

Updated Systematic Review and Meta-Analysis Delirium Prevalence in Iranian Hospitals Patients

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ABSTRACT

Background: Delirium is a clinical neuropsychiatric syndrome, the main characteristic of which is a disturbance of consciousness affecting the patient's psychological state, and various factors are effective in causing it. the aim of study is prevalence of delirium in the Iran using a meta-analysis method.

Methods: In this study, which was conducted in the group of patients hospitalized in Iranian hospitals, the prevalence of delirium was investigated. The search was carried out in the domestic databases of Iran and international databases including PubMed, Scopus, ISI, Science Direct and Google Scholar search engine in Farsi and English languages. The results of the extracted articles were entered in the checklist designed by the researchers and the extracted results were analyzed in the CMA software.

Results: In the initial search of this study, 766 articles were found, of which 458 articles were excluded in the initial screening, 98 articles were excluded from the study due to repetition in the search, and finally 25 articles were included in the analysis stage. According to the findings, the overall delirium prevalence is 22% (CI: 16.8-28.3%), the overall delirium prevalence in heart surgery patients is 20.2% (CI: 12.7-30.6%), and the delirium prevalence in the elderly is 44.3% (CI: was 20.7-70.8%).

Conclusion: It is necessary to conduct preventive studies in this field to reduce this amount.

Introduction

Hospitalization of the patient indicated various complications including infection (respiratory, urinary, blood), nervous system, digestive, and psychological diseases. one of the important complications after hospitalization of patients is delirium, which is a disordered cognition [1-2]. delirium is a clinical neuropsychiatric syndrome, the main characteristic of which is a disturbance of consciousness affecting the psychological state of the patient, and

various factors are effective in causing it. The symptoms of this disorder appear in a short period of time and may be accompanied by fluctuations during the day and night [3-5].

Various factors have been effective in causing delirium, and the underlying and accelerating factors have been mentioned as delirium risk factors. In fact, the underlying factors include the history of cognitive disorders in the patient before hospitalization, the presence of disease complications such as the experience of unrelieved pain, vision disorders, hearing disorders, and the history of concomitant diseases in the hospitalized person (before

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or during hospitalization). Hospitalization pointed out. Among the effective and accelerating factors of delirium in patients admitted to the ICU the use of sedatives, severe sepsis, hypotension, and hypoxemia [6-9].

Delirium occurs during critical illnesses and is a common disorder among hospitalized patients, which leads to various complications among patients. Delirium is characterized by fluctuations in cognitive ability and alertness. If the underlying disease related to the cause of delirium is removed, this disorder will improve [10-12].

Delirium may exist in all hospital departments, but its prevalence is higher in intensive care units (ICU) than in other departments. So that the occurrence of this disease in the ICU is influenced by factors such as the severity of the disease, the number of patients undergoing mechanical ventilation and the type of disease [13]. ICU are places for admitting patients with acute problems and special conditions, which causes many complications [14].

Delirium may be caused by various diseases such as heart surgery, having an elderly disease, a history of viral diseases such as Covid-19, and overall hospitalization. In fact, the mentioned diseases cause the patient to be hospitalized in the ICU, which leads to the occurrence of delirium in these patients [15-16]. In order to make an early diagnosis and also to reduce the factors affecting delirium, it is necessary to have the necessary information and statistics on the prevalence of delirium [17-18].

Aim

Meta-analysis study role in the decision-making of experts in the field of healthcare [19-22]. Considering the role of psychological problems and their impact on the health of patients as well as the increasing hospitalization of patients in special wards, for this reason this study was conducted with the aim of report the delirium prevalence in iran.

Methods

In this study, which was designed based on the registration system of systematic review studies and

based on the PARISMA guidelines [23], the prevalence of delirium in Iranian patients was investigated.

The inclusion criteria for the extracted articles include: 1- Articles published in Farsi and English, 2- The availability of the full file of the published articles, 3- The report of the prevalence of delirium in patients should be mentioned as a percentage.

