Hearing and touch
We believe hearing remains to the end so use touch and talk to them. Even if the person is unable to respond, the contact will be of great comfort to them.

Breathing
When death is approaching the breathing pattern may change. Sometimes there are long pauses between breaths or the breathing may become fast and shallow. Occasionally a rattle or ‘bubbly’ noise may develop but does not cause the person distress. This is caused by a build-up of mucous that the person is no longer able to cough up. Medication or a change of position may help. We try to avoid using suction as this can be more distressing.

If a person is breathing through their mouth, moistening the lips and tongue and applying lip salve will help.

Please remember this time is very different for every individual.

This information is meant as a guide only and the hospital staff are always available for help and support.
The dying process itself is unique to each person, but there are some common changes that may take place. Knowing about these changes may help you cope during this anxious and difficult time.

**Appetite**
As the body systems shut down, food becomes less important. There will come a time when food and drink are no longer wanted or needed. This can be distressing – however you can still offer company, support and mouth care which will be appreciated.

**Sleep**
The person may appear to ‘withdraw’ and show less interest in their surroundings. They may gradually spend more time sleeping but will eventually become unconscious. Even if the person is unresponsive, keep communicating and touching as they are still aware of your presence.

**Skin**
The skin can change in many different ways. It may become clammy or flushed, turn grey/blue in colour or become blotchy. Arms and legs can be cool to the touch and other areas may become dusky and pale.

**Circulation and blood pressure**
The pulse can appear quite strong and erratic. Pulse and blood pressure will no longer be monitored but if you have any concerns that your relative or friend may have a temperature, adjusting the bed covers may help or inform the nursing staff who can give paracetamol to relieve the temperature to make them more comfortable.

**Body systems**
If the heart is struggling to pump properly, it can result in swelling of the arms and legs or in the lungs. The urine may become darker in colour and decrease in amount. The person may also become incontinent and may need a catheter or incontinence pads to prevent their skin in that area becoming sore.

**Behaviour**
They may become confused about time, place or people when still conscious or become more restless or may pick at the bed linen.

**Eyes**
When a person is dying their eyes may stay open and seem to become glassy and stare, which could indicate death is getting near. They may appear to see something in the distance and may even reach out towards it.