



AS DEATH APPROACHES

The dying process is not only experienced by the patient, but their family and community as well. No two people die the same way, and every end-of-life journey--even within the same family and community--is different. But there are some normal physical, emotional and spiritual changes that are part of dying. Understanding something about these changes can help patients and loved ones prepare for the final days or feel reassurance about what they are experiencing.

Changes During the Final Months, Weeks, Days:

- Less interest in social affairs: first public events, then news, then even in visiting with friends and family.
- Communicating less: the patient may be less social and talkative, comfortable with long periods of silence or inactivity.
- Eating and drinking less: the body needs fewer and fewer calories, and eventually organ systems begin to shut down, stop processing and digesting food and fluids. It is important to understand that this is a normal and helpful process at the end-of-life. *Forcing food and fluids into someone's body when their body is preparing for death can actually cause suffering.* Ask your Care Team for more information and support to understand when food and fluids are helpful or potentially harmful.
- Sleeping more is part of the body's change in metabolism toward the end-of-life. Spend visiting time with the patient when they have the most energy, whatever time of day or night that may be.
- "Near Death Awareness:" the patient is focused on, or seems to be reliving another place or time, or seeing people who are not visible to others present. This may include loved ones who have already died, or even people they don't know. The patient may reach out or behave like they are responding to something that others cannot see. This is often distressing to those present, but *not* to the patient. It is a common experience for people who are dying, and helps them make sense of their life and prepare for death. While you might gently reassure the patient about where they are, don't argue with them. Your Care Team can help with education and support during this process.

Changes in the Active Dying Phase:

- *Congestion:* The patient's breathing may develop a rattling sound in the lungs and/or upper throat when they become too weak to clear their throat. You can elevate the head of the bed and swab the mouth with oral swabs to help. The Care Team can help with medications, but know that some of this noise is natural and doesn't cause the patient discomfort.

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- *Terminal Agitation:* The patient may become agitated or restless and pull at the bed linens. These symptoms are also a change in the body's metabolism. Talk calmly and reassuringly with the patient so as not to startle or frighten them. If the patient is a danger to themselves or others, your Care Team may provide medications to help the patient rest.
- *Changes in the skin:* The patient's *arms and legs* may become cool to the touch, or look purplish or blotchy. These symptoms are a result of decreased circulation.
- *Changes in body temperature:* The patient may experience sudden fever. There can be increased sweating and the skin may feel "clammy." If it helps, put a cool, damp cloth on the forehead, or open a window, or use a fan in the patient's room.
- *Decreased senses, changes in consciousness:* The patient's vision and hearing may become less clear. However never assume that the patient cannot hear you. Hearing is the last of the five senses to be lost, and continues until the moment of death.
- *Incontinence:* This is often not a problem until death is very near. The family and Care Team can arrange to place pads under the patient for more comfort and cleanliness, or a urinary catheter may be used. The amount of urine will decrease and the urine will become darker as death nears.
- *Breathing changes:* The patient's breaths may increase, decrease or become irregular. Periods of no breathing (apnea) are common.
- *Changes in consciousness:* The patient's consciousness may increase or decrease often. Usually the patient then enters a coma-like state and will not respond to people or events around them. However, they can usually still hear, so surrounding them with the voices and sounds they love can continue to provide comfort.

How to Know When the Patient Has Died:

- No breathing or heartbeat
- No response to verbal commands or gentle shaking
- Eyelids slightly open; eyes fixed on a certain spot
- Jaw relaxed and mouth slightly open
- Loss of control of bowel or bladder



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How You Can Help:

Comfort for the patient and family is the goal of your Care Team. We know this may cause anxiety and may be a time of intense emotions. Know that we are here to help. No question is unimportant! We want you to be confident that you will know what to do during this time, and at the time of death.

- Give medications ordered by the Care Team to decrease symptoms such as anxiety, restlessness, agitation or moist breathing.
- Talk clearly to the patient and say the things you need or want to say. Remember that the patient may be able to hear even when not able to respond.
- Encourage visitors to talk directly to the patient and tell the patient who they are.
- Include the children in your family in the experience of the patient's death, according to their wishes and comfort level.
- If the patient cannot see well or is scared by darkness and shadows, keep a soft light on in the patient's room.
- Continue to touch and stay close to your loved one. Oils can be used on the feet and hands.
- Reposition the patient if it makes him or her more comfortable.
- Play the patient's favorite music softly.
- Write down what the patient says. Such messages may comfort you later.
- Experience and cherish the joy and laughter that is natural and possible all the way through death.

Tell Your Care Team About:

- Changes in the patient, including:
 - Restlessness or anxiety
 - Changes in breathing
 - Pain or discomfort
- Any questions or desire for emotional or spiritual support, or guidance for the patient or family
- Religious, cultural or ethnic traditions important to the patient or family as death approaches, or after death

Need more information or help? Call 633-3400 24 hours a day, 7 days a week to get live help. Thank you for letting us help care for you and your loved ones.