

# Prevention and Treatment of Postoperative Delirium in the Elderly

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## Intro

Postoperative delirium (POD) is a common complication post-surgery, particularly in the elderly, impacting recovery and outcomes. This review aims to evaluate the effectiveness and safety of interventions for POD prevention and treatment.

## Methods

- Narrative systematic review of reviews
- MEDLINE, EMBASE and CINAHL
- 2017 to September 29, 2023
- Included systematic reviews, practice guidelines
- Adults aged  $\geq 60$  years

## Results

- Of 2295 references, 36 reviews selected (see PRISMA 2020 diagram).
- Multicomponent interventions show promise in reducing POD incidence, especially in hip fracture patients.
- Dexmedetomidine may reduce delirium incidence.
- Evidence on other pharmacological interventions and anesthesia types is inconclusive.

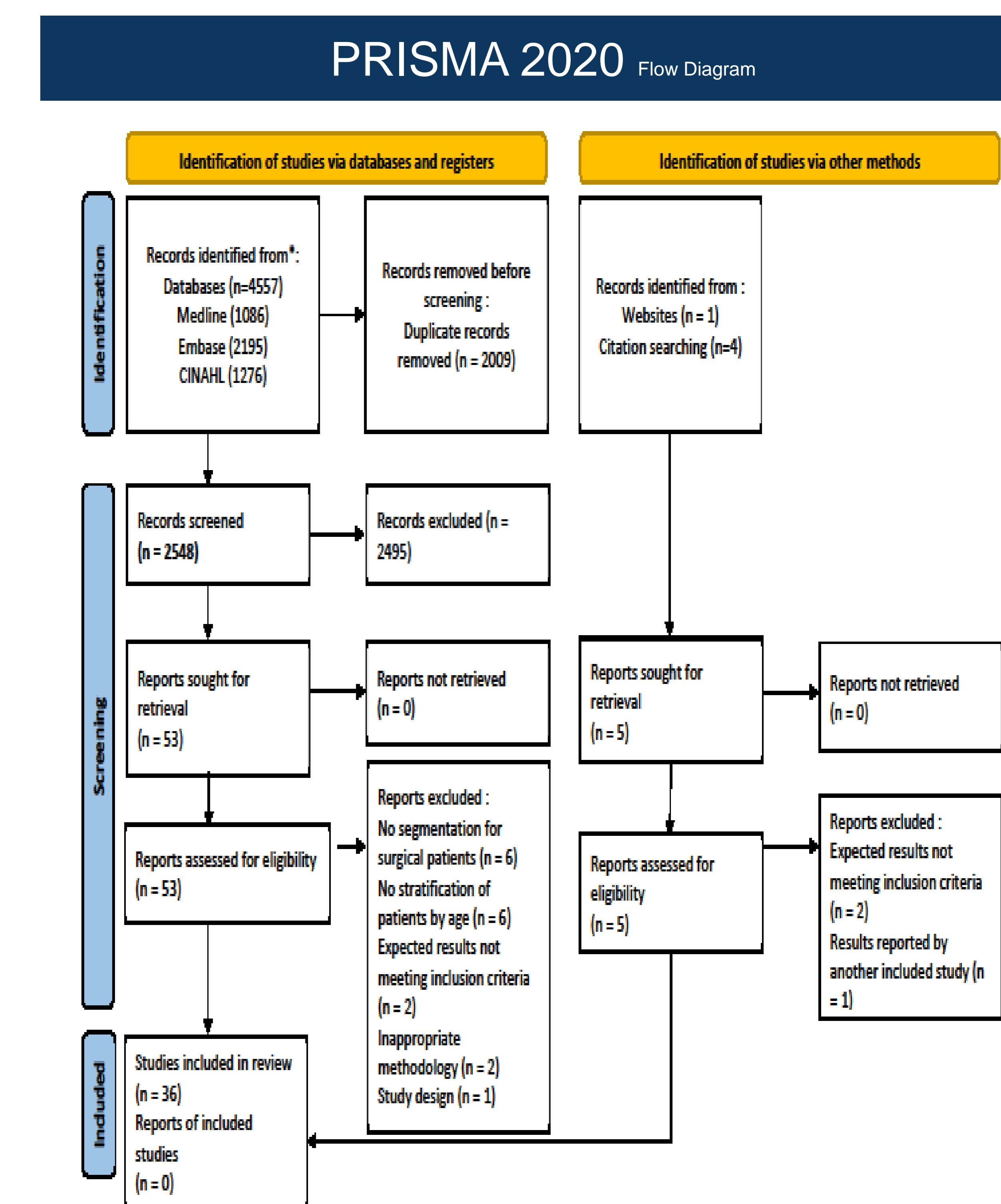
**Institutions should support multi-component interventions for POD, recognizing their positive outcomes. Dexmedetomidine holds promise, but further research is needed. Surgeons, anesthesiologists and nurses must implement appropriate protocols based on current evidence.**



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## Discussion

- Multi-component interventions yield generally positive outcomes, though the quality of evidence varies.
- Dexmedetomidine shows potential in reducing delirium incidence, but data on severity and duration are limited.
- Anesthesia monitoring may reduce POD following specific types of surgeries.





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