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**PREDICTIVE FACTORS ACUTE PSYCHOTIC DYSORDER ON ELDERLY  
PATIENTS UNDERGOING UROLOGY SURGERIES**

By Haxhire Gani

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### Abstract

The increased average population age in Albania, and in the entire world, leads to increased number of patients that are elderly and that undergo surgery. The elderly concept is a dynamic concept which means that with the increase of the life expectancy the age that the person is considered elderly has changed as well. Delirium is a common complication on patients post anesthesia. Elderly population has a higher risk of delirium on post anesthesia, compare with other population.

**The purpose of this study is:** To explore delirium, the risk factors and effect of delirium has on the length of the hospital stay and the financial burden of this complication. This study is conducted in "Mother Teres "University Hospital Center in department of Anaesthezi-Reanimation and specifically on Urology section. This study is a prospective random bauble blinded study. Participants of this study are 1496 patients older than 65 years old, while they were admitted to the urology department, between January 2010 – December 2012.

From the study were excluded 12 patients during the study period as per Alzheimer's diagnose, two patients were excluded because of a stroke, four patients with deficite present three patients with Demence Senile and five patients with Parkinson disease. All patients are evaluated preoperatively and needed to score at least minimal on MMSE. All patients have gone through examination based on the protocol pre-operatively, intra-operatively and post-operatively. The comparing value that was use for delirium was CAM, without the need of a psychiatric specialist.

**Results:** Delirium was more evident to male patients and spinal post- anesthesia. Based on the analyses it was concluded that the prevalence of delirium post-anesthesia was statistically significant, while patients that used medication were compared with patients that did not take medication , it was 1-3 or bigger than 3.  $P < 0.05$ . There is important statistical diferentiation  $p < 0.05$ , when comorbidity pre-opeatively is comparted with changes on hemodinamic intra-operatively and with not afficient pain managment. During those three years patients with delirium post-operatively had an average longer hospital stay compared with patients that did hot have delirium post-operatively with significant statistical values between them ANOVA  $F = 26.2$   $P < 0.01$ . The average cost for patients with delirium was 19.600 Albanian money, with statisticaly significant difference compared with patients that did not have delirium  $p < 0.01$ .

**Conclusion :**Every elderly person is unic when it comes to the incidence of post-operative delirium. When comorbitiy pre-operatively is combined with hemodinamic changes intra-operatively and with poor pain managment post-operatively the risk of delirium post-operatively is increased. So combination of many factors together increase delirium post operatively to elderly patients and increases the cost and the financial bordan as well.

**Key words :**POD,CAM,MMSE.