stroke Medicine, University Hospital Crosshouse**

Dr Copeland is a Consultant Physician in Care of the Elderly and Stroke Medicine in University Hospital Crosshouse, NHS Ayrshire and Arran. She is the lead for the Delirium work in Ayrshire and has presented work on the education component at the European and Scottish Delirium Association Conferences.

Dr Copeland is very involved in medical education and is on the organising committees for 'Geriatrics for Juniors' Connect Glasgow and 'Managing Stroke' RCPSCG. She is also the Foundation Program Director for W2 in Scotland. She is a big supporter of social media and its use in healthcare – you can follow her @Sparklystar55

#### *Speaker Abstract*

*Delegates are invited to take part in this dynamic and interactive workshop to develop a consensus statement on undergraduate delirium education.*

*Following a short presentation delegates will divide into small groups to discuss and feedback on:*

- *What should be taught?*
- *How should it be delivered?*
- *Who should deliver it?*

#### **Workshop 6c**

**Dr Chris Fox, University of East Anglia, UK**

Chris's main areas of work have involved evidence based mental health, pharmacological and non-pharmacological interventions in dementia. He has developed areas of dementia health service research in primary care, care homes and acute hospital settings.

Current research themes are focused on enhancing care for patients with established with dementia and improving early intervention and prevention strategies. Their research work is currently funded by the National Institute of Health Research, industry and charitable foundations.

They have a national and international network of research collaborators and is recognised internationally as a leading researcher in older peoples' mental health.

**Dr Simon Hammond – Programme Manager and Research Fellow, University of East Anglia**

Dr Simon P Hammond is the Programme Manager and Research Fellow of the PERFECTED (Peri-operative Enhanced Recovery hip FracturE Care of paTiEnts with Dementia) research programme. Dr Hammond is Psychologist and early carer researcher interested in evaluating complex interventions across the health and social services spectrum.

**Dr Martyn Patel- Geriatrician, Norfolk and Norwich University Hospital**

Dr Martyn Patel is a geriatrician at the Norfolk and Norwich University Hospital. He is the Dementia Lead for NNUH and co-lead for Ageing Research in CRN Eastern. His mission is to persuade fellow "coal face" NHS workers that research is for the many, not the few.

#### *Speaker abstract*

*Policies, priorities and people: mixing methods to highlight implementation issues.*

*This session will outline the innovative use of a combined UK wide Freedom of Information and International Telephone Survey exercise seeking to provide a current picture of best practice for hip-fracture care for patients with cognitive impairments; report emergent findings in relation to policies, priorities and clinical experiences of implementation in practice.*

**Fiona Poland - Professor of Social Research Methodology, School of Health Sciences, University of East Anglia**

Prof Fiona Poland is a Professor of Social Research Methodology in the School of Rehabilitation Sciences at UEA, her expertise is in study design, dementia care including paid and family carers, participative research and embedded qualitative research. Prof Poland is overall qualitative lead for PERFECTED.

**Anna Varley- Senior Research Associate, Norwich Medical School, University of East Anglia**

Anna Varley is Senior Research Associate in Mixed Methods based in Norwich Medical School, UEA. Mrs Varley is a registered Social Worker and has a wide range of methodological and applied expertise in the health and medical sector.

**Nigel Lambert- Research Consultant, University of East Anglia**

Dr Nigel Lambert is Senior Research Associate in Qualitative Methods based in the School of Rehabilitation Sciences, UEA. Dr Lambert has a wide range of experience in both biological and social sciences and has been involved in various qualitative studies primarily in the health and medical sector.

**Dr Chris Fox, University of East Anglia, UK**

Chris's areas of work have involved evidence based mental health, pharmacological and non- Dr Chris Fox is Chief investigator and PERFECTED lead. Dr Fox is a Clinical Senior Lecturer/Honorary Consultant Psychogeriatrician based on the Norwich Medical School. His main areas of work involve evidence based mental health, pharmacological and non-pharmacological interventions in dementia.

#### **Workshop 6d**

**Marc Mandell- Consultant Psychiatrist, Watford General Hospital**

Marc Mandell is a Consultant Psychiatrist at Watford General Hospital and the head of the Watford Raid team (Rapid Assessment, Interface and Discharge).

### Tammy Angel – Consultant Physician, Watford General Hospital

Tammy Angel is a Consultant Physician and Clinical Director of Care of the Elderly for West Hertfordshire Hospital NHS Trust. Dr Angel has been credited with greatly improving the management of older patients' care within her trust and was a finalist for the HSJ Inspirational Woman of the year award 2014.

