

Palliative Pain and Symptom Management Consultation Program Northeastern Ontario

Changes in Breathing in Advanced Illness and at End-of-Life

THINGS YOU CAN DO AS A CAREGIVER OR LOVED ONE

- Elevating head of bed (if possible for the patient)
- An oscillating fan blowing cool air across the patient's face
- Having a calm environment can be a way to reduce anxiety felt with shortness of breath
- Pursed lip breathing can help to reduce the sense of shortness of breath. Mimic the action of smelling flowers and blowing out candles
- Oral care can reduce secretions, which can help decrease the feeling of shortness of breath.
- Open a window/doors, and remove clutter
- Loosen clothing
- Cold cloth to forehead
- Ensure no kinks in oxygen tubing if relevant

THE USE OF OXYGEN IN ADVANCED DISEASE

- There are some patients who benefit from oxygen in advanced disease and at end-of-life. If you are wondering if your loved one would benefit from oxygen, please speak to your healthcare team.
- If your loved one is using oxygen, consider the following:
 - **Do not use**-oil or petroleum based products on the skin near nose or lips.
 - Humidification may be helpful. Speak to your oxygen company for more details.
 - **No smoking** around anybody who is using oxygen therapy for any reason.
 - Monitor skin around ears for irritation from oxygen tubing.



WHAT WE KNOW

Changes in breathing patterns are very normal in advanced disease. It can be scary to families or Caregivers who are seeing these changes.

It is important to know that while YOU may see changes in your loved ones breathing, the patient themselves **may feel no distress** with these changes.

Some diseases or illnesses where it is more common for patients to complain of shortness of breath are: advanced cancer, heart failure, ALS and chronic lung disease. As a disease or illness progresses and we approach end-of life the body's awareness of breathing signals start to become diminished.

If you think your loved one is short of breath, t, do not make assumptions, ask them. If your loved one is non-verbal or has difficulty with communicating their needs look for:

- restlessness
- pulling at their shirt collar
- grimacing
- a frightened appearance
- visible muscles pulling in around collarbone, neck, or ribs
- constantly shifting oxygen tubing or oxygen mask on their face

BREATHING CHANGES AT END-OF-LIFE

- It is very common for patients to have changes in their breathing pattern at end of life. These changes may look like the following:
 - irregular breaths
 - shallow breaths
 - periods of rapid breathing followed by slow breaths or vise versa
 - long pauses (apnea) between breaths
- As a person approaches end of life they will often experience upper airway secretions that can make a "rattley" sound. This is caused by the pooling of saliva as at the back of the throat.
- Special considerations for secretions
 - Although this can sound distressing- it is often NOT distressing for the patient- they **do not** know it is happening
 - Oral care and repositioning the patient/your loved one is the best way to assist in the drainage and management of these secretions
 - Some (not all) patients may benefit from certain medications to assist with secretions. If you are curious about this please speak to a member of your health care team.