Understanding a Natural Death

Expected Symptoms of Approaching Death & Ways to Support Your Loved One



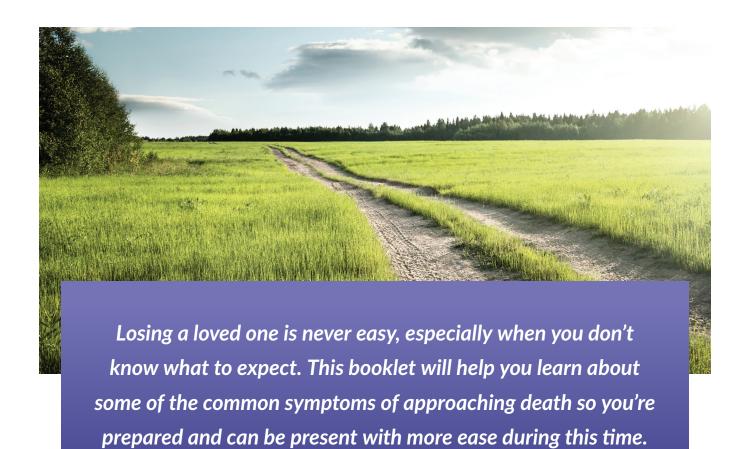


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ENERGY & SOCIAL CHANGES

Withdrawal & Fatigue

As death nears, your loved one may show signs of withdrawal and fatigue. For instance, you may notice he or she:

- Is less interested in talking, watching TV or reading the newspaper
- Has less energy to do the things he or she used to do
- Closes his or her eyes more often
- Sleeps longer
- Spends more time in bed
- Is asleep more often than he or she is awake

Your loved one may also begin doing an internal life review and showing less interest in the outside world. During this time there is a sorting out, an evaluation of one's self and life. You can help by:

- Creating a relaxing environment
- · Giving your loved one permission to let go when the time is right
- Reminding your loved one you and family will miss him or her, but will support one another. However, don't feel pressure to say anything you don't mean. Just keep in mind that those we love often need "permission" to let go. They often need to know they won't disappoint their family and friends when they do.



CHANGES IN APPETITE

As your loved one's metabolism slows, he or she may eat and drink less. It's a normal body response. Though this can be upsetting, don't force the ailing person to eat or drink. Doing this increases the risk of choking and can be very uncomfortable for your loved one. Instead, give your loved one:

- Frequent oral care using special mouth swabs. Ask your nurse for these swabs. Use lip balm on your loved one's lips to keep them moist.
- · Anti-nausea/vomiting medication as needed

Avoid the temptation to provide artificial nutrition and hydration, such as IVs and feeding tubes. Research shows they can increase suffering in people who are nearing the end of life and no longer have an interest in food. This suffering can manifest itself as:

Bloating

Swelling

• Cramps

Diarrhea

• Shortness of breath

Infections

Pressure wounds

because he is dying."

-A family caregiver

"Part of me wants to

believe if he would just eat,

everything would be better. I

had to remind myself that he

is not dying because of not

eating; he has stopped eating

SLEEP CHANGES

Your loved one's sleep patterns will also likely change during this time. He or she may snooze more often, or have difficulty slumbering. These changes can be the result of:

- Pain, anxiety, worry or depression
- Medications
- Being in an unfamiliar environment

PAIN

Poorly managed pain is a complex problem that leads to needless suffering and can be difficult to control if it's not treated quickly. To make your loved one comfortable, Enloe caregivers assess pain in several ways, whenever possible. They ask about:

- The location of the pain
- Its severity (often using a scale of 0 to 10)
- If the discomfort is constant or comes and goes
- · Whether it feels like stabbing, burning, aching or something else



All of these details help your loved one's care team treat pain properly. The symptoms of pain can vary from person to person, but they can manifest themselves as:

- · Moaning or crying out when your loved one is moved
- Frowning and facial grimacing (sad or mad expressions)
- Increased or loud breathing
- Tense, tight muscles or clenched fists
- Moving or pulling away from touch
- Restlessness

It's natural to want to comfort the ailing person if you notice the symptoms above or other signs of discomfort. For many, that means caressing a loved one's back or hands. However, as death approaches, a person's skin may be very sensitive and touch can cause pain. Heavy blankets and tight clothing can do the same. Continue doing what you think your loved one wants, but pay close attention and look for signs of discomfort.

MENTAL CHANGES

At the end of life, people often have trouble thinking clearly or may act differently because of confusion or delirium as a result of their disease, the stress of being ill, or the realization they're nearing death. You may notice that your loved one:

- Experiences confusion that is worse in the evening. This is called "sundowning."
- Sees or talks about people and places in the distant past that may be unknown to family.
- Visits or claims he or she talked to loved ones who have already passed.

Though these mental changes can be distressing for you, the following can help:

- Sit with your loved one. It's important to talk to him or her calmly and offer reassurance.
- Ensure your loved one is in a calm, quiet, peaceful surrounding.
- Don't try to explain away or argue about what the person has seen or heard.
- Medication can also help relieve symptoms.



Anxiety, Fear & Depression

Some anxiety, fear and depression are common among patients and families coping with chronic illness. These feelings are normal. They can be due to changes in the ability to perform normal family roles, loss of control over events in life, changes in body image, fear of death, fear of suffering and pain, and fear of the unknown.

