

## COMFORTING CLIENTS IN END-STAGE DEMENTIA

WHAT YOU MIGHT SEE	HOW YOU CAN HELP
<p><b>DISCOMFORT</b></p> <ul style="list-style-type: none"> <li>• challenging, aggressive behaviours or changes in behaviour</li> <li>• signs of depression</li> </ul>	<ul style="list-style-type: none"> <li>• Watch carefully for signs of pain</li> <li>• Calm the environment (quiet, no glare or bright lights, no mirrors)</li> <li>• Maintain a supportive approach (calm voice and movement, speak from the front, eye contact, slowly and clearly)</li> </ul>
<p><b>MUSCULAR CHANGES</b></p> <ul style="list-style-type: none"> <li>• Muscle wasting and weakness</li> <li>• Not able to walk</li> </ul>	<ul style="list-style-type: none"> <li>• Encourage as much ambulation as possible (refer to Physio for specific recommendations)</li> <li>• Bed bound clients can get passive ROM exercises to reduce discomfort (Physio)</li> <li>• Be alert for falls</li> </ul>
<p><b>WEIGHT LOSS</b></p> <ul style="list-style-type: none"> <li>• Less interest in food and drink</li> </ul>	<ul style="list-style-type: none"> <li>• Sips of nutritious liquids (Ensure), ice chips, sweet cool foods (ice cream, smooth yogurt drinks)</li> <li>• Mouth care</li> </ul>
<p><b>PROBLEMS WITH CHEWING AND SWALLOWING</b></p> <ul style="list-style-type: none"> <li>• Food refusal</li> <li>• Coughing or choking during or after meals</li> </ul>	<ul style="list-style-type: none"> <li>• Occupational Therapist can make suggestions</li> <li>• Verbal cues to open mouth</li> <li>• Gentle massage of cheeks</li> <li>• Thicker fluids (yogurt instead of milk)</li> <li>• Use thickening agents</li> <li>• Frequent mouth care</li> </ul>
<p><b>SKIN CHANGES</b></p> <ul style="list-style-type: none"> <li>• Hands and feet become cool to the touch</li> <li>• Skin becomes grey/blue in colour, especially nail beds</li> <li>• Pressure sores</li> </ul>	<ul style="list-style-type: none"> <li>• Provide warm blankets or clothing</li> <li>• Watch for hyper sensitivity to touch (person may not want sheets touching their skin)</li> </ul>
<p><b>HEART/BLOOD FLOW CHANGES</b></p> <ul style="list-style-type: none"> <li>• May increase</li> <li>• decreases if breathing becomes difficult</li> </ul>	<ul style="list-style-type: none"> <li>• Keep comfortable</li> <li>• Keep skin clean</li> <li>• Mouth care</li> <li>• Pericare</li> </ul>

## BODY CHANGES NEAR DEATH

WHAT YOU MIGHT SEE	HOW YOU CAN HELP
<p><b>BREATHING</b></p> <ul style="list-style-type: none"> <li>• Slows: laboured; noisy; irregular; shallow, or:</li> <li>• May become more rapid</li> <li>• “rattle” in mouth area (secretions that are unable to be cleared in large airways)</li> </ul>	<ul style="list-style-type: none"> <li>• Raise head up with cushions</li> <li>• Bed rest</li> <li>• Position in sidelying</li> <li>• Gentle chest percussions (consult with Physio)</li> <li>• Create a draft of airflow</li> </ul>
<p><b>LOSS OF ENERGY</b></p> <ul style="list-style-type: none"> <li>• Less energy</li> <li>• Bed bound</li> <li>• Little response to environment</li> <li>• Drowsy, sleepy, hard to wake</li> <li>• Dependent in Self Care</li> </ul>	<ul style="list-style-type: none"> <li>• Always assume the person can hear (hearing is the last sense to decline)</li> <li>• Do not talk as if the person is not in the room</li> <li>• Touch and talk to gently and with respect</li> <li>• Help out with all ADL's as needed and wished</li> </ul>
<p><b>DIGESTION/URINATION</b></p> <ul style="list-style-type: none"> <li>• Sphincters will relax, incontinence may occur</li> <li>• May feel nauseated or vomit.</li> </ul>	<ul style="list-style-type: none"> <li>• Avoid using stool softeners or laxatives; instead suppository</li> <li>• Use incontinence pads</li> <li>• Mouth care (ice chips, sips, mouth spray)</li> </ul>
<p><b>DISORIENTATION</b></p> <ul style="list-style-type: none"> <li>• Confusion</li> <li>• Hallucinations</li> <li>• Delusions</li> </ul>	<ul style="list-style-type: none"> <li>• Reassure, reorient as needed to calm the person</li> <li>• Calm environment</li> <li>• Relaxed tone of voice</li> <li>• Give permission to let go</li> <li>• Communicate to your supervisor</li> </ul>
<p><b>RESTLESSLESS</b></p> <ul style="list-style-type: none"> <li>• Picking</li> <li>• Pulling</li> <li>• Turning</li> </ul>	<ul style="list-style-type: none"> <li>• Use gentle touch, massage</li> <li>• Reassuring tone and words</li> <li>• Music</li> </ul>

References: Henderson, Hanson, and Reynolds, 2003; Volicer, 2001. Clinics in Geriatric Medicine