

something important for the patient's comfort such as "It's time to take your medication." Explain the reason for the communication in simple phrases such as, "So you will not begin to hurt. Do not use this method to try to manipulate the patient to meet your needs.

Congestion

The person may develop gurgling sounds coming from the chest like a percolator. Sometimes, these sounds become very loud and can be distracting to hear. The person may project sound coming from the chest that sounds similar to marbles rolling around. The person is usually unaware of this process, and the family usually feels more uncomfortable than the patient when this happens. Suctioning is usually ineffective and can be hard on the patient. Repositioning by turning the person side to side or raising the head of the bed may decrease the sounds. Medication is available to dry the secretions.

Vision-like Experiences

The person may speak or claim to have spoken to persons who have already died, or claim to see or have seen places not presently accessible or visible to you. This does not indicate a hallucination or a drug reaction. This person is beginning to detach from this life and is preparing for the transition to make the change less frightening. Do not contradict, explain away, belittle or argue about what the person claims to have seen or heard. Just because you cannot see or hear it, does not mean it is not real to your loved one. Affirm his or her experiences. They are normal and common. If they frighten your loved one, explain that they are normal occurrences.

Giving Permission

Giving permission to your loved one to let go without making him or her feel guilty for leaving or trying to keep him or her with you to meet your own needs, can be difficult. A dying person will normally try to hold on even though it brings prolonged discomfort in order to be sure that those left behind will be all right. Therefore your ability to release the dying person from this concern by giving him or her assurance that it is all right to let go whenever he or she is ready, is one of the greatest gifts that you have to give your loved one.

Saying Good-bye

When a person is ready to die, and you are able to let go, then is the time to say good-bye. Saying good-bye is your final gift to your loved one for it achieves closure and makes the final release possible. It may be helpful to lay in bed and hold the person or to take his or her hand and then say everything you need to say. Tears are a natural part of making peace and saying good-bye. They do not need to be hidden or apologized for; they are an expression of love.

Knowing When Death Has Occurred

Although you may be prepared for the death process, you may not be prepared for the actual death moment. The death of a Hospice patient is not an emergency. Nothing must be done immediately.

At The Time of Death

- breathing ceases
- heart beat ceases
- the person cannot be roused
- the eyelids may be partially open with eyes in a fixed state
- the mouth may fall open as the jaw relaxes
- there is sometimes a release of bowel/bladder contents as the body relaxes

Thank you

We of St. Michael's Centre thank you for the privilege of assisting you with the care of your loved one. We salute you for all that you have done to surround your loved one with understanding and care, to provide your loved one with comfort and calm, and to enable your loved one to leave this world with a special sense of peace and love. You have given your loved one, one of the most wonderful, beautiful, and sensitive gifts that we humans have to offer. In giving that gift, you have given yourself a wonderful gift as well.

*Created by Debra A. Mayer
Dedicated in loving memory of my mother
Elda Marion Mayer
October 17, 2004*



When a Loved one Is Dying



PREPARING FOR APPROACHING DEATH: SIGNS AND SYMPTOMS

When a person enters the final stage of the dying process, two different dynamics are at work which is closely interrelated and interdependent. On the physical plane, the body begins the final process of shutting down, which will end when all the physical systems cease to function. Usually this is an orderly and un-dramatic progressive series of physical changes which are not medical emergencies requiring invasive interventions. These physical changes are a normal, natural way in which the body prepares itself to stop, and the most appropriate kinds of responses are comfort-enhancing measures.

The other dynamic of the dying process is on the emotional-spiritual-mental plane and is a different kind of process. The spirit of the dying person begins the final process of release from the body, its immediate environment, and all the attachments. This release also tends to follow its own priorities, which may include the resolution of whatever is unfinished of a practical nature and reception of permission to “let go” from family members. These events are the normal, natural way in which the spirit prepares to move from this existence into the next dimension of life. The most appropriate kinds of responses to the emotional-spiritual-mental changes are those which support and encourage this release and transition.

