

## WHAT TO EXPECT WHEN A PERSON IS DYING

Over the last few days or weeks of life, you may see many changes in your loved one. He or she may sleep longer, have less energy, eat less, or withdraw from family and friends.

The following information will describe what may be experienced as death approaches. You may not see all of these events happening, nor is there a particular order, but it is important to be prepared.

### Longer sleeping periods

Some individuals may sleep longer and be more difficult to wake up. A time may come when they become completely unresponsive and appear to be in a coma-like state.

- Plan your conversations during more alert times and allow your loved one to sleep when he or she desires.
- Keep visits brief or simply sit quietly at the bedside.

### Less eating and drinking

A reduced or absent hunger and/or thirst is common and rarely causes distress as the dying process continues and normal functions slow down. Swallowing ability may also be reduced or absent.

- If alert and able to swallow, offer small portions of favourite foods. Do not try to force feed.
- Keep mouth moist with moist swabs and apply lip balm as needed.
- If you have concerns about fluid intake, please discuss them with one of the team members.

### Confusion and restlessness

Some individuals experience confusion, restlessness or agitation. They may attempt to climb out of bed or grab at things. They may also see things that aren't visible to others or say or do unexpected things. These behaviours can be a natural part of the dying process. They may indicate some "unfinished business" or a reluctance to let go. They can also indicate altered brain function from a variety of causes, such as disease, medications, or changes in body chemicals.

- Offer calm and gentle reassurances that they are safe and cared for.
- Listen if the person wishes to resolve any issues.
- You may offer permission to let go of life.
- If restlessness or agitation reaches distressing levels speak to one of your team members as medications may be required.

## Breathing changes

Breathing rate and depth may vary and breathing may stop for up to a minute at a time. This is a normal part of the dying process. Sometimes the breathing can sound wet or gurgly if saliva collects at the back of the throat as neck muscles relax or if the person's lungs become congested. This is usually not distressing for the person. It is rarely necessary to give oxygen or to provide suctioning.

- Regularly turn the person to help clear saliva. Lying on the side may be most comfortable.
- Slightly elevate the head of the bed.
- Medication may be given to dry secretions if they seem to be causing distress.

## Irregular heartbeat

An irregular heartbeat and pulse may occur. Checking the blood pressure is of no benefit and can cause discomfort.

## Changes in bowel or bladder function

Loss of bowel or bladder control is common. As the dying process continues, a person may pass less urine or none at all. Constipation can still occur and cause discomfort, even if your loved one is not eating. Therefore it may still be necessary to provide bowel care.

- If constipation is a problem, ask one of the team members for advice on bowel care.

## Skin changes

It is natural during this time for the body to direct most of its blood to the vital organs. This results in the skin taking on a bluish grey and/or mottled appearance. Arms and legs may become cool but this does not cause discomfort.

## Muscle twitching

As less oxygen becomes available to muscle tissue, twitching of the muscles can be seen. Medications could also cause some twitching and may need adjusting.

## Eyes

The individual's eyes may become dry, remain open or develop a white film. Over time they lose their ability to focus.

- Use eye lubricants
- Gently cleanse the eyes
- Close the eyelids

## Temperature

An elevated temperature is common.

- Give lukewarm sponge baths.
- Apply cool facecloths to the forehead.
- Use a fan.
- Give medications to reduce fever and provide comfort.

## Being with your loved one

Just being with your loved one is one of the best ways to offer comfort and support. You don't need to say anything. Silence can be a powerful way of communicating when words can't be found.

- When the person is awake and wishing to talk, chatting about happy times can be comforting. Laughter can also ease tension and bring you closer together.
- Don't be afraid to talk about ordinary things that are going on in your life.
- If the person wishes to be touched, holding his or her hand, giving a hug, or providing a gentle massage with lotion to the hands and feet can communicate caring.
- A low intensity light or soft, favourite music in the room can provide comfort.
- It is important to remember that although the person may not respond any longer, their ability to hear may still exist. Be aware of what you say within hearing range.
- Do as much or as little physical care for your loved one as you wish. Nursing staff are happy to help by demonstrating physical care.

## Signs that death has occurred

- Breathing stops,
- Heartbeat and pulse stop, and
- There is no response to touch or voice.

*Death helps us see what is worth  
trusting and loving and what is a  
waste of time.*

~ J. Neville Ward, Methodist minister  
(1915-1992)