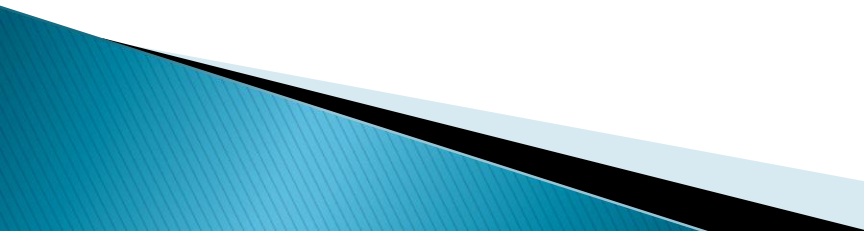


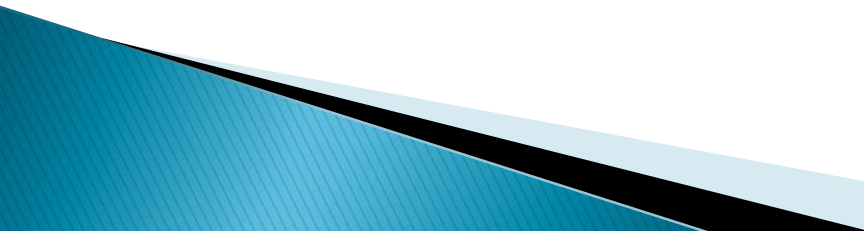
# Allowing a Natural Death – the process of dying

Corinna Edwards, Liz Fullerton & Lynn Thomas  
Macmillan Palliative Care CNS'

# Physiology of Dying

- ▶ The process of dying is generally a progressive not a simultaneous failure of vital organs
  - ▶ Death itself is not physically painful but aspects of the terminal disease / illness may be
  - ▶ In the majority of cases there are warning signs that death is approaching
  - ▶ It is important to recognise these signs if we are going to manage the last days of a person's life appropriately
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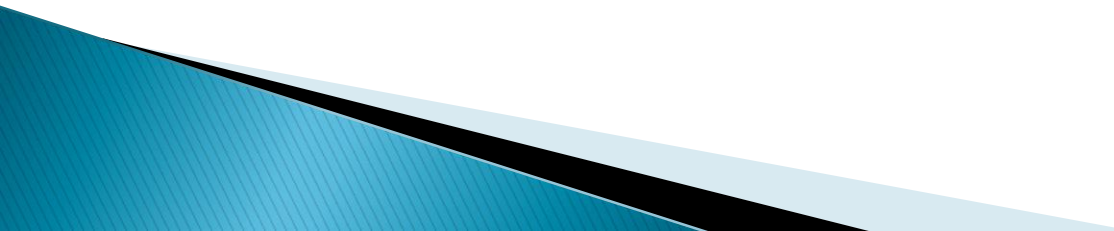
# Physiology Of Dying

- ▶ Somatic death or death of the body
  - ▶ Series of irreversible events leading to cell death
  - ▶ Causes of death varies
  - ▶ However, there are fundamental body changes leading to all deaths
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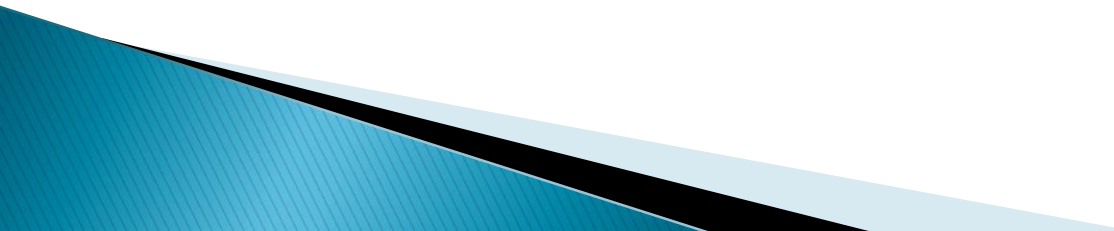
# Pulmonary system

- ▶ No longer able to oxygenate the body
- ▶ Assess respiratory pattern – Cheyne– Stokes respiration
- ▶ Noisy breathing
- ▶ Assess for poor oxygenation –
  - ▶ Pale skin, cyanotic, mottled and cool
  - ▶ In darker skin assess mucous membranes, palms of hands and soles of feet