The experience we call death occurs when the body completes its natural process of shutting down, and when the spirit completes its natural process of reconciling and finishing. These two processes need to happen in a way appropriate and unique to the values, beliefs, and lifestyle of the dying person.

Therefore, as you seek to prepare yourself as this event approaches, the care team at St. Michael’s Center wants you to know what to expect and how to respond in ways that will help your loved one accomplish this transition with support, understanding, and ease. This is the great gift of love you have to offer your loved one as this moment approaches.

The following signs and symptoms are indicative of how the body prepares itself for the final stage of life:

Fluid and Food Decreases

The person may have a decrease in appetite and thirst wanting little or no food or fluid. The body will naturally begin to conserve the energy expended on these tasks. Do not try to force food or drink into the person or try to use guilt to manipulate them into eating or drinking. Since normal hydration is often not feasible, declining in a state of dehydration rather than fluid overload is more peaceful. Small chips of ice, frozen orange juice, or popsicles may be refreshing in the mouth. Be cautious of decreased swallowing ability, and do not force fluids if the person coughs soon after. Reflexes needed to swallow may be sluggish. The loss of desire for food or liquids is a signal that the body is shutting down and dehydration no longer makes a person uncomfortable. Swab sticks soaked in water or alcohol-free mouth wash can be used to keep the mouth and lips moist, comfortable, and hydrated.

Decreased Socialization

The person may want to be alone or just with one person. This is natural when one is weak and fatigued. As well, the path seems a solitary one of progressive detachment.

Coolness and color Changes

The person’s hands, arms, feet, and then legs may be increasingly cool to the touch, and at the same time, the color of the skin may become discolored. As well, the underside of the body may become discolored. This is a normal indication that the circulation of blood is decreasing to the body’s extremities and is being reserved for the most vital organs in the core. Irregular temperatures can be the result of the brain sending unclear messages. Keep the person warm with a blanket, if he or she appears cold, but do not use one that is electric. If the patient continually removes his or her covers, allow him or her to use a light sheet.

Urine Decrease and Incontinence

Urine output normally decreases and may become tea-colored; this is referred to as concentrated urine. This is due to the decreased fluid intake, the decreased circulation through the kidneys, and the fluid lost through breathing and respiration. The person may lose control of bladder and/or bowel function as the muscles in that area begin to relax. Incontinent pads should be used to maintain

cleanliness and comfort. A urinary catheter may be inserted to prevent skin breakdown.

Sleeping

The person may spend an increasing amount of time sleeping and appear to be uncommunicative or unresponsive and at times, difficult to arouse. This normal change is due in part to the changes in the metabolism of the body. Sit with your loved one, hold his or her hand, but do not shake it or speak loudly. Speak softly and naturally. Plan to spend time with your loved one during those times when he or she seems most alert or awake. Do not talk about the person in the person’s presence. Speak to him or her directly as you normally would, even though there may be no response. Never assume the person cannot hear; hearing is the last of the senses to be lost.

Restlessness

The person may make restless and repetitive motions such as pulling at bed linen or clothing. This often happens and is partly due to the decrease in oxygen circulation to the brain and due to metabolism changes. Do not interfere with or try to restrain such motions. To have a calming effect, speak in a quiet, natural way, lightly massage the forehead, read to the person, or play some soothing music.

Breathing Pattern Changes

The person’s regular breathing pattern may change with the onset of a different breathing pace. When a person’s breathing pattern becomes irregular, you may hear shallow breaths with periods of no breathing for 5 to 30 seconds and possibly for a full minute. This is called Cheyne-Stokes breathing. The person may also experience periods of rapid shallow pant-like breathing. These patterns are very common and indicate a decrease in circulation in the internal organs. Elevating the head and/or turning the person onto his or her side may bring comfort. Hold your loved one’s hand. Speak gently.

Disorientation

The person may be confused about time, place, and the identity of the people surrounding those including close and familiar people. Identify yourself by name before you speak rather than asking the person to guess who you are. Speak softly, clearly, and truthfully when communicating