

Pharmacologic Strategies: Severe Agitation in Delirious Patients

Start with a low dose and maintain at effective dose for ~48 hours before tapering:

Medication	Dosage
Aripiprazole	Oral, 5 mg, twice daily as needed
Haloperidol	<ul style="list-style-type: none"> • IV preferred, 0.5–5 mg, repeated every 20–30 minutes as needed • Aim for 3–5 mg/day max and administer IV only in cardiac-monitored settings, given the risk of QT prolongation and torsades de pointes
Olanzapine	Oral preferred (can also be given IM or in dissolvable tablet), 2.5–5 mg, twice daily as needed
Quetiapine	Oral, 12.5–25 mg, two to three times daily as needed
Risperidone	Oral, 0.5–1 mg, twice daily as needed (can also be given in dissolvable tablet)
Valproic acid	Oral or IV, 125–250 mg, three times daily (IV valproic acid must be infused over an hour rather than IV push—this can be an issue if a patient is pulling their lines)
Ziprasidone	Oral preferred (can also be given IM), 10–20 mg, twice daily as needed

Source: Thom RP et al, *Am J Psychiatry* 2019;176(10):785–793

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