### Gemma Holland – Occupational Therapist, Watford General Hospital

Gemma Holland is a specialist Occupational Therapist working on The Dual Frailty Unit at Watford General Hospital, West Hertfordshire Hospital Trust. She has completed a Quality Improvement Fellowship run by Health Education East of England and the King's Fund. Her interests are in dementia and delirium. She is currently involved in the design and implementation of a Delirium Recovery Programme in collaboration with Dr Tammy Angel.

### Dr Simon Thacker- Lead Consultant Psychiatrist, Royal Derby Hospital

Dr Simon Thacker is the Lead Consultant Psychiatrist for the liaison team at Royal Derby Hospital.

### Workshop 6e

#### Roanna Hall- Clinical Research Fellow, University of Edinburgh, UK

Roanna Hall is a graduate of the University of Edinburgh Medical School, and a Member of the Royal College of Physicians of Edinburgh. She entered specialty training in Geriatric Medicine in 2007 and undertook a Research Training Fellowship funded by the British Geriatric Society and AgeUK from 2009 to 2013, completing a PhD on the role of cortisol and inflammation in delirium and cognitive decline after hip fracture. She is currently completing her specialist clinical training while maintaining a research interest in delirium mechanisms. She lives in Edinburgh with her husband and 3 year old daughter.

#### Speaker Abstract

- This introductory talk will outline the current published literature examining cerebrospinal fluid in delirium and discuss recent advances and expansion in the field
- Delegates will gain an understanding of the contribution of CSF research to the understanding of delirium pathophysiology
- This workshop will also cover practical, ethical and organisational challenges such as biomarker standardisation, crucial for the field of CSF research in delirium. New data will be presented from international speakers on inflammation, S100B and melatonin, and future directions for this research will be discussed

#### Rikie Scholtens, University of Amsterdam

#### Sara Beishuizen- Medical Researcher

Sara Beishuizen graduated from the University of Amsterdam and is currently a Medical Researcher at the Academic Medical Center (AMC) in The Netherlands

### Special Round Table

#### Professor Martin Prince, King's College London, UK

Martin Prince is Professor of Epidemiological Psychiatry,

Head of Department of the Health Service and Population Research department, and joint-Director of the Centre for Global Mental Health which is a joint King's Health Partner and London School of Hygiene centre. He trained in Psychiatry at the Maudsley Hospital and in Epidemiology at the London School of Hygiene and Tropical Medicine. His work is oriented to the salience of mental and neurological disorders to health and social policy in low and middle income countries (LMIC), with a focus on ageing and dementia. He has coordinated, since 1998 the 10/66 Dementia Research Group, a network of researchers, mainly from LMIC working together to promote more good research into dementia in those regions. The group has published 100 papers covering dementia prevalence, incidence, aetiology and impact and contributed to knowledge of public health aspects of ageing and chronic disease in LMIC.

He was co-author of the Dementia UK report that informed the UK Government's National Dementia Strategy. He led the development of the widely reported ADI World Alzheimer Reports for 2009 (prevalence and numbers), 2010 (societal cost), 2011 (early intervention), 2013 and 2014 and was a leading contributor to the WHO World Dementia Report 2012. He was one of three editors for the 2007 Lancet Series on Global Mental Health, and is committed to further research and advocacy to support the call for action for improved coverage of evidence-based community treatments. He coordinated the development of the WHO Mental Health Gap Action Plan (mhGAP) clinical guidelines for dementia care by non-specialists in LMIC

#### Sophia de Rooij, University Medical Center Groningen, Netherlands

#### Nicci Gerrard- John's Campaign and the Observer, UK

Nicci Gerrard is a bestselling novelist, a journalist and - after her experience with her father, whose stay in hospital was catastrophic, a campaigner for the rights of carers to accompany those with dementia when they are in hospital.

#### Speaker Abstract:

*Description of John Gerrard's tragic experience in hospital Birth of John's campaign; its aims and the progress it has made.*

### Session 7a: Setting up a service

#### Dr Dan Wilson- Consultant Physician, King's College Hospital, UK

Dr Wilson trained in Cambridge and completed specialist training in North London at University College Hospital, London, the Whittington and also at the Alfred Hospital in Melbourne, Australia.