Family members may also experience fear, anxiety or depression due to concerns about the eventual outcome, anger at why their loved one was stricken, frustration at not being able to "do enough," or stress due to increased responsibility at home. These feelings represent some of the ways people try to cope. However, if a person becomes overly anxious, fearful, or depressed and can no longer cope well with his or her day-to-day life, it may be helpful to talk with a social worker.

What to do:

- Listen carefully to each other's feelings.
- Provide reassurance and support.
- Talk about feelings and fears that family members are having.
- Seek help through support groups, a social worker or a spiritual adviser.

Do not:

- Keep feelings inside.
- Force someone to talk when he or she is not ready.
- Blame yourself for feelings of fear, anxiety or depression.

Call the nurse or social worker:

- If there are thoughts of suicide
- If the feelings interfere with sleep or activities of daily life



PHYSICAL CHANGES

You may notice physical changes in your loved one during this time, including changes to his or her urine, breathing and skin.

Changes to urine

Your loved one may become unable to empty his or her bladder, or may lose bladder control altogether. His or her urine may also change to a noticeably darker, even brown, hue. This is natural as the kidneys begin to shut down and your loved one is unable to take in oral fluid. Eventually, he or she will have minimal to no urine output.

Breathing changes

Changes in your loved one's breathing are common and natural at end of life. Don't be alarmed if you notice any of the following in your loved one:

- Long pauses in breathing and then a return to a normal breathing pattern
- Very rapid breathing or a combination of rapid then long pauses
- Buildup of fluid in the mouth, throat and lungs, causing a change in the sound of his or her breathing

While treatments can reduce some of the wet sound, medications can cause uncomfortable side effects, so if your loved one isn't bothered by it, treatment is not necessary. It can be helpful to remember that the sound is more distressing to you than your loved one. If you're considering suctioning the mouth, be aware it increases oral secretions and can be uncomfortable for your loved one. To alleviate symptoms, try elevating your loved one's head, rolling him or her onto his or her side, and turning on a fan to circulate air.

Swelling

Swelling, also known as edema, is a buildup of fluid in the tissues. It can be caused by water retention due to certain conditions or medications. Fluid can also build up in the abdomen, which can make it look swollen.

This swelling is usually not uncomfortable for your loved one. However, you can try:

- Propping up the affected area with pillows
- · Repositioning him or her for comfort

But keep in mind that sitting up too high can be uncomfortable if a person's stomach is severely swollen.

Skin changes

You may notice your loved one's hands, arms, feet, and legs become cold, or that his or her skin appears purple or red. This is also normal and usually occurs in the last days or hours of life. Arms and legs become cool to touch, then develop a color that looks like bruising. However, this does not mean your loved one is uncomfortable.

SUDDEN BURST OF ENERGY

Sometimes a person at the end of life will have a sudden, unexplained surge of energy. This will last for a short time. He or she may go from sleeping most of the time to suddenly being alert and clear, or asking for something to eat or drink. This can cause false hope that the person is getting better. Be mindful if this happens and use this time to:

- Enjoy being together
- Hold your loved one's hands
- Reminisce about your favorite memories
- Say your goodbyes
- Be in the moment

AT THE TIME OF DEATH

When your loved one passes, you don't need to do anything right away. You may prefer to stay in the room with your loved one or you may prefer to leave. Do what feels right to you. You can sit quietly, console one another, share stories or turn to spiritual support.

If your loved one passes away at home, you don't need to move the body right away. If you are in the hospital, talk to your health care providers in advance about any personal, cultural or religious requests for honoring your loved one. "When Mom was put on comfort care, I didn't know anything about the dying process.

Having an idea of what to expect really helped."

-A patient's daughter

Your health care team can provide more instructions on what to expect, depending on whether you're at home or in the hospital when your loved one passes. Also ask about resources that can support you as you adjust to your loss.



RESOURCES

Enloe Cancer Center Library | 265 Cohasset Road, Chico

The Enloe Cancer Center Library offers a number of materials related to caregiving, a loved one's final days, grieving and explaining death to children, including these publications:

- "Final Gifts: Understanding the Special Awareness, Needs, and Communications of the Dying" by Maggie Callanan and Patricia Kelley
- "One You Love Is Dying: 12 Thoughts to Guide You On the Journey" by James E. Miller
- "Gone From My Sight: The Dying Experience" by Barbara Karnes, RN

The library is free and open to the public. For library hours, please call (530) 332-3856 or go to www.enloe.org/library, where you can also view our online catalog.

Enloe Health eLibrary

This online library contains articles, quizzes and resources on a variety of health-related topics, including end of life. To access it, go to www.enloe.org, click "Health eLibrary" in the top menu and search "dying" for articles and other interactive tools on the subject.

Connect with a Spiritual Support Volunteer

Enloe Spiritual Support Volunteers are available to come alongside patients and families to explore what may bring them comfort, strength and peace, and to offer a listening ear or prayerful companionship. This service is offered to patients and families of any religion, denomination and to those whose spirituality is experienced apart from religious context. Call (530) 332-5064 to arrange a visit with an Enloe Spiritual Support Volunteer.