Exclusion criteria for the extracted articles include: 1- Articles published in congresses, 2- Case report, interventional, systematic review and meta-analysis articles, qualitative articles, 3- Articles with incomplete data.

The search keywords included the keywords including prevalence, delirium, rate, patient and the country of Iran, which are found in the domestic databases of Iran, such as SID, MagIran, IranMedex, and international databases including PubMed, Scopus, ISI, Science Direct, and the search engine. Google Scholar was searched in Farsi and English. It should be noted that the search was conducted by two researchers who had complete mastery of scientific topics and searching in international databases and systematic review articles and meta-analysis. If there was a difference between the extracted articles for any reason, the search was done by the third researcher and a final decision was made. In order to fully extract the desired articles on the delirium prevalence in Iranian patients, the references of the extracted articles were studied and if an article mentioned the delirium prevalence, it was included in the study.

In order to check the methodological quality of the studies, a tool was used that had questions in the field of 5 items of the study design, description of the characteristics of the studied samples, the comparison group, the tools used and the sample size. The scores of this tool for each item ranged from zero (meaning a lower methodological quality score) to 3 (meaning a higher methodological quality score).

The results of the extracted articles were entered in the checklist designed by the researchers (Table 1) and the extracted results were analyzed in the CMA software.

Table 1- Specifications of the articles

-	Name of the author	place	Years	Department Name	N	%
1	Jannati et al [24]	Mazandaran	2013	Department of cardiac surgery	404	28.5
2	Jodati et al [25]	Tabriz	2013	Department of cardiac surgery	329	4.9
3	Cheragh et al [26]	Tehran	2015	Department of cardiac surgery	40	22.5
4	Eizadi-Mood et al [27]	Isfahan	2014	Department of cardiac surgery	325	44.31
5	Shadvar et al [28]	Tabriz	2013	Department of cardiac surgery	200	23.5
6	Salari et al [29]	Rasht	2017	Department of cardiac surgery	108	38
7	Rad et al [30]	-	2014	Department of cardiac surgery	370	23.24
8	Hassani et al [31]	Urmia	2010	Department of cardiac surgery	514	2.33
9	Ganavati et al [32]	Tehran	2009	Department of cardiac surgery	250	47

10	Ashraflashkari et al [33]	Ahvaz	1999	Department of cardiac surgery	30	10
11	Bagheri et al [34]	Isfahan	2017	Special care	100	34
12	Rezvani et al [35]	Isfahan	2016	Special care	100	46
13	Rajabpour et al [36]	Rasht	2014	Special care	148	27.2
14	Modabernia et al [37]	-	2002	Special care	245	13.4
15	Heidari et al [38]	Isfahan	2014	Special care	270	44.5
16	Darabi et al [39]	Kermanshah	2023	Special care	89	22.3
17	Valizade et al [40]	Urmia	2023	Special care	680	1.8
18	Foroughan et al [41]	Ahvaz	2016	elderly patient	200	22
19	Golparvaran et al [42]	Tehran	2022	elderly patient	300	43
20	Beyraghi et al [43]	Tehran	2014	Psychiatry	201	15
21	Beiranvand et al [44]	Khorrarnabad	2013	Department of surgery	200	24
22	Jouybari et al [45]	Gorgan	2012	Department of surgery	75	30.6
23	Ashraflashkari et al [33]	Ahvaz	1999	Department of surgery	30	3.3
24	Hosseini et al [46]	Sari	2011	The whole hospital	600	16
25	Hosseini et al [47]	Yazd	2016	The whole hospital	256	14.8
26	Asaee et al [48]	Khorrarnabad	2008	Normal section	240	25.83
27	Alizadeh Arimi et al [49]	Sari	2023	Special care (covid-19)	50	22
28	Gholi et al [50]	Tehran	2024	Elderly covid-19	310	70
29	Alizadeh Arimi et al [49]	Sari	2023	normal part (covid-19)	259	15.8

Results

In the initial search of this study, 766 articles were found, of which 458 articles were removed in the initial screening. 98 articles were excluded from the study due

to repetition in the search, and finally 25 articles analyzed (Figure 1).

