

# About the process of dying

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If you have never seen someone die you may be afraid of what will happen, but the moment of death is usually peaceful. This fact sheet is designed to help you.

Caring for a person during the last few weeks and days of life can be stressful and demanding. Many different feelings and emotions may surface at this time. This leaflet should help you to understand, anticipate and respond to some of the signs you may notice.

Carers are often concerned that death will be a painful experience for the person. However, the time before death is usually peaceful. There is a gradual winding-down that might take several days, as if the body is 'letting-go' of life. If restlessness does occur, it can be treated.

Not all of these signs will occur in each person. Nor is there a particular sequence in which they will occur. Sometimes these signs will appear a few hours before death, sometimes a few days. These physical signs are part of the normal, natural process of the person's body gradually slowing down.

Apart from the signs described here, you might notice other changes that worry you. The palliative care team is there to assist you by providing information and support.

Please ask for help at any time. The team expects to have increased contact with you in the last stages of the person's life.

You can bring enormous benefit to the person you are caring for simply by sitting with them, holding their hand and speaking in a calm and reassuring manner. Even when the person does not respond, they can probably hear you.

Don't underestimate the value of these simple things. 'Being with' can be more important than 'doing for'.

## **Changes you may notice and what you can do to help**

### **Appetite and thirst**

The person's appetite and thirst may decrease and they may have little desire to eat or drink. This concerns many carers, but is a natural process and is not painful for the person. Sips of water or a moist mouth swab will help them. You could ask the nurses to assist with mouth care. Attempting to feed someone who is unable to swallow may make them distressed.

### **Sleep and alertness**

Changes occurring in the person's body mean that they may spend a lot of time asleep, may be drowsy and difficult to wake up. It is best to talk to the person when they seem most alert, and to allow them to sleep when they want to. There is no need to shake the person or to speak loudly. It is best to speak softly and naturally.

## Temperature

The body's temperature may change. At one time the person's hands, feet and legs may be increasingly cool to the touch, and at others they may be hot and clammy. Sometimes parts of the person's body become blotchy and darker in colour. This is due to the circulation of the blood slowing down and is a normal part of the dying process. If the person indicates that they feel cold, use light bedding to keep them warm. Too many bed clothes or an electric blanket may make them hot and restless. Provide good ventilation. A fan to circulate the air and cool damp towels can help if the person seems hot.

## Incontinence

The amount of urine that the body is producing decreases due to the reduced amount of fluid the person is drinking. The urine may become stronger and darker in colour. Many carers are concerned that the person will lose control of their bladder and bowels. This doesn't happen to all people, but if it does then pads and absorbent sheets should be at hand. A member of the team will advise you about what is needed.

## Secretions

As coughing and swallowing reflexes slow down, saliva and mucus may collect in the back of the person's throat, causing a gurgling, bubbling or other noise. This noise can be a concern to carers, but does not usually cause distress to the person. To help improve the situation you can lift the person's head and support them with pillows so that their head is turned to one side. Medications can also be given to slow down the production of saliva and mucus and to improve comfort.

## Breathing

Regular breathing patterns may change. Sometimes the breathing may be fast, and at other times there may be long gaps between breaths. Breathing may be shallow or noisy. This too is due to blood circulation slowing down and a build-up in the body's waste products. It is not painful or distressing for the person.

## Restlessness

Due to the decrease in circulation of blood to the brain and to other changes happening in the body the person may become restless or agitated. To have a calming effect, speak with quiet calm, lightly massage the person's hand or forehead, or softly play familiar music. Let a palliative care team member know if the person becomes restless or agitated. Medications can be given to reduce this.

## How will you know when death has occurred?

- Breathing stops
- No heartbeat or pulse can be felt
- The person cannot be woken-up
- Eyelids may be half open
- Sometimes their mouth may also be open
- Pupils are fixed.

## What should you do?

You don't have to contact anyone immediately unless you want to. It is important that you do everything in your own time. There is no need to hurry. Telephone a relative or friend if you want them to be with you. If the person dies during the night you can wait until morning before you notify the doctor or nurse, or you can call them straight away.

The person's body can stay at home for as long as you wish or need, especially if you would like friends and relative to come and say their goodbyes. It is a good idea to turn off or remove sources of heat such as room heaters, electric blankets and hot water bottles. It is also important to straighten the person because their limbs will stiffen, and if you can, replace dentures if they were removed. You can sponge away any perspiration or body fluids that worry you. It is not necessary to bathe the person completely, unless you want to. The palliative care nurse can help you to do this if you would like to. When you are ready, contact the funeral director who will take the person's body and guide you through the funeral arrangements.