SYMPTOM

Confusion

Confusion is difficulty thinking clearly, understanding what is happening, or knowing where you are.

WHAT IT FEELS LIKE
Unable to think clearly or make sense of things

WHERE IT IS FELT
The mind and thinking

MOST COMMON CAUSES
Infections, medication effects, dehydration

WHEN IT IS URGENT
Sudden new confusion or rapid worsening

USUALLY LASTS
Hours to weeks, based on the cause and treatment

SEE A DOCTOR IF
Gradual or recurring confusion affects daily life

Overview

Confusion means having trouble thinking clearly, understanding information, remembering recent events, or knowing what is happening around you. You may notice it yourself, or someone close to you may notice changes first.

Confusion is a symptom, not a diagnosis. Causes range from poor sleep or medication effects to infection or a problem affecting the brain.

Confusion that begins suddenly over hours or days is often called delirium . It may come and go and is more common during illness, after surgery, or when several medicines are used. Sudden confusion needs urgent medical assessment.

Confusion developing over months can be related to medicines, depression, thyroid problems, vitamin deficiencies, or conditions affecting memory and thinking. It should not be dismissed as normal ageing.

What it may feel or look like

You may struggle to follow conversations, answer questions, make decisions, or remember what just happened. Familiar people or places may seem unfamiliar.

Other signs include:

Delirium often fluctuates. Someone may seem clear for a while and then become confused again. Quiet delirium can be missed because the person appears sleepy or less responsive rather than agitated.

- Not knowing the date, location, or reason for being somewhere
- Unclear speech or unexpectedly changing topics
- Unusual sleepiness, withdrawal, restlessness, or agitation
- Seeing or hearing things that are not there
- Difficulty carrying out familiar tasks
- Becoming more confused at certain times

Common causes

The likely cause depends on age, health, medicines, and how quickly symptoms started. Several factors may be involved.

Common causes include infections, dehydration, poor sleep, severe pain, constipation, and medicine side effects. Sleeping tablets, strong pain medicines, and some allergy medicines can reduce alertness. Risk may increase after starting or changing a medicine or when taking several medicines.

Alcohol, cannabis, and other drugs can affect thinking. Confusion can also occur during withdrawal after suddenly stopping heavy or regular alcohol use.

In older adults, confusion may occur during an infection even when typical symptoms are mild. However, confusion alone does not confirm an infection or show where it is.

Less common causes include low thyroid activity, vitamin deficiencies, liver or kidney problems, seizures, and conditions affecting memory or brain function. Depression, anxiety, exhaustion, and intense stress may cause poor concentration, but marked disorientation needs assessment.

Urgent causes include stroke, very low blood sugar, reduced oxygen, meningitis or another serious infection, head injury, poisoning, and medicine overdose. Carbon monoxide exposure may cause confusion, headache, nausea, and dizziness, sometimes in several people in one building.

When to seek medical care

Call emergency services for sudden new confusion, especially without a clear harmless explanation. Do not drive the person to hospital if they are severely unwell or unsafe to transport.

Emergency help is particularly important when confusion occurs with:

Arrange urgent same-day care for new or worsening confusion over hours or days, even without other obvious symptoms. Fever, reduced drinking, vomiting, painful urination, or a recent medicine change make prompt assessment especially important.

Book a routine appointment if gradual, mild, or recurring confusion affects work, relationships, memory, finances, driving, or everyday tasks. A trusted person may help describe the changes.

- Face drooping, arm weakness, or new speech difficulty
- A seizure, collapse, fainting, or inability to wake fully
- A severe or sudden headache
- Trouble breathing, blue or grey lips, or chest pain
- A recent head injury
- Suspected overdose, poisoning, or carbon monoxide exposure
- Very low blood sugar that does not improve with the person's usual plan
- Fever with a stiff neck, new rash, or severe illness

How the cause is found

A healthcare professional will ask when symptoms began, whether they fluctuate, and what the person's usual thinking and memory are like. Information from someone who knows them well can be valuable.

They may review prescription medicines, over-the-counter products, alcohol, and other substances. Do not stop a prescribed medicine suddenly unless a healthcare professional advises it.

Checks may include temperature, blood pressure, oxygen level, blood sugar, hydration, attention, speech, strength, and balance. Tests depend on the situation and may include blood or urine tests, an electrocardiogram, or brain imaging.

Treatment and self-care

Treatment addresses the cause and may include treating infection, correcting low blood sugar or dehydration, improving oxygen levels, managing pain, or adjusting medicine. Alcohol withdrawal or poisoning may require hospital care.

While arranging medical help, stay with someone who is suddenly confused. Keep the area calm and well lit. Use short, clear sentences and remind them where they are and what is happening.

Glasses, hearing aids, familiar objects, and a visible clock may help. Offer fluids only if the person is awake and can swallow safely. Do not give alcohol, sleeping tablets, or someone else's medicine.

Avoid arguing about mistaken beliefs. Reassure the person and reduce noise. If they may wander, fall, or leave a safe place, seek help rather than managing alone.

What to expect

Duration depends on the cause, treatment, and overall health. Confusion from a short-term illness may improve over hours or days, but recovery can take weeks and symptoms may fluctuate.

Some people do not immediately return to their previous level of thinking, especially after severe illness or a long hospital stay. Follow-up may be needed to review medicines, memory, mobility, sleep, and support at home.

Gradual confusion may continue until its cause is treated. Keep notes about symptoms, recent illnesses, sleep, and medicine changes for the appointment.

Common questions

Is confusion a normal part of ageing?

No. Thinking may become slightly slower, but sudden confusion or major difficulty with familiar tasks is not normal ageing.

How is delirium different from dementia?

Delirium usually starts quickly and fluctuates. Dementia generally develops gradually and causes a longer-term decline in memory or thinking. A person can have both.

Can a urinary tract infection cause confusion?

An infection can contribute to delirium, particularly in an older or medically frail person. Confusion alone does not prove a urinary tract infection, so other causes must be considered.

Can stress or lack of sleep cause confusion?

Severe stress and sleep loss can impair concentration and memory. New disorientation, failure to recognise people, or rapidly worsening confusion should not be assumed to be stress.

Should someone with sudden confusion stay alone?

No. Stay with them if safe, remove immediate hazards, and arrange urgent medical help. Bring their medicine list or medicine containers if possible.

Sources

- NHS. Sudden confusion (delirium)
- National Institute for Health and Care Excellence. Delirium: prevention, diagnosis and management in hospital and long-term care, Clinical Guideline CG103
- Scottish Intercollegiate Guidelines Network. Risk reduction and management of delirium, SIGN 157
- MedlinePlus Medical Encyclopedia. Delirium
- Centers for Disease Control and Prevention. Signs and symptoms of stroke