CE - LETTER TO THE EDITOR

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Detecting delirium in elderly medical emergency patients: validation and subsequent modification of the German nursing delirium screening scale—comment

Florian F. Grossmann[1,2] · Wolfgang Hasemann[3] · Christian H. Nickel[1]

Dear Editor,

We have read with interest the paper of Brich et al. [1] published online in this journal on 27 November. We support the authors' efforts to improve delirium detection in the ED setting. Their study showed moderate sensitivity and good specificity of the Nu-Desc delirium observation tool.

The authors' conclusion, however, merits discussion. First, the Nu-Desc tool does not take inattention into account, which is—according to the Diagnostic and Statistical Manual of Mental Disorders (DSM)—the main feature of delirium. Therefore, criterion validity might be questioned [2].

Further, we disagree with the conclusion that a sensitivity of 77.8%, as found in the modified Nu-Desc, is sufficient. Other validated screening tools, incorporating a formal test for inattention, showed better performance in ED patients [3–5]. The months of the year backwards test, for example, is frequently used in such tools. The screening step of the mCAM-ED [5], which is the months of the year backwards test, had a sensitivity of 95% and a negative likelihood ratio of 0.06 [5]. In the majority of patients (80%), the months of the year backwards test can be applied in less than 30 s. Of note, two-step tools such as DTS/bCAM [3] and mCAM-ED [5] will stop evaluation after a negative screening, which is ideal in the ED setting.

✉ Florian F. Grossmann
florian.grossmann@usb.ch

1 Emergency Department, University Hospital Basel, Petersgraben 2, 4031 Basel, Switzerland

2 Division of Nursing, Department of Medicine, University Hospital Basel, Hebelstrasse 2, 4031 Basel, Switzerland

3 Department of Nursing and Allied Health Professions, University Hospital Basel, Hebelstrasse 2, 4031 Basel, Switzerland

Compliance with ethical standards

Conflict of interest The author(s) declare that they have no competing interests.

Statements on human and animal rights This article does not contain any studies with human participants or animals performed by any of the authors.

Informed consent None.

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