

## What can cause noisy breathing?

A rattling, rasping or gurgling sound is created as air moves over a very small amount of saliva (fluid) sitting just above the patient's windpipe.

This kind of breathing is seen as a normal sign during the dying phase.

It may sound a bit frightening, but it is a sign of deep unconsciousness, not distressing to the person – they are not drowning or choking to death.



Think about someone that snores when they are sleeping – they

are not distressed about the sound, it is the people around the snoring that have a problem with the sound.



The same concept with a straw in a glass. It only makes a noise if there is a drop of fluid with air passing through the straw.

## Who is likely to have noisy breathing?

Some diseases are more at risk to have noisy, rattily breathing such as a person with a chest infection, a person that had problems with reflux or on medications for a heart condition.

However, any person in the dying phase may or may not have this breathing pattern. It is more commonly connected to the deep sleep of the person than to any disease.

## Assessment

Does the person appear to be distressed?

Are they restless?

(see pamphlet for agitation/restlessness)

Family members may be anxious and distressed by the noisy breathing.

## Management

1. If the person can tolerate it and it is safe to do so (for yourself and the person), turn the person onto one side. Or you can raise the head of the bed or prop the person up with pillows
2. Noisy breathing sounds worse if it is the only sound in the room. Create a distraction by playing some music, turning on the television, encouraging the family to chat and remembering happier times.
3. Aromatherapy – (for comfort does not remove the sound) use essential oils in an aroma burner or vaporiser. Suitable oils include eucalyptus, lavender, lemon, lime, cypress, marjoram, cedarwood.
4. Give the person regular mouth and lip care. Wipe away any dribbling with tissues. Use mouth swabs to gently wipe any loose secretions out of the mouth. Be careful not to put the swab too far on the tongue or side of mouth as you do not want to cause any vomiting.

5. Suctioning is usually **not** used as it may cause more distress for the dying person. Suctioning is only appropriate if there is a large amount of fluid in the mouth or running out the mouth and only done in the front of the mouth, not any deeper.
6. Remove excess moisture from all moist swabs before you do any mouth care.

**For more information:**



<https://www.healthnavigator.org.nz/health-a-z/p/palliative-care/care-in-the-last-few-days-of-life/>



<http://www.hospice.org.nz/>



<https://www.dyingmatters.org/page/being-someone-when-they-die>



We would like to thank Mercy Hospice for sharing their resources.

Reviewed 01.2019 CF  
Last Days of Life Care – Non-Pharmacological  
Noisy, rattling breathing



## Noisy, Rattling Breathing

*‘Ways you can help without medication’*

**Important for use alongside appropriate medication**



This pamphlet offers suggestions of support for yourself and those around you should it be needed.