

Although it is impossible to totally prepare for a death, a death may be made easier if you know what to expect. This pamphlet may be helpful in preparing you as family and/or caregiver to understand the final stage of life. It is important to discuss your concerns and fears with those around you, both your family and health care providers. These people can help you make choices with or for your loved one and can inform you about other services that are available to support you.

Death is a natural process as the body begins shutting down. The following physical and emotional signs of approaching death are described to help you understand what can happen. Not all these signs and symptoms will occur with every person nor will they occur in any particular sequence.

This brochure is intended only as a guide. It is not intended to replace advice given by a health care professional, such as a nurse, physician, clergy, social worker, CCAC case manager or pharmacist.

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The information in this booklet may be copied and shared.

AFTER DEATH HAS OCCURRED

If you have health care professionals involved in the care of the dying person they should be notified of the death. They are available to provide you with emotional support and assistance regarding phone calls to the physician and the funeral home.

The nurse or the family must call a physician so that the death can be certified.

At the same time, it is necessary to call the funeral home to inform them that your loved one has died.

You may spend as much time as needed with the deceased person. Do not be afraid to touch, hug or kiss the person. Some people may wish to lie down beside him/her.

A health care provider may also help with the safe, responsible way of storing and disposing of medication and equipment, but it is the family's responsibility to do so.

You may have dealt with many intense emotions and challenges in your journey through the loss of your loved one.

It is important to realize that grief is a highly personal response to life losses. Grief may last longer than society recognizes, so be patient with yourself and allow for the expression of feelings that you are experiencing.

HELPFUL HINTS

- Sit with the dying person; hold his/her hand. Reassure the person with a reminder that you are there. Do not speak about your loved one as though he/she isn't there. Hearing remains until the moment of death.
 - Identify yourself by name. Speak softly, clearly and truthfully when you need to communicate.
 - Talk to him/her while giving care and explain what you are doing.
 - Sitting quietly at the bedside, playing soothing music or reading something comforting may achieve a calming effect.
- For Yourself:***
- Normal family routines may be disrupted and you may feel you have lost your ability to concentrate on anything. You may wish sometimes for things to be over because of the uncertainty, helplessness, emotional and physical exhaustion you may be experiencing.
 - Feelings such as guilt, anger, frustration or sadness are common among people who are supporting a person during a terminal illness

- Tears are a natural expression of one's feelings. Some may internalize their feelings and may not be able to cry. Both reactions are normal.
- Good byes are appropriate. Both the family and the person dying may find comfort in this process of "letting go."
- During this time a member of the clergy, chaplain or a spiritual advisor can provide support and comfort to both the family and the person dying. Certain religions have rites or sacraments that may be desired by the client or family at this time.
- It is helpful to plan ahead. Know what your loved one's wishes are so that they are respected. Making funeral arrangements in advance reduces the number of decisions that will need to be made right at the time of death. It also provides an opportunity to talk about arrangements, concerns and feelings.

HOW WILL I KNOW DEATH HAS OCCURRED?

Even though death is expected, you may not be prepared for the actual moment it occurs. At the time of death:

- There will be no response
- There will be no breathing
- There will be no pulse
- Eyes will be fixed in one direction
- Eyelids may be opened or closed
- There may be loss of control of the bladder or bowel

**REMEMBER THIS IS AN EXPECTED DEATH
AND NO FURTHER MEDICAL INTERVENTION IS
REQUIRED**

**DO NOT CALL 911, THE POLICE, OR THE
FIRE DEPARTMENT**

SOCIAL AND EMOTIONAL SIGNS OF APPROACHING DEATH

As death approaches, the person becomes quieter and less interested in physical surroundings. He/she may become withdrawn, less sociable and also be confused about time and place.

Vision like experiences may occur. The person may see or speak to people and places not visible to you. Try not to explain away what the person is saying. Be supportive by listening to the person.

The person dying may be going through different emotional states such as guilt, anger frustration, helplessness or sadness. Tears are a natural expression of one's feelings and may occur in both the person and his/her family.

SPIRITUALITY & CULTURAL RITUALS:

People vary greatly in their spiritual and religious beliefs and needs. During this time a member of the clergy, chaplain or a spiritual advisor can provide support to both the dying person and the family.

It may be helpful for you to attend to your own special cultural needs at this time.

PHYSICAL SIGNS OF APPROACHING DEATH

REDUCED FOOD & FLUID INTAKE:

Loss of appetite and decrease in thirst are common. The body is beginning to shut down and does not need nourishment. People commonly feel it is necessary to encourage the person to eat in the hope of sustaining life; however, food and fluid may cause discomfort. The person may ask for ice chips, popsicles, ice cream or some other food choice. Do not be surprised if only a mouthful or two is taken. When swallowing is no longer possible, mouth care provides moisture and comfort. Do not offer fluids if swallowing is not possible.

ELIMINATION:

Output of urine and stool will decrease as the food and fluid intake decreases. Urine and stool may also change colour, be passed less frequently and in smaller amounts. Other factors such as immobility and medication may contribute to this.

Your loved one may lose control of bladder or bowel function as the muscles begin to relax. In this instance it may be necessary to use an incontinence brief.

At the time of death, some stomach fluids may be released through the mouth.

Ask the health care professional about the management of these symptoms. It is important to provide skin care and cleansing on a routine basis.

SLEEPING:

Sleeping an increased amount of time is common. It may become more difficult to waken the person. As death nears, the person may slip into a coma and become unresponsive.

RESTLESSNESS AND DISORIENTATION:

Confusion as to time, place and recognition of people, even family members and close friends is common. At times your loved one may become restless. For example, he/she may reach out to unseen objects, pull at bedclothes or try to get out of bed. This can occur for many reasons such as lack of oxygen circulation to the brain or changes in condition or medications. It would be helpful to discuss these changes with a health care professional.

CHANGES IN BREATHING:

Regular breathing patterns may change. Breathing may stop for 10 to 30 second periods or there may be periods of rapid, shallow panting. These breathing patterns are normal and indicate the natural progression towards death.

A moaning sound occurs as the breath passes over the relaxed vocal cords.

CONGESTION:

Gurgling sounds, often loud, occur when a person is unable to cough up normal secretions. This does not normally cause pain or discomfort. It may be helpful to turn the person to one side and gently wipe away secretions with a moist cloth. As secretions build up, keeping the head of the bed elevated (by using pillows), will make breathing easier. Sometimes medications can be ordered to help dry up secretions. Oral suctioning may be done, however, this usually causes an increase in secretion production.

SKIN:

You may notice the skin begin to change colour and become cooler to touch.

The face may be pale and the feet and legs a purple-blue mottled colour. The circulation of the blood is slowing down.

Although your loved one is cool to touch, he/she is usually comfortable. Offer a warm blanket but avoid using an electric blanket to prevent the risk of skin burns.

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***THIS BOOKLET IS DEDICATED TO
THE PATIENTS AND FAMILIES
FROM WHOM WE HAVE LEARNED
SO MUCH, AND TO ALL THOSE
WHO CARE FOR THEM***

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