

Comfort Care: A Guide for Loved Ones

Comfort Care

When a decision is made to shift the focus of care to comfort care, the priority of the health care providers is to keep your loved one comfortable and not suffering while “nature takes its course.” Only medicines and interventions that enhance comfort are maintained or added. Dying is neither hurried nor delayed.

The need to manage pain, labored breathing and anxiety is balanced with helping your loved one to be awake enough to be able to communicate with you, if possible. Priority is always given to the patient’s wishes when considering this balance.

Most of the time, intravenous fluids are stopped. This will be discussed with the patient or family. Your loved one can no longer use the fluids properly and they can cause swelling or difficulty breathing that might increase his or her discomfort. Artificial feeding can cause diarrhea, cramping or vomiting so it, too, is usually stopped. Eating is encouraged if your loved one is able to swallow and is able to enjoy eating.

Whether to keep oxygen on or not should be decided based on what your loved one would wish. Medicine can almost always keep your loved one from feeling short of breath. Using oxygen can extend the dying process. The oxygen tubes or masks can also bother your loved one. Sometimes continuing to provide oxygen can increase a person’s comfort.

Even if your loved one cannot communicate or is in a coma, assume that they can hear you. You may speak, read, pray or play music. You can provide comfort by massaging your loved one’s hands or feet. The nurse can lower the bed siderails or remove other barriers so you can be close to your loved one.

You know your loved one best. If you notice any signs of discomfort, tell the nurse. Besides medicine, comfort may be given by massage, moving your loved one into a new position, or putting cool cloths on their forehead.

Some patients and families value the support of massage therapy, healing touch, or other integrative therapies to provide comfort in the dying process. The nurse can order this for your loved one. The nurse will turn off monitors and alarms to create a more quiet and peaceful environment.

As Death Draws Near

As your loved one nears death, their breathing may become irregular. Breaths may become faster and deeper. Your loved one may go many seconds between taking breaths. Sometimes they may stop swallowing and saliva collects in the back of the throat. When this happens breathing has a rattling sound.

These are natural responses. The nurse will give your loved one medicine to treat any signs of discomfort and/or to help dry secretions.

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Your loved one's color may become very pale or gray and dusky. As blood circulation slows, their arms and legs may become bluish in color. In the final minutes of life, your loved one's heartbeat and breathing may stop for several seconds or minutes, and then start again. The nurse or doctor will determine the time of death.

The nurse will ask you for the name of the funeral home you choose. The hospital staff will call the funeral home at the appropriate time. You will need to call the funeral home when you get home, or the next day, to schedule a time to make arrangements. Funeral directors are experienced in handling details such as death certificates.

You will also be asked if you think it would be helpful to have an autopsy performed. An autopsy can help determine the cause of death or give clarity about conditions that might affect others in your family.

Take extra care when leaving the hospital. If you are overcome with grief and do not have anyone to take you home, the social worker or nurse can help arrange for transportation.

Survival for Several Days

Sometimes, people who are receiving comfort care measures can stabilize to a point where it would be safe and appropriate to transfer to another care setting (home, skilled nursing facility or hospice home). The social worker will work with you in making plans if you are in this situation.

Your Care and Comfort

Everyone responds differently to what is happening. Know that you are able to be with your loved one as much as you need and want. (If they are in the Intensive Care Unit, there may be short periods during nursing reports that you and other family may be asked to step out of the room.) If you leave the unit, be sure to tell the health care team how to reach you.

It is easy to neglect your own needs and health during this time. It is important that you take care of yourself. Take walks, eat regularly, drink lots of water, and try to rest. If you take prescription medicine, be sure you are taking it on time and in the correct dosages. Tell the health care team if you are not feeling well.

If you would like more support, ask your nurse to page a chaplain or social worker for you.

The booklet, "As Death Draws Near," offers more information on the physical, psychological, emotional, social and spiritual aspects of dying. The booklet also offers guidance about self-care for caregivers and the needs of children when a loved one is dying.

"When A Loved One Dies" is another booklet that can be helpful. It addresses the practical matters of funeral arrangements, getting copies of the death certificate, and the legal and financial details about your loved one's estate and survivor benefits.

Your nurse can get copies of both booklets for you.