According to the findings, the overall prevalence of delirium is 22% (CI: 16.8-28.3%), the delirium prevalence in heart surgery patients is 20.2% (CI: 12.7-30.6%), and the delirium prevalence in the elderly is 44.3% (CI: was 70.8-20.7%) (Figure 2-12).

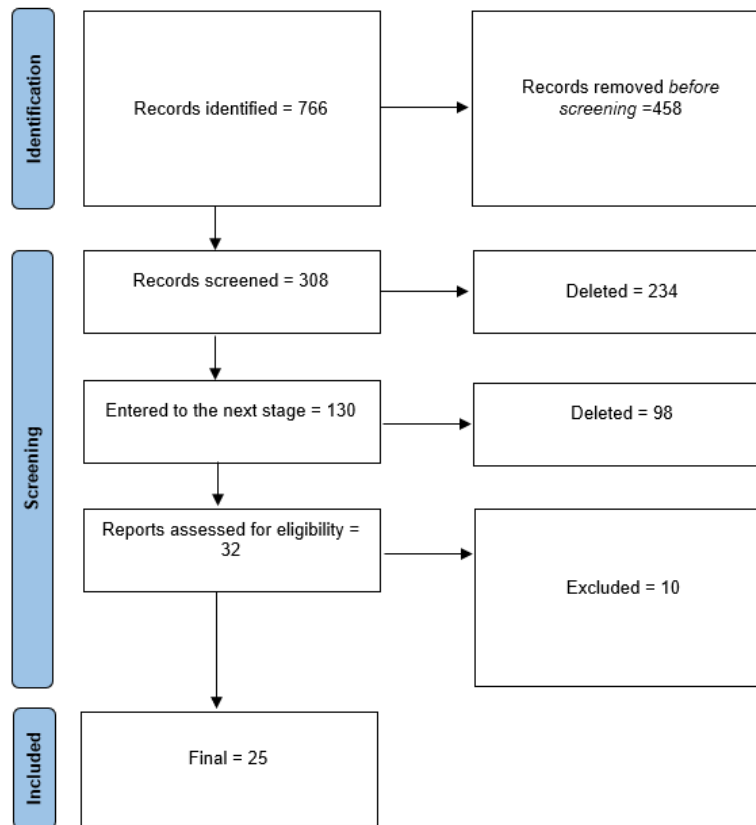


Figure 1- Articles included in the study

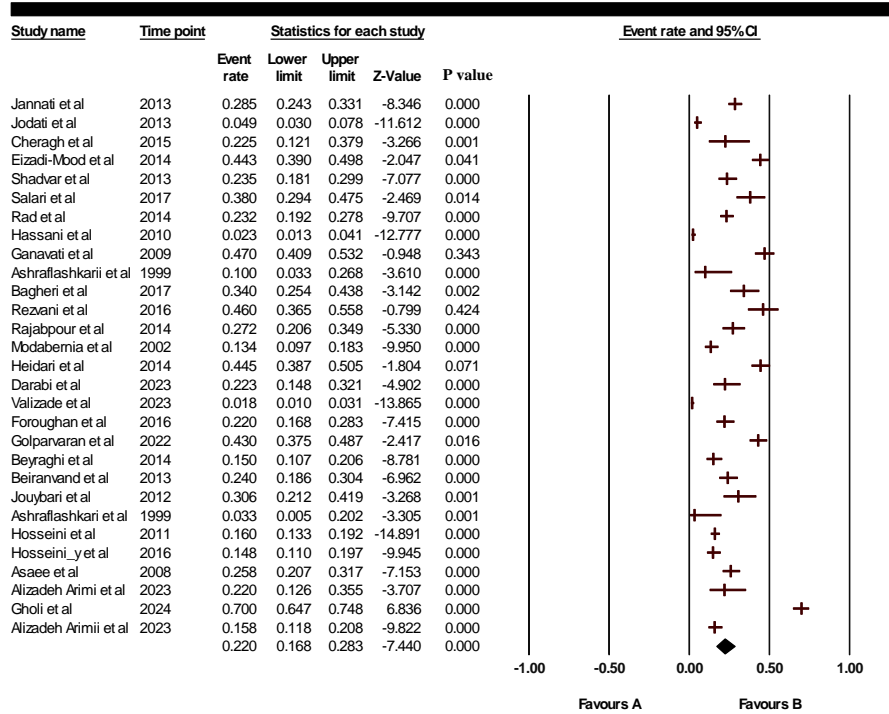


