



# WHEN YOUR LOVED ONE IS DYING



**BLUEWATER**  
HEALTH

## TABLE OF CONTENTS

Hydration/Nutrition _____	2
Elimination _____	2
Changes in Awareness/Consciousness _____	3
Changes in Breathing _____	3
Changes of the Skin _____	4
Medications _____	4
Children _____	5
Spirituality _____	5
How Will I Know That Death Has Occurred _____	6
After Death Has Occurred _____	6
Organ Donation _____	7
Autopsy/Coroner _____	7
Funeral Homes _____	8
Self-Care – Grief _____	9

## **EXPERIENCING DEATH WITH YOUR LOVED ONE**

You have been given this booklet in the hope that it will give you a better understanding of what to expect as you provide end of life care for a loved one.

It is impossible to totally prepare for a death, but knowing what to expect and how the dying process will be managed should lessen your fears and anxieties.

The topics discussed in this booklet hope to cover the most frequently asked questions, but remember that your healthcare team is there to support you and respond to your concerns.

## Hydration/Nutrition

An early and frequent sign of the dying process is loss of appetite. There is often no longer a desire to eat or drink.

Nutrition given beyond that to satisfy hunger or thirst will not result in your loved one feeling better or living longer. As illness progresses, the body is unable to use the nutrients provided in food and fluids. This can result in nausea, abdominal pain and swelling.

It is important to remember that your loved one may be too weak or drowsy to swallow safely. Frequent mouth care is essential, as it provides moisture and comfort. Your healthcare team will teach you how to safely provide mouth care with a sponge or spray.

Administration of intravenous fluids (often called IV fluids) or nutrients by artificial means is found to have no comfort or survival benefit at end of life.

## Elimination

Urine output and bowel function will decrease as your loved one's 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.

The person may lose control of bladder function as the muscles begin to relax which may result in urinary incontinence or inability to urinate (retention). In this instance it may be necessary to use an incontinence brief or bladder catheter.

## **Changes in Awareness/Consciousness**

As death nears, all body systems are affected including the brain. There will be more hours of sleep than wakefulness. There may be episodes of forgetfulness, confusion, being unsettled, reaching out to unseen objects, and having vision-like experiences seeing or speaking to people not visible to you.

Your loved one may try to get out of bed, be unaware of surroundings or not recognize family or friends. You can respond to this with loving calmness, reassuring presence, soft music and minimizing loud noises or conversations. Sometimes sedating medications are required to quieten these behaviours and maintain dignity.

## **Changes in Breathing**

Normal breathing patterns will change as the dying process occurs. Breathing may be faster and irregular. In the final hours there may be long pauses lasting 20 to 60 seconds when breathing stops and starts again.

Noisy breathing or gurgling may develop. This occurs due to drowsiness/muscle weakness resulting in inability to swallow saliva. The noisy breathing is often distressing to family members but it is not a cause of discomfort for the dying person. Deep suctioning is avoided as it may cause discomfort and may worsen secretions. There are medications that can be helpful.

## Changes of the Skin

As death nears, the skin begins to change colour and the arms and legs become cooler to touch. A purplish colour occurs (mottling) indicating circulation of blood is slowing down.

A person nearing end of life is unaware of these changes and is usually comfortable. Light blankets may be used.

## Medications

As illness progresses and the focus of care is comfort, the healthcare team will likely discontinue previously taken medications (such as blood pressure and cholesterol pills) as these often provide more risk than benefit at end of life.

Medications that assure comfort and relief of suffering will be given routinely (every 4 hours/around the clock) or as needed.

The ability to swallow pills or liquid medications may be diminished, often requiring that medications be given subcutaneously (under the skin). To avoid repeated injections these medications are often given through a subcutaneous device known as a “sof-set.” If appropriate, an “infusor” may be used to administer one or several medications continuously over 24hrs.

## Children

Whether or not to bring children when visiting is a personal choice.

