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The incidence of delirium in hospitalized children with cancer

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Objective: Delirium in children is associated with increased neurocognitive impairment and mortality. There is limited data on the incidence of delirium in hospitalized children with cancer. Incidence is hypothesized to be 10%. The objective of this study is to assess the incidence of delirium in hospitalized children with cancer and if age or hospital admission diagnosis carries increased risk.

Study Design: This is a prospective, cohort study incorporating a validated delirium screening tool, Cornell Assessment of Pediatric Delirium (CAP-D), to identify delirium in hospitalized children with cancer. This was a convenience sample of children admitted to a single center pediatric oncology unit. Bedside nurses completed education on the CAP-D score and a 0.90 nursing inter-rater reliability was achieved. CAP-D scores were assessed twice a day throughout the child's admission.

Results: A total of 94 consecutive admissions, included 43 patients and 581 hospital days. Of the 94 admissions, there were 49 girls and 44 boys, age distribution 6 months to 17.5 years, with a mean age 6 (sd=4.7). Delirium diagnosed in 11 children, for an incidence of 11.7% with recurrence rate of 27.2% (n=3). Patients with primary cancer diagnosis of ALL(27.2%,n=3) and neuroblastoma(27.2%,n=3) carried higher risk for delirium along with admitting diagnosis of new onset cancer(45.4%,n=5) and chemotherapy(36.4%,n=4). Children between ages of 1-3(54.55%,n=6) and 3-6(36.3%,n=4) are most at risk.

Conclusion: In this study, children with cancer are at risk for developing delirium during hospitalization. Further studies are needed to explore short-term and long-term outcomes to improve the care we provide.

Biography

Tammy Camelli has completed her DNP at the age of 49 years from Walsh University. She is a Pediatric Nurse Practitioner in the Pediatric Intensive Care Unit at Akron Children's Hospital, Akron, Ohio.

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