# Cardiovascular System

- ▶ Large load on the heart when lungs fail
  - ▶ Heart itself not being oxygenated
  - ▶ Heart not strong enough to maintain circulation
  - ▶ Blood backs up causing failure
  - ▶ Leads to pulmonary failure and liver congestion
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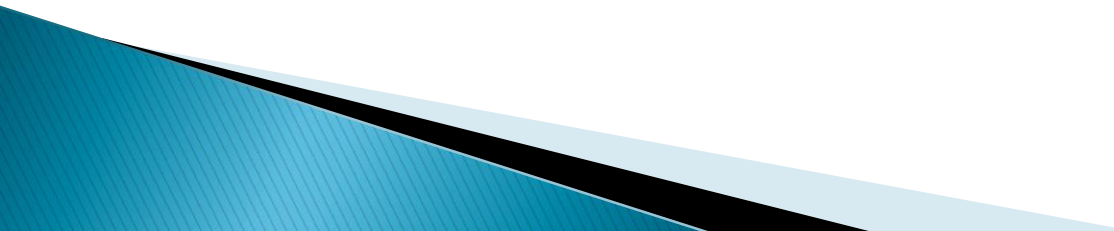
# Circulation

- ▶ Decreased as heart less able to pump
  - ▶ Pt may have 'drenching sweat' as death approaches
  - ▶ Pulse becomes weak and irregular
  - ▶ If pulse is relatively strong, death could be hours away
  - ▶ If pulse is weak and irregular, death is likely to be imminent
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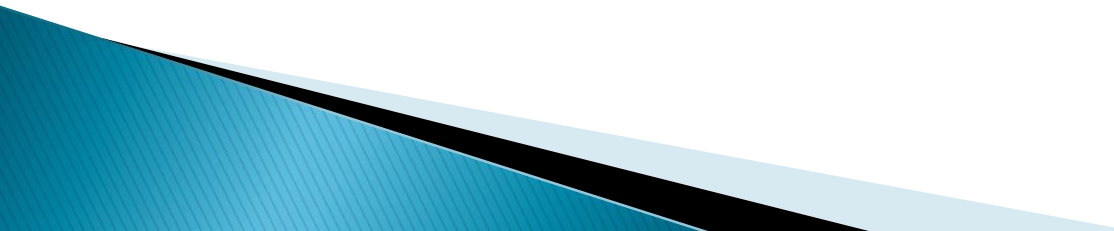
# Pulmonary & Cardiovascular

- ▶ Combination of these events leads to cell death
- ▶ Also as pulmonary and cardiovascular systems fail, other body systems begin to fail also

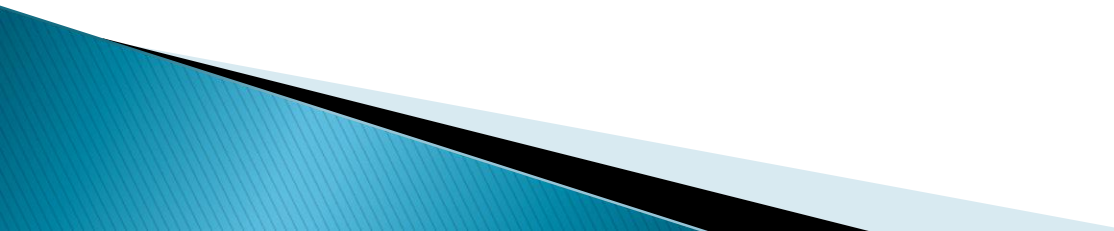
# Failing metabolism

- ▶ Metabolic rate decreases, almost stopping
  - ▶ Faeces are likely to be retained
  - ▶ Or incontinence may be present
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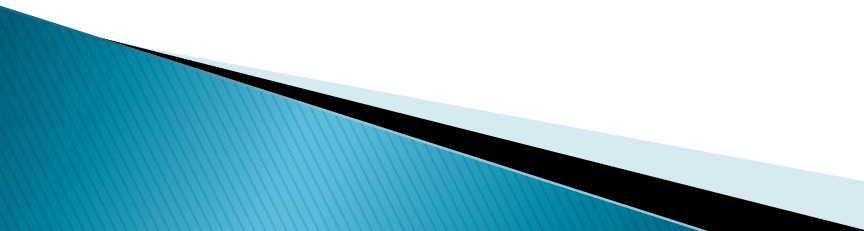
# Failing Urinary System