Figure 2- General delirium prevalence in patients admitted to hospitals in Iran

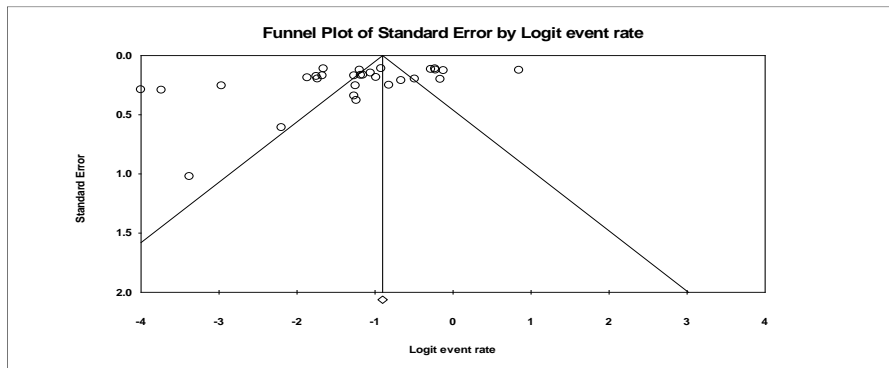


Figure 3- Phenol plot diagram for the delirium prevalence in hospitalized patients in Iranian hospitals

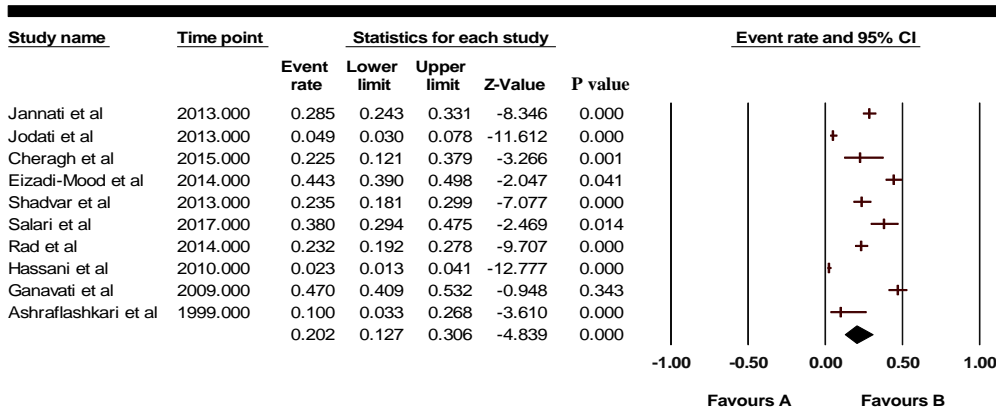


Figure 4- The overall delirium prevalence in patients hospitalized in the cardiac surgery department of Iranian hospitals

