

As an informal caregiver, you may find the following helpful:

- Consider the person's expressed wishes
- Openly show your love and gratitude to the person
- Verbalize your feelings even though the person may be non-responsive
- Provide the gift of human touch by holding hands or gently rubbing their feet or back
- Maintain a peaceful relaxing environment
- Offer frequent mouth care with moistened 'toothettes' (available at a retail pharmacy)
- Moisten mouth with small amounts of water (artificial saliva products are available at a retail pharmacy)
- Lubricate lips to prevent cracking
- Lubricate eyes with artificial tears as needed (available at retail pharmacy)
- Offer favourite foods in very small portions (1 – 2 tbsp) if desired
- Offer sips of preferred fluids if desired
- Allow the person to experience taste by offering a gauze soaked in a favourite beverage
- Comfort measures may include small amounts of food and fluid as tolerated by the individual

References:

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McCann, R. Comfort Care for Terminally Ill Patients. JAMA (1994) 272:16, 1263-1266

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I Don't know what to do....

My Loved One is No Longer Eating or Drinking



End-of-Life
Care Network

Serving Erie St Clair

In the final stages of life, nutrition serves to feed the soul instead of the body.

Donna Danelon RD

This booklet is intended to provide you with information that will help you understand the role of fluids and food at this final stage of your loved one's illness.

From birth to death, the ability to eat and drink is a basic necessity of life. Feeding is seen as an attempt to meet the needs of those for whom we care. It is important however to understand the role of fluid and food during and at the final stages of life.



The information in this booklet will help to guide your decision making around the provision of food and fluids for those persons cared for at home, in the hospital or in long term care homes.

Many persons living with a life limiting illness experience a loss of interest in eating and drinking. This can be a result of the effect of the illness, or the various treatments provided. In the final stages of life, this lack of interest is a natural part of the dying process and indicates the body no longer requires food or fluid to support it.

It is important to recognize that each person is unique

While the provision of food and fluid is an expression of caring, it is important to recognize that nutritional support in the final stages of life will not prolong life. The person is dying from the underlying disease and not from lack of food and fluid. At this point in their journey the goals of care should be directed toward providing comfort while offering an opportunity for quality time with loved ones.

Care decisions should include the expressed wishes of the person. Food and fluid should be offered based on the desires of the person being cared for.

When the person can no longer swallow, artificial nutrition and/or hydration may be seen as appropriate by informal caregivers. It is important to remember that additional fluid and nutritional support may not prolong life and may introduce many unwanted side effects.

There are specific situations where artificial hydration may be seen as medically appropriate to manage a distressing symptom. Individual plans of care must be taken into consideration before introducing artificial nutrition.

The absence of food and/or fluid for a person in the advanced stage of a life limiting illness, will not result in pain as was once thought. The body is able to adapt to this lack of food and fluid. Observations of dying people have identified fatigue, dry mouth and dry eyes are the most common side effects. Dry eyes can be easily treated with artificial tears. Frequent mouth care is offered for the relief of dry mouth.

When the goal of care is comfort, providing food and fluid as desired is an opportunity for personal contact and nurturing. It is at this point in the journey that providing comfort and love is of utmost importance.

