**Association between components of the delirium syndrome and outcomes in hospitalised adults: a systematic review and meta-analysis.**

Authors:

Zoë Tieges1,2 zoe.tieges@ed.ac.uk

Terence Quinn3 Terry.Quinn@glasgow.ac.uk

Lorn MacKenzie4 lorn.mackenzie@nhslothian.scot.nhs.uk

Daniel Davis5 daniel.davis@ucl.ac.uk

Graciela Muniz-Terrera6 G.Muniz@ed.ac.uk

Alasdair M. J. MacLullich1 a.maclullich@ed.ac.uk

Susan D. Shenkin1 Susan.Shenkin@ed.ac.uk

1Geriatric Medicine, Edinburgh Delirium Research Group, Usher Institute, University of Edinburgh, Edinburgh, Scotland, UK. 2School of Health and Life Sciences, Glasgow Caledonian University, Glasgow, Scotland, UK. 3Institute of Cardiovascular and Medical Sciences, University of Glasgow, Glasgow, UK. 4Academic and Clinical Central Office for Research & Development, University of Edinburgh, Edinburgh, UK. 5MRC Unit for Lifelong Health and Ageing at University College London, London, UK. 6Centre for Clinical Brain Sciences and Dementia Prevention, University of Edinburgh, Edinburgh, UK

**Additional file 3.** Association between delirium symptom domain and mortality (Table 2 expanded).

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| **Delirium symptom domain** | **Study** | **Mortality** | **Ratio type** | **Comparison** | **Assessment tool used for symptom domain** | **Ratio (95% CI)** | **p-value** | **Adjustments** |
| Altered level of arousal |
|  | Garcez 2020 | 30-day mortality | OR | Altered arousal vs. Normal arousal | GCS/s-CAM | 1.62 (1.13-2.33)/2.33 (1.66-3.27) | 0.009 | Age, sex, delirium, comorbidities, nutritional status, baseline cognitive impairment, polypharmacy |
|  | Han 2017 | 6-month mortality | HR | Normal arousal/Delirium vs. No delirium | RASS | 3.1 (1.3-7.4) | <0.05 | Age, sex, comorbidity burden, severity of illness, dementia, functional dependence, admission status |
|  |  |  |  | Decreased arousal/delirium vs. No delirium | RASS | 1.4 (0.9-2.1) | >0.05 | Age, sex, comorbidity burden, severity of illness, dementia, functional dependence, admission status |
|  |  |  |  | Increased arousal/Delirium vs. No delirium | RASS | 1.3 (0.3-5.4) | >0.05 | Age, sex, comorbidity burden, severity of illness, dementia, functional dependence, admission status |
|  | Han 2014c | 6-month mortality | HR | Altered vs Normal arousal | RASS | 1.73 (1.21-2.49) | <0.05 | Age, sex, comorbidity burden, severity of illness, dementia, functional dependence, admission status, psychoactive medications |
|  | Hall 2018 | 12-month mortality | OR | Altered vs Normal arousal | OSLA/RASS | 2.21 (1.01-4.86)/2.13(1.03-4.4) | <0.05 | Age, sex, comorbidity burden, severity of illness |
|  | Diwell 2018 | Mortality at any timepoint a | HR | Altered arousal/Delirium vs. No delirium | s-CAM | 1.33 (0.98-1.79) | 0.063 | Age, sex, co-morbidity burden, pressure sores, severity of illness |
|  | Jackson 2018 | 4-month mortality | HR | Decreased vs. Normal arousal /delirium | OSLA | 3.18 (1.13-8.93) | 0.03 | Age, severity of illness, frailty, comorbidity burden |
|  |  | 12-month mortality | HR | Decreased vs. Normal arousal/delirium | OSLA | 1.09 (1.02-1.18) | 0.01 | Age |
| Inattention |
|  | Bellelli 2015 | In-hospital mortality | OR | No delirium | SBT | 3.26 (2.03-5.24)b | <0.0001 | Age, sex, nursing home residence, prior hospitalisation (6-month period), co-morbidity, dementia |
|  | Hall 2018 | 12-month mortality | OR | Altered arousal vs. Normal arousal | EDTB | 1.18 (0.44-3.16) | >0.05 | Age, sex, comorbidity burden, severity of illness |
|  | Diwell 2018 | Mortality at any timepoint a | HR | No delirium | s-CAM | 1.24 (0.92-1.67) | 0.152 | Age, sex, co-morbidity burden, pressure sores, severity of illness |
| Disorientation |
|  | Bellelli 2015 | In-hospital mortality | OR | No delirium | SBT | 3.85 (2.43-6.10)b | <0.0001 | Age, sex, nursing home residence, prior hospitalisation (6-month period), co-morbidity, dementia |
| Memory deficits |
|  | Bellelli 2015 | In-hospital mortality | OR | No delirium | SBT | 2.92 (1.33-6.39)b | 0.005 | Age, sex, nursing home residence, prior hospitalisation (6-month period), co-morbidity, dementia |
| Disorganised thought |
|  | Diwell 2018 | Mortality at any timepoint a | HR | No delirium | s-CAM | 1.42 (1.05-1.92) | 0.024 | Age, sex, co-morbidity burden, pressure sores, severity of illness |
| Psychotic features (hallucinations and delusions) |
|  | No studies available | ⁃  | ⁃ | ⁃  | ⁃ | ⁃ | ⁃ | ⁃ |
| Visuospatial deficits |
|  | No studies available | ⁃ | ⁃ | ⁃ | ⁃ | ⁃ | ⁃ | ⁃ |
| Affective disturbances |
|  | No studies available | ⁃ | ⁃ | ⁃ |  ⁃ | ⁃ | ⁃ | ⁃ |

*Notes:* HR = hazard ratio; OR = odds ratio; CI = confidence interval; GCS: Glasgow Coma Scale; RASS: Richmond Agitation-Sedation Scale; OSLA: Observational Scale of Level of Arousal; s-CAM: short Confusion Assessment Method; SBT: Short Blessed Test; EDTB: Edinburgh Delirium Test Box. a Death was flagged by the UK Office of National Statistics and certified by a death certificate. b OR statistics were obtained from authors. c Data extracted from Han *et. al* 2014 [1] (article reports the same cohort as Han *et al*. 2017 [2]).

References

1. Han JH, Vasilevskis EE, Shintani A, Graves AJ, Schnelle JF, Dittus RS, et al. Impaired arousal at initial presentation predicts 6-month mortality: an analysis of 1084 acutely ill older patients. J Hosp Med. 2014;9:772-8.

2. Han JH, Brummel NE, Chandrasekhar R, Wilson JE, Liu X, Vasilevskis EE, et al. Exploring Delirium's Heterogeneity: Association Between Arousal Subtypes at Initial Presentation and 6-Month Mortality in Older Emergency Department Patients. Am J Geriatr Psychiatry. 2017;25:233-42.