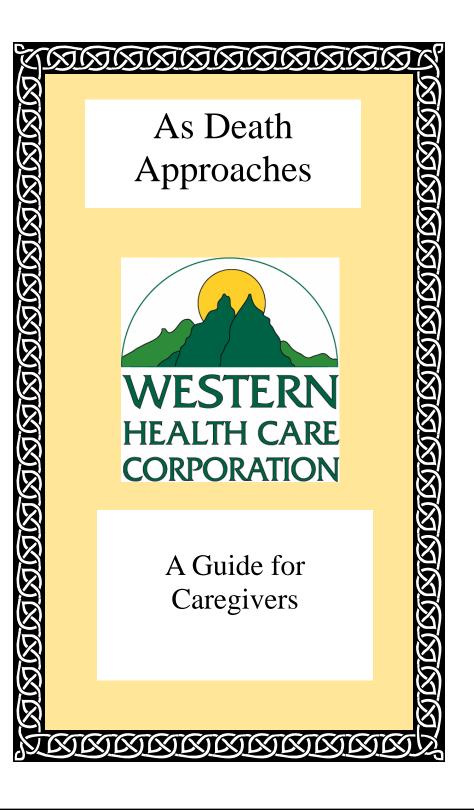
More information about palliative care services in the western region can be obtained from the Regional Palliative Care Service Office at (709) 637-5000 x 5414 or 5203, or from your local health care facility. Bonne Bay Health Centre Ph: (709) 458-2211 Calder Health Centre Ph: (709) 886-3351 Dr. Charles L. LeGrow Health Centre Ph: (709) 695-2175 Rufus Guinchard Medical Centre Ph: (709) 861-3139 Sir Thomas Roddick Hospital Ph: (709) 643-5111 This brochure was developed by: Western Health Care Corporation Palliative Care Service



Is someone you love entering the final stages of life? This is a very difficult time for caregivers, and although you may find it hard to read the information in this pamphlet, the intention is to prepare you for what to expect. Not all the signs described here occur in every dying person. If you have any questions or concerns about the care of your loved one, please ask the nurse or doctor.

Considerations

Is your loved one able to make his/her own decisions? If not, does anyone have Power of Attorney for personal care? Has he/she expressed any wishes about feeding at the end?



Crying is a personal reaction. For some it is a natural reaction to grief. Others may internalise their feelings, and be unable to cry. This doesn't mean that one grieves more than the other—both reactions are normal.

Prayer is very important to some people, unnecessary to others. Be guided by your inner self, and do what is right for you.

Caring for yourself

Seeing your loved one dying can use all your energies. If the process is long you are at risk of becoming mentally and physically exhausted. Your well-being is just as important as that of the dying person, so one of the best things for you to do at this time is to take care of yourself. It is normal for both you and the dying person to experience feelings of frustration, guilt, sadness, or anger. They are responses to the losses you are both experiencing.

- Sleep may not come easily, but try to get enough rest.
- You may not feel like eating, but do attend to your nutritional needs.
- Time away from your loved one is essential if you are to avoid mental exhaustion. Ask other family members, or friends, to stay with the person for you.

Decreased Socialization

The person may want to be with just a few, or only one person. This is a sign that the patient is getting ready to die. If you are not included, it does not mean that you are not loved, or are unimportant. It means that you have already fulfilled your role with your loved one, and it is time to say goodbye.

How do you know when death has occurred?

- Your loved one will be entirely unresponsive;
- He/she will not be breathing;
- The pulse/heartbeat will stop;
- The eye's will be fixed in one direction, open or closed
- At the time of death there may be loss of control of bladder or bowel.

What do you do after your loved one has died?

Firstly, there is no right or wrong way to be at this time, but it is important that you do what you feel is right for you, and not what you feel is expected of you. You may wish to spend time with the person—take as much time as you need. Some people don't want to stay, others stay for hours. Do not be afraid to hug and kiss the person, or lie down beside him/her. And remember that others may have needs different to yours, so try to be sensitive to and supportive of their needs.

Signs that death is approaching, and what you can do to help:

Mental changes

The person may be drowsy or confused, sometimes irritable. Thinking and remembering are not good. As the end of life nears, loss of awareness is common. *Help by* talking normally to the person, holding their hand, letting them know you are there.

Reduced food and fluid intake

The person may want little or no food or fluids. *Help by* recognising this as a normal part of dying. Although tempted, do not try to force the person to take food and/ or fluid, as doing so would increase the person's discomfort. Small amounts of a desired food, or ice chips/sips of water, will usually suffice.

Coolness

The hands, arms, feet, and legs may become increasingly cool to touch. The face may be pale, and the feet and legs become a purple-blue mottled colour. This indicates that the blood circulation is being reserved for the body's most vital organs. *Help by* keeping the person warm with blankets, using just enough to keep him/her comfortable. Do not use an electric blanket.

Incontinence

The person may lose control of the bladder and bowels as the muscles in these areas begin to relax. However, at the same time urine output decreases as the kidneys begin to stop working, and fluid intake falls. *Help by* first understanding that this is part of the dying process. Use of an incontinence product may be appropriate, so ask the nurse for advice.

Temperature and Heart Rate

Fever often occurs because the body's thermostat is no longer working properly. There is similar loss of control of the heart-rate, so you may notice the pulse speeding up or slowing down. *Help by* adjusting the clothing to keep the person at a comfortable temperature.

Congestion

Loud gurgling sounds may come from the person's throat or chest, because he/she is unable to swallow saliva. Although it sounds horrible, it does not mean the person is uncomfortable. *Help by* avoiding suctioning (it is very uncomfortable). Turn the head to the side and allow gravity to drain the saliva; wipe the mouth with a moist cloth. The doctor may be able to prescribe medication to reduce the amount of saliva.

Changes in Breathing Pattern

Breathing may be irregular, and may stop for periods of

10 to 30 seconds, or there may be periods of rapid, shallow breathing. These breathing patterns are because of decreased circulation to various organs. *Help by* raising the head of the bed, or turning the person to the side. Hold your loved one's hand and speak softly.

Mottling and Cooling

As the blood flow decreases, the skin, especially in the arms and legs, feels cool. The patient's skin may appear grey, and the arms and legs may be bluish or mottled. *Help by* keeping the limbs warm, and helping the person to turn regularly so pressure sores are avoided.

Withdrawal

The person may seem unresponsive, or comatose for periods of time. This is preparation for release, or letting go. *Help by* speaking normally to your loved one. Hold their hand, and identify yourself by name when you speak. Say whatever you need to help him/her let go.

Visions

The person may see, or speak to, a person already dead. This is a preparation for transition from this world to the next. *Help by* accepting what the person is saying. The experience is real, common, normal, and comforting.