



The Norman Knight Nursing Center
for Clinical & Professional Development

PCAs Quick Reference: Sundowning and Confused Patients

What is sundowning?

Sundowning: can be described as a state of increased activity, anxiety, agitation, confusion, and aggressiveness occurring generally in the late afternoon and can continue throughout the evening and night. This generally occurs in the elderly population especially in patients with dementia or Alzheimer's disease. There can be many contributing factors to the development of sundowning and some of the behaviors exhibited may include paranoia, delusional thinking, wandering, combativeness, stubbornness, rapid mood changes, hallucinations, fearfulness, pacing, and restlessness

Confusion

There are any number of reasons a person may be confused. Medication, sleep deprivation, stress, being in a new environment, and medical illness (such as UTI, brain tumors, head injury, surgery, and alcohol withdrawal) are just some of the reasons a patient might be confused

What do you need to know?

It can be challenging to care for patients experiencing sundowning and confusion. You may find that often these patients may require patient observers. There are contributing factors (listed above) that may increase confusion in a patient and understanding what they are may assist you in managing these patients.

What is the role of the PCA (under the direction of the RN) when caring for a patient with sundowning?

- Encourage the patient to nap or rest to avoid becoming overly fatigued. Try to minimize disturbing the patient while resting if possible (i.e. get VS before they nap even if early so you are not waking them later)
- Minimize stimulation and commotion around them as much as possible, suggest a private room if possible
- Keep surrounding as simple and uncluttered as possible
- Offer a light snack in the afternoon or early evening (check with nurse to make sure it is okay)
- Encourage adequate fluid intake after checking with nurse to make sure it is okay
- Turn on the lights in the patient's room before the sun does go down to minimize shadows
- Speak slowly, calmly, clearly, and exhibit patience – matching agitation with agitation will make things worse
- Offer reassurance to the patient
- Encourage family to bring in familiar items such as photographs or a radio from home to familiarize the environment
- Keep a night light on to reduce agitation and confusion when surroundings are dark and/or unfamiliar
- Minimize disturbing patient during the night which promotes restful sleep. If in a shared room, be as quiet as possible when addressing roommates needs
- Patient may experience paranoia and/or hallucinations. Alert the nurse, offer support and reassurance and reorient the patient as needed