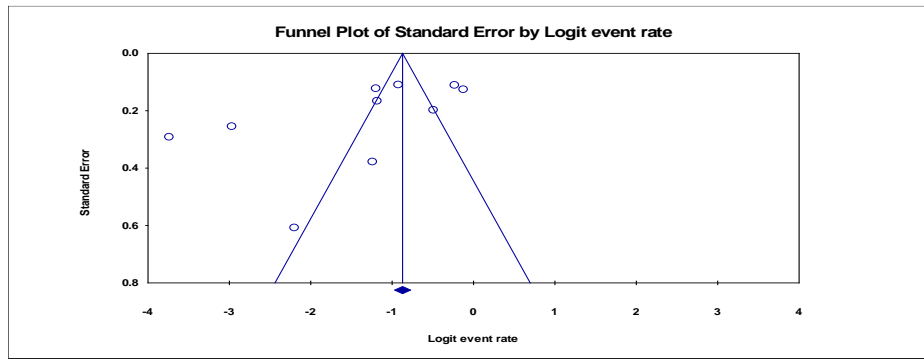


Figure 5- Phenol plot diagram for the delirium prevalence in heart surgery patients hospitalized in Iranian hospitals

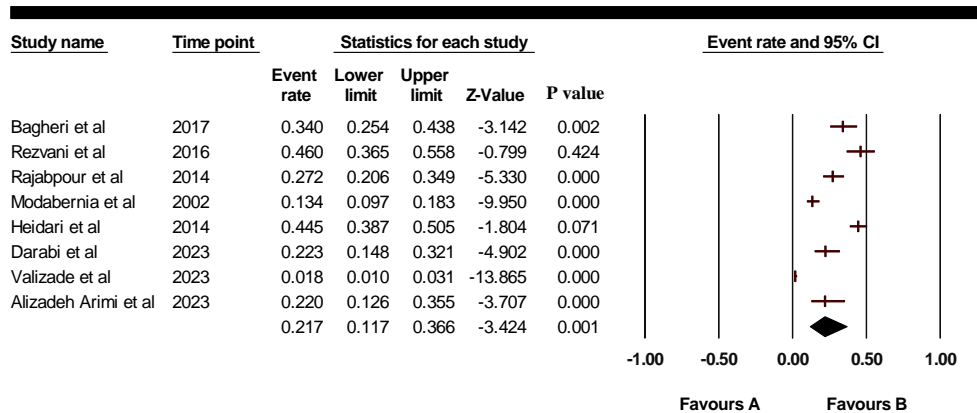


Figure 6- General delirium prevalence in patients hospitalized in the special care department of hospitals in Iran

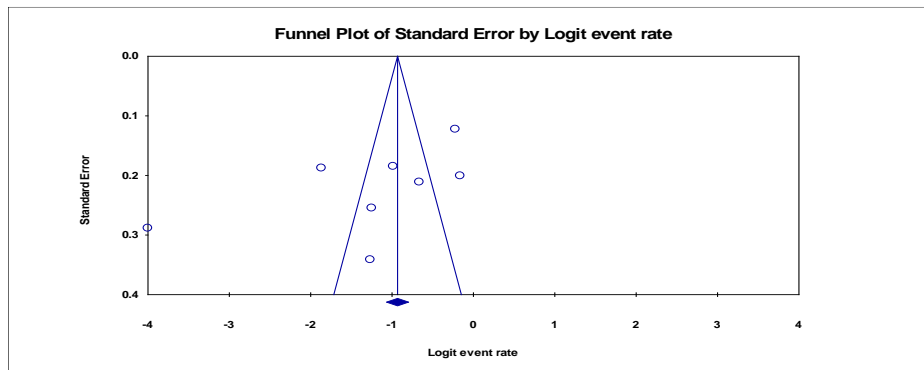


Figure 7- Phenol plot diagram for the delirium prevalence in patients hospitalized in the special care department of hospitals in Iran

