

ROLE OF AGE ON POSTOPERATIVE DELIRIUM (POD) INCIDENCE IN UROLOGY PATIENTS

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Abstract

Background: Delirium is a frequent post operative disorder to the sick and elderly, and always has been associated with extent of day stay in hospital, and certainly more cost for the hospital as well. The delirium causes an increased mortality and an increasing of mental status deterioration characterized by reduction of environmental recognition as well as the disorder of alertness. The purposes of this study are: The effectiveness of routine screening of postoperative Delirium in the elderly using Confusion Assessment Method (CAM). Psychiatrists are not necessary in this case. Understanding of risk factors and strategies for prevention and treatment, -Understanding of the impact of this psychotic disorders in postoperative morbidity and mortality. Recognition of the economic impact of these disorders in the health service. Describing of the etiology and incidence of Delirium post-operative.

The material and methods: In this study are included 2890 patients aged over 65 years who underwent an operation at the urologic clinic. This study is prospective and random. All patients with psychological problems in admission and that were treated for these pathologies before admission in Urology Clinic are excluded from the study.

Results: Are evaluated all the data taken from patients and from their examinations as: age, usage of medications, symptoms and problems, biochemical and clinical balance, hemodynamic examination, and preoperative, intra operative and postoperative evaluations. Is observed that post operative Delirium occurred at 543 patients from 2890 in total on the average of 19% of patients. Incidence was increased with increasing of age from 16%, 19%, to 23%.

Conclusion: Postoperative Delirium occurs as a result of the combination of several factors, not just those related to internal physiological age, but combining of these factors with the diseases which carries this age, with

medications used for this age, with surgical stress, with biochemical imbalances, hemodynamic problems, and electrolytic disorders as well.

Key word: POD, CAM, surgical stress, physiological age.

Introduction

With the increase of the average age the surgeries in elderly are also increased. The surgery plays an important role on emotional and spiritual deterioration on elderly. As per American psychiatric association Delirium is defined as "disorientation to time place and person and decrease of ability to concentrate or to pay attention or decrease ability for correct perception". Post operation Delirium is closely associated with high mortality and morbidity and with longer hospitalization.

Being able to diagnose Delirium is the main goal as per it is diagnosed without any specific laboratory tests or other kind of examination and patients don't have physical changes that could assist on delirium diagnoses (even if they have psychophysical changes they could be associated with other pathologic). New technology in surgery and anesthesia and improved postoperative intensive care has made surgeries in elderly possible. Regardless of improved surgery outcome, on elderly a large number of that patient have experience on cognitive disorders. Patients that are delirious often are disoriented on person, are unable to make decisions, unable to perceive danger and have short term memory loss. Risk factors to this complication are: advanced age, increase on medication usage, cerebral damages, surgery and anesthesia, hypoxia, infection, stress, overwhelmed, electrolyte disbalance, pain and endocrine/ metabolic disorders. Delirium is a very costly complication; it costs a lot to diagnose, to treat and to deal with other complications that are closely related to Delirium. Hearing and vision problems are highly associated with this problem. Etiology of psychiatrist complication postoperatively is multifactorial. There are few mechanisms known that