

CROSS SECTIONAL STUDY OF CAREGIVER BURDEN, EMOTIONAL DISTRESS, AND DELIRIUM SEVERITY

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BACKGROUND AND AIM: Delirium is a frequent and clinically challenging condition in hospitalized older adults, often placing a substantial burden on caregivers. While caregiver burden and emotional distress are common in this context, their associations with delirium severity remain insufficiently clarified. This study aimed to examine the relationships between caregiver burden, emotional distress (depression, anxiety, and stress), and delirium severity, and to determine whether emotional factors linked to delirium severity beyond the effect of caregiver burden.

METHODS: This cross-sectional study, involving 108 patient-caregiver pairs diagnosed with delirium according to DSM-5 criteria, assessed delirium severity using the Delirium Severity Scale, caregiver burden using the Zarit Burden Interview, and caregiver emotional distress using the Depression, Anxiety, and Stress Scale-21(DASS-21). The scales were administered simultaneously to patients and caregivers. Inclusion criteria for caregivers included providing primary care throughout the illness and hospital stay. Pearson correlation analyses were used to examine bivariate associations. Hierarchical linear regression analysis was conducted to identify independent correlates of delirium severity.

The study was approved by the Tokat Gaziosmanpaşa University Faculty of Medicine Ethics Committee (decision date: May 2, 2024; decision number: 83116987).

RESULTS: Delirium severity showed significant positive correlations with caregiver burden and all emotional distress measures. In the hierarchical regression analysis, caregiver burden significantly predicted delirium severity ($R^2 = 0.10$). The addition of depression, anxiety, and stress scores significantly improved the model ($\Delta R^2 = 0.07$). In the final model, perceived stress emerged as the only emotional variable that independently predicted delirium severity, whereas caregiver burden and other emotional factors were no longer significant.

CONCLUSIONS: These findings suggest that delirium severity is associated not only with caregiving burden but also with the caregiver's emotional context, particularly perceived stress. Addressing caregiver stress may be considered as a potential supportive component of comprehensive delirium management.

Keywords: Caregiver burden, delirium severity, emotional distress