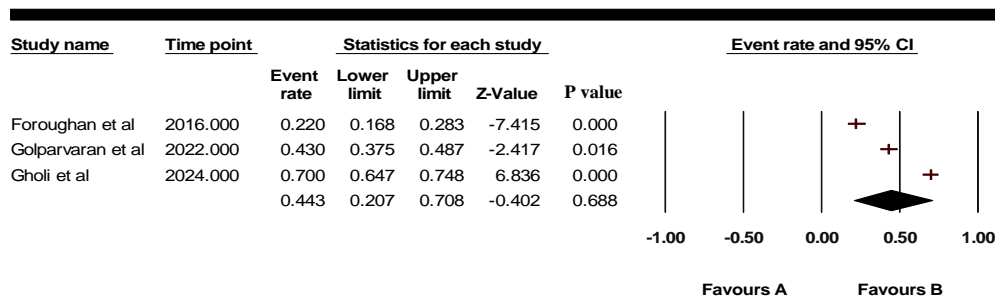


Figure 8- General delirium prevalence in the elderly group admitted to hospitals in Iran

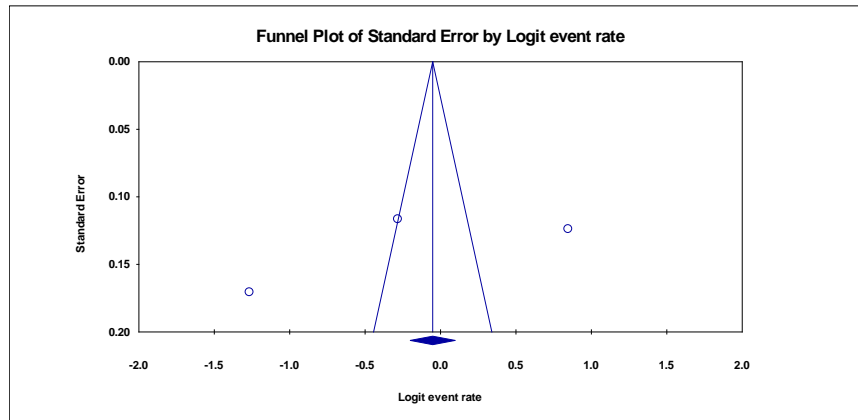


Figure 9- Funnel plot diagram for the delirium prevalence in the elderly admitted to hospitals in Iran

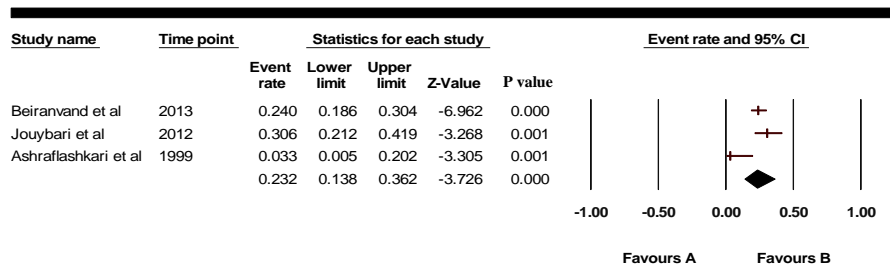


Figure 10- General delirium prevalence in patients hospitalized in the surgical departments of hospitals in Iran

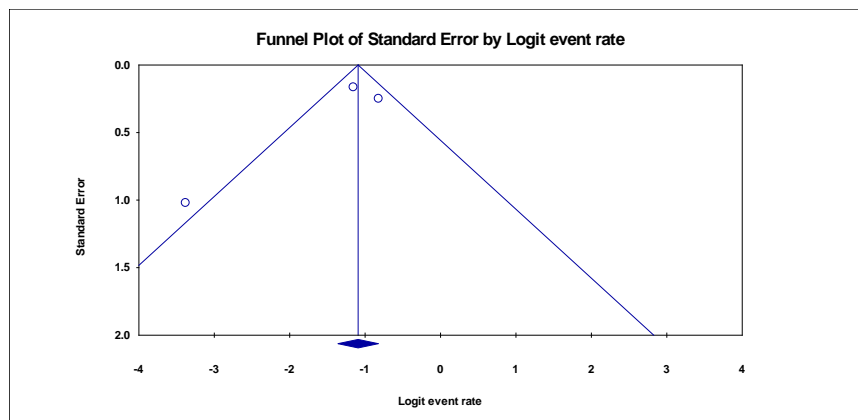


Figure 11- Phenol plot diagram for the delirium prevalence in patients hospitalized in the surgical departments of hospitals in Iran

