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Delirium in older patients study awarded \$4.1 million NHMRC grant

A trial exploring if delirium, a common complication of heart surgery in older patients, can be reduced has received \$4.1 million from the National Health and Medical Research Council (NHMRC) Clinical Trials and Cohort Studies scheme.

The Dexmedetomidine in Cardiac surgical Intraoperative Drug Evaluation (DECIDE) study of 1100 patients will be run over four years as a randomised controlled trial by the NHMRC Clinical Trials Centre, University of Sydney.

The trial's chief principal investigator is anaesthetist Professor Robert Sanders from the Department of Anaesthetics and the Institute of Academic Surgery, Royal Prince Alfred Hospital. Professor Sanders is also the Nuffield Chair of Anaesthetics, Central Clinical School and Critical Care Lead, NHMRC Clinical Trials Centre, University of Sydney, and is an Adjunct Professor of Neurosurgery at the University of Iowa.

Delirium is a common complication of cardiac surgery that is distressing for patients, consumes health care resources and is associated with cognitive decline and dementia.

Promising data suggest that dexmedetomidine, a commonly used drug used to manage sedation and pain, may reduce postoperative delirium.

The DECIDE study will be run at cardiac hospitals in the Australia and New Zealand College of Anaesthetists Clinical Trials Network.

This study will evaluate if administering dexmedetomidine during cardiac surgery reduces these risks, increasing the number of days free of delirium or coma, and alive following surgery in patients 65 and older.

“Postoperative confusion (delirium) is feared by patients, it's unpleasant for those affected and associated with prolonged stays in hospital and increased risk of dementia and death. Patients undergoing heart surgery are particularly vulnerable. We are seeking to reduce the numbers of patients affected by delirium through study of a cheap, routinely used sedative, dexmedetomidine,” Professor Sanders explained.

“Through reducing delirium we're hoping to provide long-term benefits to our patients including improving their cognitive recovery and brain health. Preliminary studies suggest a cheap sedative, dexmedetomidine, may reduce these risks.

“If proven, the impact of reducing delirium, hospital costs and protecting cognition through a short term, available intervention for a high-risk population is profound.”

For more information or to request interviews please contact ANZCA Media Manager Carolyn Jones on +61 408 259 369 or cjones@anzca.edu.au.