

Acute Behavioural Disturbance (was Excited Delirium)

Definition	A state of extreme mental and physiological excitement, characterised by extreme agitation, delirium, hyperthermia, hostility, exceptional strength and endurance without apparent fatigue.
Context	<p>ABD is a clinical emergency. A patient may suffer cardiac arrest with little or no warning.</p> <p>ABD is most commonly associated with the use of illegal recreational drugs (especially cocaine). But also infection; liver failure; mental health disorders; dementia; drug or alcohol withdrawal.</p> <p>Umbrella description for: (1) Delirium plus (2) severe agitation and aggressive behaviour plus (3) autonomic dysfunction (failure in the involuntary body functions controlled by the Autonomic Nervous System and Neurotransmitters, adrenaline, increasing breathing rate, heart rate, blood pressure, temperature and metabolism.)</p> <p>The body is unable to get enough oxygen in and carbon dioxide out, making the blood acidic (acidosis) which affects brain, heart, muscles, . This is made worse by a position that restricts their ability to breathe (positional asphyxia,) especially face down and restrained.</p> <p>Outcomes include oxygen deprivation, brain damage, or death.</p>
Symptoms	<p>Delirium (a sudden, temporary state of severe confusion and mental changes)</p> <p>Severe Agitation. Sustained non compliance, hostility, violence</p> <p>Hallucinations. Paranoia. Fear of impending doom.</p> <p>Constant activity. Excessive strength. Lack of fear. Insensitivity to pain</p> <p>'Hot to touch' (tactile hyperthermia). Profuse sweating. Lack of clothing.</p>
Signs	<p>High temperature (hyperthermia)</p> <p>Fast Breathing (tachypnoea)</p> <p>High Blood Pressure (hypertensive)</p> <p>Sweating (hidrosis)</p>
Treatments	<p>Once identified request additional support - Critical Care</p> <p>Descalation - calming voice and body language from the right connecting person.</p> <p>Rapid Tranquilation to counter active stimulation for severe agitation - Intra muscular injection and patient appropriate eg. Ketamin, Droperadol, Kertamin, Lorazepam, Halaperadol, (Medazalam).</p> <p>Management of high temperature with environmental cooling, wet sheet.</p> <p>Oxygen and IV fluids (for Hyperthermia, Hypovolaemia and Acidosis)</p> <p>Least restrictive interventions. Patient restraint by Police may be necessary for safety reasons, but time must be kept to an absolute minimum as the struggle against restraints increases acidosis and is linked to deaths.</p> <p>Time-critical transfer with pre-alert</p>
Notes	<p>JRCalc Acute Behavioural Disturbance</p> <p>Royal College of Emergency Medicine ABD Guideline 2016</p> <p>Resus Room - Acute Behavioural Disturbance 18-Nov-2022</p>
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