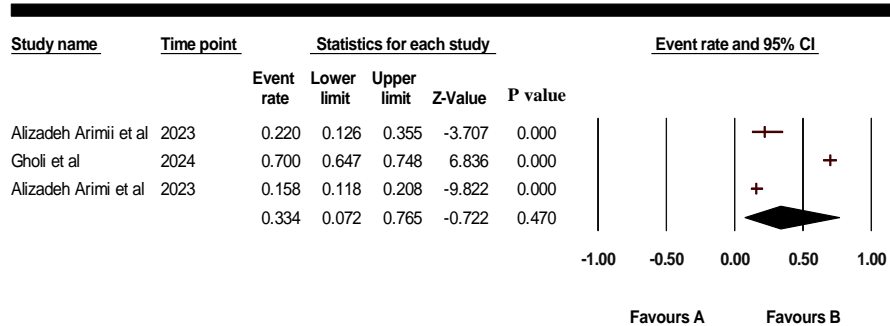


Figure 12- General delirium prevalence in patients with covid-19 hospitalized in Iranian hospitals

Discussion

In Iran, the prevalence of neurological diseases and complications related to neuropsychiatric diseases is high [51-53]. Factors affecting the occurrence of delirium include the use of drugs, trauma, nutritional disorders, electrolyte disorders, infection, reduction or increase in environmental stimuli, which are effective in causing it [54-56, 63-64].

Prevalence of delirium in heart surgery patients was 20.2% (CI: 12.7-30.6%). In the study of Bucerius et al. in the group of heart surgery patients, it was shown that the overall delirium prevalence was 8.4%. Also, among the factors affecting the development of delirium, we can mention the history of cerebrovascular diseases, diabetes mellitus, atrial fibrillation, emergency surgery and cardiogenic shock [57]. In the study of Noh et al. in the group of cardiac surgery patients, 15% of the 63 examined patients had delirium. Also, among the factors affecting delirium in this study, aortic aneurysm surgery, the patient's length of stay and laboratory indicators were effective on the delirium prevalence [58]. Also, in the study of Jodati et al. in the group of heart surgery patients, it was shown that the prevalence of delirium was reported as 4.9%, and the factors affecting it include diabetes, peripheral vascular diseases, myocardial infarction, diabetes, and laboratory disorders [25]. The results of the mentioned studies are consistent with the results of this study regarding the prevalence of delirium in patients with heart surgery who were admitted to the hospital.

Result showed, the overall delirium prevalence in the elderly was 44.3% (CI: 20.7-70.8%). In the study by Michel et al. the prevalence of delirium in the elderly was 9.6% (CI: 6.9-12.4%) [59], in the study by Ryan et al. it was 19.6% in the adult group [60]. In the study by Ryan et al. in the elderly group, the prevalence of delirium was 32%, which was 83.3% in the ICU department and 28.7% in the surgical department [60]. Also, in the study of Grover et al. in the ICU department, out of 152 examined elderly patients, 37 (24.34%) of the patients were diagnosed with delirium, of which 10 (19.2%) of them died during hospitalization [61]. In elderly patients, suffering from delirium leads to interference in the identification of other physical and mental disorders of the patient and interferes with the patient's efforts to control the pain and improve the symptoms of the disease [62].

Due to the fact that covid-19 disease is an emerging and new disease, for this reason, among the strong results of this study, we can mention the report of the results of studies related to covid-19 in the results related to the report of data related to delirium.

Conclusions

The prevalence of delirium in Iran is high. For this reason, it is necessary to conduct preventive studies in this field to reduce this amount.

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