

#### REFERENCES

Mosenthal A and Lee K. 2002. Management of dyspnea at the end of life: relief for patients and surgeons. J Am Coll Surg (194) No 3. pp 377-385

Taylor J. 2007. The non-pharmacological management of breathlessness. End of life care. (1) No 1. pp 20-27

Bausewein C, Booth S, Gysels M & Higginson J. 2011. Non-pharmacological interventions for breathlessness in advanced stages of malignant and non-malignant diseases. Cochrane Library. Issue 3

Fact Sheets: National LCP Office, New Zealand (Working Group in alphabetical order) Angus L, Boxall J, Fowles C, Gillies F, Marshall B and Roguski A. (2012)



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## Breathlessness

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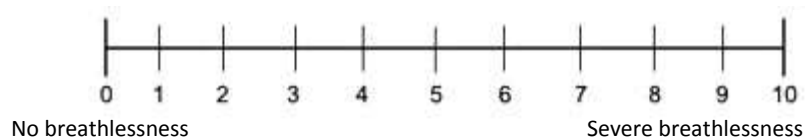
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Breathlessness can be frightening. Words patients may use to describe this sensation, such as suffocation, drowning and smothering, can add to the anxiety of the patient.

First, assess the level of breathlessness.

Remember, breathlessness is a subjective experience. Where possible, base your assessment on what the patient tells you, using a structured tool such as a visual scale like the one below. Patients can score their level of breathlessness from 1-10.



**Modified Borg Dyspnoea Scale**

0	NOTHING AT ALL
0.5	VERY, VERY SLIGHT (just noticeable)
1	VERY SLIGHT
2	SLIGHT
3	MODERATE
4	SOMEWHAT SEVERE
5	SEVERE
6	
7	VERY SEVERE
8	
9	VERY, VERY SEVERE (almost maximal)
10	MAXIMAL



### Positioning

- Have the patient sit upright or rest over a bed table.
- Use pillows to support the patient’s head and neck.  
**Avoid tri-pillows**, as patients can slip into the hollow space, and this position makes breathing more difficult.
- Support the patient’s arms to help release tension in the shoulders.

### Environment

- Make sure the room is light and well ventilated.
- Check that the patient is wearing loose clothes and can move easily in bed
- Fan air gently across the face.
- A cool damp cloth, or fine mist spray, on the face can also help.

### Relaxation/Anxiety Reduction

- If the patient consents, gentle stroking on the upper arm or a hand on the shoulder may reassure them.
- Speak calmly.
- Encourage the patient to breathe more slowly. Say, “Breathe in through the nose and out through the mouth.”
- Gently massage the patient’s hands or feet using aromatherapy oils.
- Play music the patient has chosen.

**REMEMBER – AVOID**

**HOT WATER AND HUMID ENVIRONMENTS**

**TRI PILLOWS**

**SAYING THINGS LIKE “JUST KEEP CALM”**