

# What to expect in the last days of life



An information leaflet  
for carers and families

## **Why have I been given this leaflet?**

There has been a deterioration in the condition of your loved one. The doctors and nurses looking after them think that they may be dying.

Knowing that a loved one may be close to dying can be very difficult for everyone involved. People often ask us questions about what might happen when someone dies. For some, knowing what to expect may make the experience less difficult.

# How do you know someone is dying?

Whilst it is difficult to predict exactly how long someone has left to live, there are some common changes that we look out for.

## Some changes you may see

- Sleeping more
- Eating and drinking less
- Difficulty swallowing
- Restlessness / confusion
- Changes in breathing
- Skin changes

Your loved one may become weaker, feel very tired and spend more time sleeping. They may seem less interested in what is going on around them. They may not respond as much when you try to wake them, and if awake, they may be drowsy. They may however still be able to hear your voice. You may want to carry on speaking to them and take the opportunity to say the things that are important to you both.



## Eating and drinking less

Your loved one may decline food and drink as they may experience a reduction in their appetite and need for fluid. If it is safe for them to swallow, you can continue to offer food and drinks when they are awake. If your loved one is too sleepy to drink, their mouth can be moistened with water using a mouth swab / sponge or a soft tooth brush. A special gel or spray can also be used to moisten the mouth. Keeping your loved one's lips well moisturised can also help them to feel more comfortable. Please ask the nurses looking after your loved one for help with this.



## Difficulty swallowing tablets/medicines

As your loved one becomes weaker, they are likely to find swallowing more difficult and may not be able to take their usual medication. All medicines that are no longer needed at this stage will be stopped.

The doctors and nurses looking after you will arrange for 'just in case' injectable medications to be available should they be

needed for pain, shortness of breath, nausea, restlessness / agitation and chest secretions. If your loved one requires regular injections to manage their symptoms, a syringe pump may be recommended to ensure steady relief from these symptoms through the day and night. This will be discussed with you by the doctors or nurses looking after your loved one.



### **Changes in breathing and chest secretions**

Breathing may become less regular and the breaths may be fast and shallow. You may notice longer pauses between breaths, and in the very last moments, breaths may become much slower and quieter before they stop altogether.

Occasionally, a wet sound can be heard on the chest caused by a build-up of secretions. Changes in position and an injection of anti-secretory medication may help. Whilst the sound can be distressing to those at the bedside, in our experience it does not appear to distress the person who is dying.



## Restlessness and confusion

You may notice that there are times when your loved one appears confused, restless or agitated.

This can be caused by a number of things. The nurses looking after your loved one will check to make sure that the bladder is emptying (a catheter may be recommended) for any bowel activity and any signs of pain. In some cases, unresolved emotional or spiritual issues may be contributing to their agitation. Medicines may be given to treat the agitation and to reduce any distress or anxiety.



## Changes in Skin

You may notice that your loved one's skin becomes pale and mottled due to reduced circulation. The temperature may go up or the skin may feel cold to touch. The carers looking after your loved one will regularly reposition them to reduce the risk of pressure damage. A pressure relieving mattress is generally recommended at this stage.

# What happens now?

Our aim is to prioritise your loved one's comfort and needs, whilst supporting a peaceful and natural death.

We will talk to your loved one and to you to find out what is most important to you at this time.

Your loved one will be reviewed regularly, in person or by phone, by the clinical team looking after them. If you are at home this will include the district nurses, general practitioner (GP) and specialist palliative care nurses and doctors from the Community Team at the Hospice.

If you have been caring for your loved one, you may still want to stay involved or alternatively you may wish to step back and let others perform the physical care.

# What about support?

The doctors and nurses will support you.

Some signs may be distressing and you may want to take a break or leave the bedside for a period of time. It is important to consider your own feelings, as well as the person you are caring for.

If you would like to be referred for emotional or practical support, please speak to a member of the Palliative Care Team. If a particular faith is important to your loved one, you may want to inform a member of their faith team to support their cultural and spiritual needs.

# **Who should I contact if I have any questions?**

If you are staying at the Hospice, the nurses are happy to answer your queries. If you are at home, the district nurses, GP or community specialist palliative care nurses and doctors from the Hospice can answer any questions.

**A member of the Hospice Clinical Team is available to give telephone advice, anytime of the day or night, on 020 8099 7777.**

# Who should I contact out of hours?

Should your loved one require any medication for symptoms that may be distressing them, such as pain or agitation, please let the nurses know.

If you are at home, you will need to contact the District Nursing Team and they will arrange to visit you.

**If you require a GP out of hours please contact 111.**



**For further  
assistance  
and advice**

## **Contact us**

If you would like more advice or support  
please contact St Raphael's Hospice  
on **020 8099 7777**

St Raphael's Hospice  
London Road, Cheam,  
SUTTON SM3 9DX

**[www.straphaels.org.uk](http://www.straphaels.org.uk)**