History of EXD

Table 1

Historical descriptions and terminology of excited delirium syndrome.

| Author and year | Nomenclature | Clinical description |
|----------------------|-------------------------|---|
| Calmeil, 1832 | Delirious mania | Rare, life-threatening psychosis extreme hyperactivity, mounting fear, stuporous exhaustion |
| Bell, <u>1849</u> | Bell's mania | Sudden onset of hyperactive arousal, confusion, transient hallucinations, core body temperature dysregulation, 75% mortality rate |
| Maudsley, 1867 | Acute maniacal delirium | Violent mania, rapid pulse, constant motion, elevated temperature of skin, complete exhaustion |
| Stauder, <u>1934</u> | Lethal catatonia | Intense motor excitement, violent, suicide attempts, intermittent rigidity, incoherent speech, bizarre delusions; fever (43.3°C), cardiovascular collapse |
| Wetli and Fishbain, | Excited delirium | Agitation motor excitement, super human strength, paranoia, mounting fear, hyperthermia, cardiorespiratory collapse, cocaine intoxication, no anatomic cause of death |

Current definintion

Excited delirium: A condition that manifests as a combination of delirium, psychomotor agitation, anxiety, hallucinations, speech disturbances, disorientation, violent and bizarre behavior, insensitivity to pain, elevated body temperature and superhuman strength.



Common Risk Factors

- Male under the age of 44 median age of 36
- Use/abuse of illicit drugs
- Preexisting mental and/or cardiovascular disease
 - Exhibition of bizarre behavior such as:
 - Various stages of nudity
 - Incoherence and delirium
 - Violence/attacking or breaking glass
 - Running in traffic
 - Paranoia



R: Patient is resistant

- Verbal loop of "get on the ground"
- Handcuffing and hobbles will take multiple officers
- Understand some subjects will not respond to pain compliance



Ok they are in handcuffs now what.

- Sudden cardiac arrest typically occurs immediately following a violent struggle
- Place the subject in the recovery position to alleviate positional asphyxia
- Once in handcuffs, get EMS on scene quickly to monitor and transport
- Sign a transport hold on these individuals
- Complete a CIC report





The White Paper

- Twenty medical doctors across the United States contributed the White Paper Report on Excited Delirium Syndrome in 2010
- "beneficial use of aggressive chemical sedation as first line intervention."
- "Law enforcement control measures should be combined with immediate sedative medical intervention to attempt to reduce the risk of death."





Normally this is head tilt chin lift or "Sniffing Position". Can also be the Recovery Position.

