

- We want to make sure that everyone who is dying has as comfortable and peaceful death as possible. When people are dying the heart and breathing stop gradually. When that happens, giving what is called CPR (cardiopulmonary resuscitation) does not work.
- We talk about what happens when someone dies and why CPR does not work with the person who is dying (if they are able and want to do that) and we discuss this with the people close to them so that everyone knows what is happening.
- Decisions about resuscitation are shared with everyone who is caring for the person. We put this information in the person's record and tell NHS 24 about it if the person is at home.
- If your relative or friend is dying at home, the staff looking after them will talk with you about what to expect and what to do if you think the person has died.

5. Any questions or worries?

If you are unsure about what is happening or have any questions, please do ask us.

Further information

NHS Inform Palliative Care Zone
www.nhsinform.co.uk/PalliativeCare

Good Life, Good Death, Good Grief
(www.goodlifedeathgrief.org.uk/)

What happens when someone is dying?

This leaflet aims to answer some of the questions you may have about the changes that can happen when someone is close to death.

Everyone is different, but in most cases there are common signs and changes that show us a person may be close to death. Sometimes people die very quickly. Others get gradually less well over several days or even longer. A few people look as if they may be dying but their condition then improves again for a while.

Please ask the people who are looking after your relative or friend if you need more help or have any questions.

1. Less need for food and drink

- It is normal for a person who is dying to gradually feel less like eating or drinking. Some people may still enjoy small amounts of soft food and sips of drinks but can feel too tired at times. We help the person to take the food and fluids they like for as long as they want to.
- As a person who is dying gets weaker, they need help to take sips of fluid. A drinking beaker or straw can make sipping fluid easier. Moistening the person's lips and tongue with water or using an oral gel helps us keep them comfortable.

- As the process of dying continues the body does not need the same amount of fluid and usually cannot cope with extra fluids given through a drip into a vein. Occasionally we give some extra fluid through a small tube under the skin, but only if this is still helping to keep the person comfortable. Extra fluids can start to build up in the lungs as the person gets more ill and makes their breathing more difficult. If this happens, any drip or feeding being given through a tube is stopped because it is no longer helping and may cause breathing difficulties.

2. Changes in breathing

- When someone is dying their need for oxygen lessens and the way they breathe changes. People who have been breathless may feel less breathless at this time.
- As people get more unwell, their breathing may pause for a while, and then start again. They use different muscles to breathe, which means their breathing may look different. Sometimes the person takes one or two final breaths after a long pause before their breathing stops.
- Sometimes breathing can sound noisy or “rattling” because the person is no longer able to cough or clear their throat. This can sound distressing to us but is usually not upsetting for the person who is dying because they are less awake. Changing the person’s position often helps, or sometimes an injection of medicine may be given.

3. Changes in how the person looks and behaves

- When someone is dying their skin may become pale and moist. Their hands and feet can feel very cold and sometimes look bluish in colour.

- People who are dying often feel very tired and will sleep more. Even when they are awake, they may be drowsier than they have been. They will eventually not waken up at all. They may still know that people are with them and be comforted by familiar voices and touch.

4. Changes in nursing and medical care

- We keep a dying person comfortable by making sure their skin, mouth, bladder and bowels are well cared for. A special mattress or bed is sometimes used. Changes in position for comfort and pillows to support the person’s neck and limbs can help.
- We will check regularly that the person who is dying is comfortable. The people caring for your relative or friend who is dying also want to make sure that you know what is happening and feel well supported. We usually stop doing things like blood pressure, temperature or blood sugar levels which are not helpful now.
- Medicines and treatments are reviewed regularly by the doctors and nurses to make sure that we manage any symptoms well and keep the person comfortable. Sometimes medicines are given continuously under the skin using a small battery- operated pump. Extra doses of medicines can be given, if needed, for any symptoms like pain or breathlessness. If the person is dying at home, a supply of these medicines is usually kept in the house ‘just in case’ they are needed.