Agitation and Restlessness

What is agitation?

Agitation often happens after brain trauma, or stroke. It can be a common part of recovery from an illness or injury. About 33% of people become agitated after a head injury.

Agitation may include emotional changes such as anger or fear. It can also include physical aggression such as striking out. Someone who is agitated may say things you know they don’t mean. The patient is often confused when this occurs. For example, if the patient wakes up in a new place and doesn’t know where they are, they may become scared and act out.

What causes agitation or makes it worse?

Agitation is common when there is a lot of activity. Someone with a brain injury or delirium can quickly become over-stimulated. The brain cannot process things fast enough to stay calm and relaxed. Sometimes, just thinking or hearing talking can overwhelm someone. Some things that can be over-stimulating are:

- Bright lights.
- TV or radio on.
- Noise in room or hallway (For instance, alarms, nurses talking, sudden noises).
- Too many guests.
- Items needed for the patient’s health care (IVs, feeding tubes, catheters, neck brace).
- Asking the patient too many questions.
- Speaking in a loud voice or speaking too fast

What is restlessness?

Restlessness is different from agitation. Restless behavior often comes after a patient has gone through the agitation stage. This is also part of the recovery process. Someone who is restless will have trouble sitting still, will not be able to focus or think, and may be impulsive (do things without thinking). The patient may appear tense and uneasy. He may pace or fidget all the time.

What causes restlessness or makes it worse?

Restlessness is increased or due to over stimulation to the brain (like agitation.) It may also occur if a patient is confused and not getting enough stimulation.
What can family members do to help?

- Talk to the patient in a calm, quiet voice.
- It is not helpful to yell or argue with the patient. Someone with a brain injury is not able to reason.
- If your loved one starts yelling or acting out, call for help. Ensure your safety first.
- Take away things that may distract or stimulate the patient. For instance, keep the TV off.
- Limit guests and keep visits short. It is vital for the patient to rest.
- Remind your loved one where they are and about their injuries. But be sure not to quiz the patient about what she remembers.
- Tell the hospital staff what helps the patient relax.

Talk with your loved one’s health care team about the above information. Talk to staff about how family and staff can work as one to help the patient through this process.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person’s health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 8/2017. University of Wisconsin Hospital and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#6703