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## Information Pamphlet Respiratory Tract Secretions



## **The information provided in this pamphlet concentrates on assistance that family members can provide other than medication.**

### **Introduction**

This 'noisy breathing' is often heard in dying patients who are too weak to cough and are no longer able to clear airway secretions (saliva - small amounts of fluid).

Sound is created as air moves over small amount of saliva (fluid) and is described as noisy, rattling, gurgling and unpleasant. This might be referred to as the 'Death Rattle'.

It is important to understand that this is a very small amount of saliva that is resting just above the wind pipe. It may be unpleasant to hear, but it is usually not distressing to patients.

### **Definition**

The death rattle frequently occurs in dying patients, and is heard in 23% - 92% of cases. This is an indicator of impending death.

Patients most at risk of noisy respirations are those with:

- Lung cancer
- Chest infections i.e. pneumonia
- Brain tumours
- Head and neck cancers
- Lung diseases i.e. Asthma, Bronchitis
- Neuromuscular disorders i.e. Myasthenia gravis, Guillain-Barre syndrome, Motor Neuron disease

### **Nursing Assessment**

1. Consider the distress of the patient - are they restless or frowning?
2. Consider the distress of the patient's family members - they may be anxious and fear the patient is choking to death or drowning (clear explanation and reassurance is very important). Approximately half of these relatives and friends, who witness it, as well as health care providers, find the noise of Respiratory Tract Secretions distressing.

### **Management**

1. Changing the position of the patient, turn on their side, or raise the head of the bed or prop the patient up with pillows (make sure they are kept safe).
2. Distraction therapy e.g. music, television, family discussion and reminiscing (noisy breathing sounds worse if this is the only sound in the room).
3. Aromatherapy e.g. use any of the following essential oils in an Aroma Burner or Vaporiser - eucalyptus, lavender, lemon, lime, cypress, marjoram, cedarwood.
4. Regular mouth and lip cares. Wipe away any dribbling with tissues. Use mouth swabs to gently wipe any loose secretions out of the mouth if the patient allows it.
5. Oxygen is usually not needed at the end of life as breathing may be shallow, this will depend on the need of the individual person