- ▶ Blood pressure too low for kidney filtration
  - ▶ Urinary output decreases
  - ▶ Further load on cardiovascular system due to increase circulating volume
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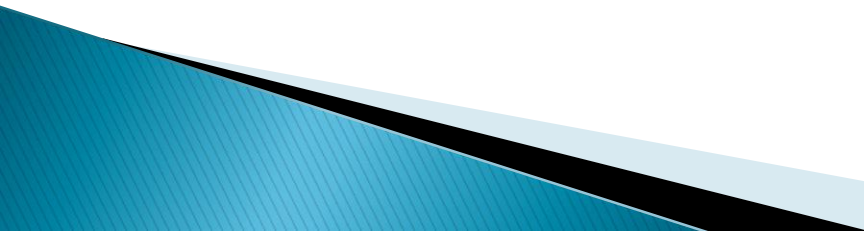
# Failing Nervous System

- ▶ Decrease in oxygen levels to the brain means decreasing brain function
  - ▶ Sensation and power reduced in limbs
  - ▶ May remain conscious but patient is more likely to be semi conscious or comatosed
- 

# Neurological changes

- ▶ Pupils might react sluggishly or not at all to light
  - ▶ May not be able to express comfort level
  - ▶ It is thought that dying patients only see what is very near and hear what is spoken very close to their ears
  - ▶ Look for non verbal clues as to comfort level – restlessness, tight muscles, facial expressions , frowns
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# Recognising Dying

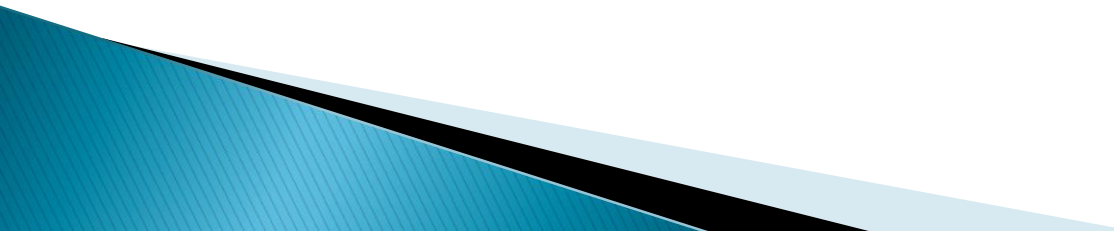
- ▶ Spending more of the day asleep rather than awake
  - ▶ No longer interested in eating
  - ▶ Drinking insufficient amounts
  - ▶ There is multidisciplinary/family agreement that further investigations and treatment is futile
  - ▶ In the opinion of the caring team the person is believed to be dying
  - ▶ It is at this point the LCP should be commenced
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- ▶ ‘I have lived in the country all my life.... and I have never anywhere seen a dead squirrel’  
(Thomas Lewis, 1974)

# Dying is a natural process

- ▶ ‘Nature must be allowed to do it’s work... we need to remove the obstacles and create the right conditions... so that in it’s own time and in it’s own way nature brings about the death’  
(Michael Kearney, 2000)

# Conclusion

- ▶ Understanding the physiology as death approaches enables us as health care professionals to explain the process of dying to relatives and carers in a meaningful way.
  - ▶ When talking with people who are dying it is not uncommon for the dying person to have an innate sense of what is happening to them. As health care professionals if we too are able to listen to patients and recognise when death is approaching this means we are best placed to ensure appropriate and timely care.
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# References

- ▶ Thomas Lewis 'Death & Dying' (1974) cited in Henderson V & Nite G (1978) **Principles and Practices of Nursing** [6<sup>th</sup> Ed] Macmillan : New York
  - ▶ Kearney M (2000) **A Place of Healing – working with suffering in living and dying** Oxford University Press : Oxford
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