







Collect secretions at the back of the throat that sound like a rattle. This is because the person cannot swallow saliva, but this does not mean they are uncomfortable. This is a very common occurrence. Position change may be helpful, medication may be used to reduce secretions. Although this rattling sound is not pleasant, research and our experience indicate that it is not usually distressing for patients.

When the person dies you will notice:

-  They will be entirely unresponsive.
-  Breathing stops, but occasionally after death there may be a “last sigh” or gurgling sound.
-  Heart beat and pulse stop
-  Their eyes will be fixed in one direction and may be open or closed.

This can be a difficult and emotionally painful time for you. You are leaving those you love or losing someone you love and care for. It is often hard to know what to say to each other at a time like this.

Nurses, doctors and other staff are there to help you to work through your worries and concerns and to offer you care and support.

Your feedback is welcome

We invite you to share any comments, compliments, concerns or complaints you have about St Gemma's. Please speak to a member of staff who can also provide help in understanding this information.



This leaflet is available in large print.
Please call 0113 218 5557

Coping with Dying

Recognise changes and knowing what to do



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In order to reduce the anxiety which often comes from the unknown, this leaflet describes some typical features of the process of dying.

Although this information may be difficult to read, please know that the aim of this leaflet is to help prepare you for what may occur.

Not every patient will experience all the symptoms of approaching death described. The focus of this information is to help you to be prepared for the signs that may occur. Please ask health care professionals looking after you/ your relative if you have any concerns or fears or you need more explanation.


Helping you cope


Our ward staff realise that this period is a very difficult one for family, friends and carers. People tend to cope better when they have an understanding of what is happening. Fear of the unknown is sometimes much worse than the reality. We try to be as honest and as straightforward as possible. We want to establish open communication with you and family members.


At St Gemma's, we provide individualised end of life care, incorporating psychological, spiritual and social needs, comprehensive symptom management and nutritional support.


The following information is offered to help you understand the symptoms and signs, which may indicate approaching death.


Signs of approaching death and helpful ways you can respond


 **Sleeping more and at times difficult to wake.** Try not to be discouraged if there is little response – this may be due to weakness, not lack of appreciation. Simply being together can be a great comfort to both of you. Plan conversation times for when the person seems more alert. Eventually the person may lapse into unconsciousness and may remain in this state for a surprisingly long time, (in rare cases many days) although for others it is shorter.


 **Loss of appetite and forgetting to swallow.** Offer small servings of favourite food or drink without “forcing”. We will continue to offer food and drink as long as the patient can safely swallow them. Initially, as weakness develops, the effort of eating and drinking may simply have become too much, and at this time help with feeding might be appreciated. However, eventually there will come a time when food and drink are neither wanted nor needed. This can be very distressing for carers as food and drink are closely associated with nurturing. You can show you care in other ways including helping to provide mouth care or simply being present.


 **Become confused about time or may not recognise familiar people.** Speak calmly so as not to startle or frighten. Remind the person of the day, the time and who is in the room. Leave a soft light on in the room.

 **Experience impaired hearing or vision and may develop a fixed stare.** Never assume the person cannot hear you. Speak as if your words can be heard.

 **Become overly restless, pull at the bed linen and have visions of people or things not present.** Provide reassurance and avoid physical restrictions when possible. Let the nurses know if this happens.

 **Lose control of bladder or bowels.** The amount of urine will decrease or stop as death approaches. Health care staff will help in suggesting appropriate padding or recommend a catheter for urine.

 **Breathe irregularly and may stop breathing for 10-30 second periods.** If the person is breathing through the mouth, the lips and mouth become dry. Moistening the mouth with a damp sponge and applying lip salve will give comfort. People who experience breathlessness are often concerned that they will die fighting for their breath. Yet towards the end of life, as they are less active, the demand for oxygen is reduced to a minimum. There is no need to become alarmed about this as it is the normal pattern. The pulse may become faster and irregular. Again this is often part of the normal process of dying.

 **Have cool arms and legs as the circulation slows down.** Their face may become pale, their feet and legs a purple-blue mottled appearance. Use just enough coverings to keep the person comfortable.