

## The dying process

It is very common for a person approaching the end of life not to want to eat or drink. The body is beginning to shut down its systems to prepare for death and does not want or need food or fluid.

It is important to remember that it is the illness which is making the body systems fail, not a lack of fluid. The dying person does not feel hungry or thirsty – they are not starving or dehydrated.

It is important not to try and force them to eat or drink. This may make them uncomfortable.

Think about a glass of water. If the glass is already full and you keep trying to add water, it will simply spill over and make a mess. In the same way, if you add water when the body does not need it, you may cause discomfort or pain.



## Disadvantages of artificial hydration / drips

When a dying person's body cannot process any more fluid, it becomes overloaded. The person may feel uncomfortable and distressed. Their breathing may sound rattling and noisy. They may have swelling of the arms or legs and suffer nausea and vomiting.

Research shows that many people are actually more comfortable when their bodies don't have to deal with too much fluid.

### Artificial feeds.

**Nasogastric tube (NG)**  
**percutaneous endoscopic**  
**gastrostomy (PEG) radiologically**  
**inserted gastrostomy (RIG)**  
**Intravenous or subcut fluids**  
**(drip)**

If the person is receiving food or fluids through a tube, they have the right to say they want to stop.

If they are too ill to make the decision, the care team will make a careful assessment and discuss with the family. However, the ultimate responsibility for deciding to start, reducing or stopping the artificial feeding or hydration rests with the care team caring for the dying person. Ongoing careful assessments will be continued.

## Dry mouth and lips

A dying person may have a dry mouth due to the medication or because they are breathing through their mouth at this stage.

### What can you do?

If they are awake and want oral fluids it is important to sit them upright first. You can try and give them small pieces of ice to suck or sips of whatever fluid they like to keep their mouth moist. Watch for any coughing and spluttering. You can moisten their lips with a cool damp swab and apply lip balm on their lips to stop them getting dry and sore.

## Mouthcares

Good mouth care is an important comfort measure. You can use a mouth care swab (or sponge) dipped in cold water – and squeeze excess fluid out (or the person's preferred drink) to clean the mouth and keep it moist.

Saliva substitute is available but not always needed.

You might want to consider a small spray bottle with water to use as a saliva substitute.

A member of the care team will be happy to show you how to use these sponges.

### References:

- Bowen P et al (2014) Using subcutaneous fluids in end-of-life care. *Nursing Times*; 110: 40, 12-14.
- St Christophers. "n.d" *fluids* [leaflet]. St Christophers Hospice.UK
- St Christophers. "n.d" *Why won't they eat* [leaflet]. St Christophers Hospice.UK



## Why won't they eat



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Why won't they eat

**This leaflet aims to answer frequently asked questions about eating and drinking when a person is very ill and might be in their last days of life.**