Does a Nursing Educational Intervention Decrease Benzodiazepine use in Delirious Patients in Two Medical Intensive Care Units?

The Problem
- Delirium is defined as an altered level of consciousness accompanied by inattention and disorganized thinking.
- This disorder is a common occurrence in the Intensive Care Units (ICU) and yet it is often under-recognized by clinicians.
- It is a predictor of increased morbidity, mortality, cognitive impairment and cost.
- In the United States alone, the annual financial burden associated with delirium is estimated to be as high as $16 billion.
- One of the major contributing factors identified in the ICU patient population which increases the likelihood of the onset and duration of delirium is the utilization of benzodiazepine medications.
- The lack of preventative measures, identification and treatment of delirium has had serious negative outcomes for patients in critical care.
- Educated nursing staffs that can identify and treat delirium will improve the outcomes of critically ill patients

Aim/Goal
The goal of this project was to investigate if a delirium educational intervention decreases the use of benzodiazepines in delirious patients admitted to two medical intensive care units over a six month time frame.

The Team
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The Interventions
- Nurse Champions were identified to facilitate change at the unit level.
- An audit was conducted to determine baseline data.
- An educational intervention was developed and provided to the nursing staff around delirium and the effects of benzodiazepine usage.
- Auditing in real-time to: give feedback to the nurses and reinforce education.
- Auditing occurred on both the day and night time shifts.

The Results/Progress to Date

Lessons Learned
- Data was only collected when one of three nurses were available to do so.
- Therefore, some benzodiazepine use might have been missed; how this influences the data is unknown.
- Education surrounding delirium occurred during the month of June; how this affected our pre-data collection is unknown.
- Pre-data collection should have occurred prior to the start of any educational intervention.

Next Steps/What Should Happen Next
- This educational intervention will be implemented in all other ICUs at BIDMC.
- Data collection should occur on a daily basis to identify all potential delirious patients who received benzodiazepines.
- Further research should be conducted to: identify risk factors, properly screen patients, and institute evidence based practices to mitigate time spent in delirium.

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