People with Lewy body dementia (LBD) are hospitalized more often than people with other kinds of dementia. Physicians still don't know much about what makes people with LBD need hospital care, however. There is also not much known about what to expect when people with LBD are in the hospital.

Researchers at the University of Florida looked at causes and outcomes of hospitalization in people with LBD for the years 2014-2015. This study was published by the medical journal *Parkinsonism & Related Disorders* in 2019. The most common reason (40%) that people with LBD were hospitalized was due to worsened hallucinations or confusion. The second most common reason was falls (24%). Infection — usually a urinary tract infection or pneumonia — was the third most common reason.

New complications can occur once a person with LBD is hospitalized. Half of individuals with LBD became more confused (delirium). Other complications included developing pneumonia (17%) or falling in the hospital (5%).

Over the study's two-year span, 117 people with LBD were hospitalized. Of those, 31% were hospitalized more than once, usually two to three times. People were in the hospital for an average of five days. Hospital stays were longer for people who were admitted for confusion or hallucinations. Hospital stays were also longer for people who had an in-hospital complication such as delirium, pneumonia or falls.

Antipsychotic medications (often used for hallucinations) were given during 38% of the hospitalizations. Of those, 20% were people already taking these medications at home. Antipsychotic medications were started for the first time in 14% of those hospitalized and added or increased in 5%. Usually when an antipsychotic was started, it was quetiapine. Quetiapine, clozapine and pimavanserin have the lowest risk of side effects for people with LBD compared with other antipsychotic medications.

Haloperidol and risperidone were also used in the hospital. Sometimes, people with LBD can have reactions to these medications. When antipsychotic medications other than the safer ones were used, people with LBD were in the hospital for longer (an average of 7.5 days versus four days).

When most people returned to where they were living before they were in the hospital, they required the same amount of care as before the hospitalization. However, about a third of those with LBD needed more care. For example, a person who was originally at home might need to go to a rehabilitation center after the hospital. In 15% of the hospital stays, the person with LBD died in the hospital or started hospice care.
This study highlights the need for better treatments for confusion, hallucinations and falls in people with LBD. It's also important to do things to try to prevent falls, including physical therapy and using assistive devices such as canes or walkers if needed. If a person with LBD has a sudden change, it's a good idea to see his or her primary care physician to get tested for infection. If the infection is caught early, that can sometimes allow treatment at home rather than in the hospital.

When a person with LBD is in the hospital, families need to tell the medical teams about the patient's individual experience of LBD. Families should also discuss with the physicians that some medications — particularly many of the antipsychotic medications — should be avoided in people with LBD if at all possible. The Lewy Body Dementia Association (LBDA) Medical Alert Wallet Card lists these medications and is a useful reminder to keep on hand.

Finally, it is important to know that hospital stays are hard on people with LBD. It is easy for people with LBD to get more confused while in the hospital and to need extra help while they are there. They may also need more help (for example, with rehabilitation) once they are well enough to leave the hospital.

For more information on hospitalization in LBD, review these resources:

**Lewy Body Dementia Association**
- Medical Alert Wallet Card
- Caregiver Tips for Hospital Stays

**Parkinson Foundation**
- Aware in Care Patient Safety Kit
- Aware in Care Hospital Action Plan (PDF)