

# LETTERS

## DELIRIUM IN OLDER ADULTS

### Authors' reply to Ninan

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We agree with Ninan that urinary tract infections (UTIs) are often overdiagnosed in older people and that too often asymptomatic bacteriuria is treated with antibiotics.<sup>1</sup> However, correctly diagnosing UTI in older patients with delirium is more challenging than it may seem, and diagnosing UTI exclusively on the basis of the presence of acute urinary symptoms or bacteriuria accompanied by fever or inflammatory markers would be equally flawed.<sup>2</sup> For example, in the study cited by Ninan, only 45% of the patients classified as having a bacteraemic UTI had any urinary tract symptoms.<sup>3</sup> Moreover, in that study patients with delirium with evidence of a septic illness in the absence of a more likely source (such as pneumonia), and without a negative urine culture, were classified as having presumed UTI.<sup>4</sup>

Competing interests: None declared.

- 1 Ninan S. Don't assume urinary tract infection is the cause of delirium in older adults. *BMJ* 2013;346:f3005.
- 2 Vidal EIO, Villas Boas PJF, Valle AP, Cerqueira ATAR, Fukushima FB. Delirium in older adults. *BMJ* 2013;346:f2031. (9 April.)
- 3 Van Duin D. Diagnostic challenges and opportunities in older adults with infectious diseases. *Clin Infect Dis* 2012;54:973-8.
- 4 Woodford HJ, George J. Diagnosis and management of urinary tract infection in hospitalized older people. *J Am Geriatr Soc* 2009;57:107-14.

Cite this as: *BMJ* 2013;346:f3063

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