Breathing Changes at the End of Life
As a caregiver, what you should know.

Your loved one’s end stage lung disease may cause them to be anxious and fearful at times. Their condition may change rapidly. Members of your Hospice of Cincinnati care team want you to know what to expect and how to respond in ways that are helpful and provide guidelines for symptom management.

Our goal is to make you and your loved one as comfortable as possible.

Please call us right away for any questions, concerns or changes in condition at 891.7700.

Respiratory Distress or Severe Shortness of Breath
Patients with terminal illnesses may experience respiratory distress or difficulty breathing that may be mild or extreme. Patients who have diseases affecting the lungs or heart are especially likely to have shortness of breath.

One of the simplest ways to relieve shortness of breath is to help the patient sit up. If you have a hospital bed, raise the head of the bed. If you don’t have a hospital bed, place a large cushion or two (from a couch or pillows) evenly under the head end of the mattress, allowing the patient to sit more upright.

When breathing becomes difficult, medications may be helpful for symptom management. Your nurse will teach you the right time and the right combination that will work best for the patient based on your specific symptoms.

Fluid Buildup in the Lungs
With some lung conditions, there is a high probability of fluid build up in the lungs. When this happens, administering certain medications to help dry the secretions may be helpful. Your nurse and physician can recommend a medication and schedule if it is appropriate for symptom management.

Congestion
Some patients may have gurgling, bubbling or rattling sounds coming from the chest or throat. This may be due to poor circulation, immobility, and an inability to cough up secretions. Though it may be hard to listen to, it’s usually not uncomfortable for the patient. Generally, suctioning is not recommended. Changing to an upright or sitting position is usually helpful.

Breathing Pattern Changes
Your loved one’s breathing pattern may change in the last days or hours of life. There may be periods, even several seconds at a time, when there is no breathing or rapid, irregular rhythms of breathing. This is a normal process at the end of life. Elevating the head may help. Hold hands, speak gently and be reassuring.

Administration of Oxygen
Oxygen is most commonly delivered by tubes in the nose, but it may be administered by a mask. When shortness of breath worsens, delivering a higher rate of oxygen is not recommended. The patient is losing their ability to move air, so delivering more air is not helpful. In the end stages of a disease such as Chronic Obstructive Pulmonary Disease (COPD) or emphysema, suddenly increasing the oxygen to a higher rate of flow may actually cause worsening distress.

Non-Medical Interventions that you can do NOW:
• Cool the room and ensure the patient has lightweight clothing and linen.
• Use a fan to blow air directly at the patient’s face, as long as tolerated.
• Open a window to provide a breeze and fresh air.
• Have the patient sit upright in bed and focus on deep breathing or slowing down their breath.
• Create a calm, quiet environment.
• Provide relaxation techniques—soothing music, massage or other relaxing touch, guided imagery or meditation.
• Provide emotional support—listening closely to what the patient is saying and provide reassurance.

To reach your nurse, please call us anytime—day or night—891-7700.