He joined King's in 2006 and is the clinical lead for King's Older People's Assessment and Liaison Service (KOPAL). He is part of the Southwark and Lambeth Memory service (SLMS) and has a particular interest in delirium.

He is the Trust clinical lead for the Department of Clinical Gerontology and the Integrated Care Programme for Frail Older people. He also works closely with the Multidisciplinary Heart Failure service at King's. He is an infection control lead for the division of Trauma, Emergency and Acute Medicine.

**Dr Lesley Young - Consultant Geriatrician, Sunderland Royal Hospital**

Lesley qualified in Medicine from Newcastle University in 1989 and completed training in geriatric medicine in the northern region. She undertook a 2 year period of research on delirium, culminating in the publication by the Royal College of Physicians of the first national guidelines on the diagnosis and management of delirium.

She was appointed as a consultant in Sunderland in 1999, being part time since 2002. Lesley is clinical lead for dementia and Mental Capacity at Sunderland and has developed an innovative delirium and dementia outreach team which identifies and advise on cognitive problems throughout the hospital.

**Dr Michael Fertleman, Imperial Health Care NHS Trust, UK**

Dr Michael Fertleman is a Consultant Physician with a specialist interest in the medical management of surgical patients. He is the Lead clinician for the medical care of elderly orthopaedic patients at both Charing Cross and St Mary's Hospitals. Michael is also a Royal College of Physicians Tutor at St Mary's. He is a non-practicing Barrister with an interest in litigation avoidance. He has research interests in cognitive deterioration following surgery.

**Dr Wolfgang Gasemann- Clinical Nurse Specialist, Univeristy Hospital Basel, Switzerland**

Dr Wolfgang Hasemann is a clinical nurse specialist and a nursing scientist located in Basel Switzerland. He developed the Basel Dementia Delirium Program and in his presentation he will talk about chances and pitfalls of developing clinical delirium management. In his daily business he is member of both, a nurse led delirium consultation service and also member of a geriatric consultation service, where doctors and advanced practice nurse provide a common clinical consultation service. The effect of his developed program is accepted for publication can soon be read in the International Journal of Nursing studies.

*Speaker Abstract*

1. *Coming a long way: Delirium management components introduced and challenges with long-term management*
2. *Precipitation delirium factors (causation) and delirium intensifying factors: Priorities in handling delirious patients*
3. *Structural support options for doctors and nurses: Nurse led delirium consultation service and Interprofessional geriatric consultation service.*

**Arjen Slooter**

Arjen Slooter was research fellow in Neuro-Epidemiology at Columbia University, New York and received a PhD in Epidemiology from Erasmus University Rotterdam, on a thesis on dementia. During his residency in Neurology in the UMC Utrecht, he became enthusiastic for Neurocritical Care. He is currently working there as consultant neurologist-intensivist. Still fascinated by neuropsychiatry, his research focus is on delirium in ICU patients. He currently works on an EEG-based device to detect delirium, functional connectivity in delirium, drug side-effects and delirium, postoperative delirium and long-term outcomes. Arjen lives with wife Barbara, daughter Pien and son Bas in beautiful Utrecht.

*Speaker Abstract*

*From ancient times, it is known that delirium may be a sign of imminent death.*

*The association between delirium and poor outcome is however complex and may be subject to various types of bias.*

*Using advanced statistical modeling to overcome these issues, delirium was not found to cause death in critically ill patients, and likely has a causal role in the development of long-term cognitive impairment in many cases.*

**Professor John W. Devlin- Professor of Pharmacy, Northeastern University**

John W. Devlin, PharmD, FCCM, FCCP is a professor of pharmacy at Northeastern University and a clinical scientist in the Division of Pulmonary, Critical Care and Sleep Medicine at Tufts Medical Center in Boston, MA. His federally-funded research program is focused on the detection, prevention and treatment of delirium in the ICU and the use and assessment of sedation in the critically ill. Over his career, Dr. Devlin has published more than 100 papers and is currently a member of the editorial board of Critical Care Medicine and chair of an international effort focused on developing new clinical practice guidelines for pain, agitation, delirium, early mobilization in critically ill adults.

*Speaker Abstract:*

*A number of recent cohort studies, using time-dependent, multinomial regression methods, have helped clarify the association between benzodiazepine, corticosteroid and anticholinergic medication use and delirium in the ICU.*

*This presentation will help ICU clinicians better understand the current literature in this area and implement strategies to reduce medication-associated delirium in practice.*

