

## How will you know that death has occurred?

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

## What should you do?

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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 relatives 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.

When you are ready, contact the funeral director who will take the person's body and guide you through the funeral arrangements

*Disclaimer: The information in this booklet is not clinical advice. Your health care decisions are best made in consultation with your doctor.*



# The dying process

If you have never seen anyone die you may be afraid of what will happen, but the moment of death is usually peaceful. This brochure will help you to understand, anticipate and respond to some of the signs you may notice

Caring for a person during the last few days and weeks of life can be stressful and demanding. Many different feelings and emotions may surface at this time.

Carers are often concerned that death will be a painful experience for the person. However the time before death is generally peaceful. There is a general winding down that may take several days. The body starts to 'let go' of life. If restlessness occurs it can be treated.

Not all signs discussed in this leaflet will occur with every person. Nor will they occur in any particular sequence. Sometimes these signs 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 may 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 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 may decrease, and they may have little desire to eat or drink. This concerns many carers, but this is a natural process and is not painful for the person. Sips of water, or a moist mouth swab will help them. You can ask the nurses to show you how to help with mouth care, if you wish. Attempting to feed someone who is unable to swallow may make them distressed.

### Sleep and alertness

Changes happening 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 are most alert, and 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 becomes blotchy and darker in colour. This is due to the circulation of the blood slowing down and is a natural process.

If the person indicates they feel cold, use light bedding to keep them warm. Too many bed clothes or an electric blanket may make them 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 produces 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 does not happen to all people, but if it does there are pads, easy to use equipment and special absorbent sheets to enhance comfort and hygiene.

A member of the district nurse 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 thus improving 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 in a quiet natural way, 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 the problem.