Children are able to sense when adults are sad or worried even if you try to hide it. Children understand and cope with dying and death differently depending on their age. For some children what is imagined may be worse than what is real.

Having conversations with your children, encouraging them to ask questions, and providing simple, honest answers will help them deal with death and loss.

## Spirituality

Bluewater Health's Spiritual Care team consists of a professionally-trained staff chaplain, many community clergy, and care providers of various faiths and traditions. Please speak to your health care team to assure your loved one's spiritual needs have been addressed.

Sarnia: (519) 464-4400, ext. 5473

Petrolia: Ask your care provider to refer to the CEEH of  
Bluewater Health Community Clergy List

## How Will I Know When Death Has Occurred

At time of death:

- There will be no response
- There will be no breathing
- There will be no pulse or heart beat
- Eyelids may be partly opened
- Eyes may be fixed in one direction
- Mouth may be partly opened, oral secretions may be present
- There may be loss of control of bowel or bladder.

## After Death Has Occurred

Spend time with your loved one and support one another. Know that your health care team is there to support you at this very difficult time.

Let staff know of any special rituals or practice around death that you would like respected. A clergy, chaplain, spiritual advisor or elder can be requested.

The nurse will document that death has occurred and will notify the physician who will complete the required legal documents.

## **Organ Donation**

Bluewater Health supports the Ontario Trillium Gift of Life Network program. Please discuss with your family the possibility of organ donation.

A staff member will speak to you about this or you may receive a telephone call from the Trillium Gift of Life Network. Know that some conditions such as cancer or recent infections mean that donation is not possible.

## **Autopsy/Coroner**

An autopsy is a post-mortem examination done to determine the cause of death or extent of disease.

A coroner is a designated physician who investigates an unexpected death or death following surgery or trauma.

Most deaths do NOT require an autopsy or involvement of a coroner. Should either one of these be appropriate, this would be discussed with you and your physician.

An autopsy will not interfere with plans for open casket viewing.

## Funeral Homes

Staff will need to know the name of the funeral home the family has chosen to inform them of your loved one's death. A list of the local and surrounding area funeral homes is provided.

**D J Robb Funeral Home** \_\_\_\_\_ (519) 336-6042  
Sarnia

**Dennings Funeral Home** \_\_\_\_\_ (519) 786-2401  
Forest

**Gilpin Funeral Home** \_\_\_\_\_ (519) 786-4964  
Forest

**Harper Funeral Home** \_\_\_\_\_ (519) 876-2218  
Watford

**Knight Funeral Home** \_\_\_\_\_ (519) 862-2845  
Corunna

**McCormack Funeral Home** \_\_\_\_\_ (519) 383-7121  
Sarnia

**McKenzie & Blundy Funeral Home** \_\_\_\_\_ (519) 344-3131  
Sarnia

**Needham-Jay Funeral Home** \_\_\_\_\_ (519) 882-0100  
Petrolia

**Smith Funeral Home** \_\_\_\_\_ (519) 542-5541  
Sarnia

**Steadman Brother Funeral Home** \_\_\_\_\_ (519) 864-1193  
Brigden

## Self-Care/Grief

Grief is a normal experience after the loss of a loved one. It is a natural part of healing and a very personal process that takes time. Be patient and allow yourself to grieve and accept the support of family and friends.

St. Joseph's Hospice offers grief support programs - the Adult Bereavement Support and the Caring Hearts Children's Program (519-337-0537).

MyGrief.ca was produced by the Canadian Virtual Hospice in collaboration with a team of families, grief experts and partners. The free online resource helps people work through their grief from the comfort of their own home, at their own pace.

**Bluewater Health**  
89 Norman Street  
Sarnia, Ontario  
N7T 6S3  
Tel: (519) 464-4400



[www.bluewaterhealth.ca](http://www.bluewaterhealth.ca)

Produced for: Palliative Care Program  
PIB2-013 2017 07