



Eating and drinking at the end of life

Patient, family and carer information

Eating and Drinking at the End of Life

This information leaflet refers to the last phase of a person's life, when the focus will be on providing care that prioritises comfort and patient choice.

People lose their appetite when they are nearing the end of their life. The body follows the natural process of slowing down, such as a loss of energy, the need for more sleep and rest, and reducing appetite. The gut works more slowly, it absorbs less nutrients, and less calories are needed for energy.

This leaflet answers some frequently asked questions about eating and drinking at the end of life and introduces the concept of Taste for Pleasure, which focuses on how a person can be supported to enjoy a taste of their favourite fluid when unable to eat or drink. It also includes information about how mouthcare can be used to promote comfort, and reduce a dry mouth. If you would like more information on any of these topics, then please speak to the nurse who is looking after you.

Some frequently asked questions about eating and drinking at the end of life

- **Should we think about a feeding tube or drip?**

Feeding tubes, nutritional supplements, and drips aren't helpful and don't slow down the dying process. The body's need for food is less; how much somebody eats and drinks at this point will not change how long they live. The focus is on providing comfort. Little tastes of favourite drinks or foods may be enjoyable for some people.

- **I'm worried that the person that I am caring for may have swallowing difficulties – what should I do?**

If you notice any signs of coughing or difficulty swallowing when eating or drinking, then contact a healthcare professional for advice. This may be a GP, ward doctor or nurse who will review things and may refer to a Speech and Language therapist. Some helpful tips to support safe swallowing are:

- Ensure the person is awake and alert
- Ensure they are in a comfortable and upright position
- If they wear dentures try to ensure they fit comfortably; this may not always be possible and it may be better not to use them at all
- Avoid using spouted beakers – sipping from a spoon may be easier, or sucking from a moist soft toothbrush
- Support the person to feed themselves wherever possible. You can load the spoon or fork for them and support their hand if needed
- Smooth or pureed textures like sorbet, ice-cream, custard or soup may be easier to swallow.

- **What sorts of food might somebody enjoy if their taste or appetite has changed?**

Be guided by the person. A balanced diet is not important during this phase; let them choose if and what they would like to eat. Always be mindful of the person's religious and cultural preferences with regards to eating and drinking. The food that a person usually enjoys should be your main consideration and do not offer foods or alcohol to a person who would usually abstain from certain items or drinks due to their personal beliefs.

Small portions that don't need much chewing may be preferred, some examples include:

- Soft crisps such as Wotsits or Quavers
- Breakfast cereal such as porridge or Weetabix
- Prepared soft fruit
- Small pieces of ice or ice lollies. You can make flavoured ice cubes at home
- Mini sandwiches with soft fillings such as cream cheese or egg mayonnaise
- Drinks
- Milkshakes
- Milky coffee / hot chocolate
- Smoothies
- Squash or fizzy drinks
- Ice cream or sorbet.

These are only examples. The person you are caring for will have their own likes / dislikes and preferences.

- **What can I do to keep the mouth clean and comfortable?**

A dry mouth at the end of life occurs as less saliva is produced. Mouth breathing and medications may increase the risk of a dry mouth. This may result in talking, swallowing, eating and drinking becoming uncomfortable. Mouthcare can help prevent a dry mouth, as can the application of dry mouth gels or sprays - you may wish to discuss these with a healthcare professional.

Mouthcare

If the person is unable to swallow then the care of their mouth will be very important. Mouthcare is more than brushing teeth, it is vital that the person's lips, gums, tongue and insides of cheeks are kept clean and moist. Cleaning and cleansing the mouth helps keep the mouth moist, hydrated and comfortable.

A soft toothbrush is recommended for cleaning the teeth and cleansing the mouth.

Keeping the lips moist with lip balm (do not use petroleum-based products if using oxygen) will help prevent them from becoming sore, dry and cracked.

Small chips of ice can moisten the mouth.

- **What else can I do to provide nourishment, comfort and support?**

- ✓ Gentle massage, application of a favourite hand cream
- ✓ Talk to the person or read to them
- ✓ Listen to their favourite music with them
- ✓ Watch a film together

Even when a person cannot communicate with you, they may still gain comfort from your touch or hearing your voice.

Taste for Pleasure

In addition to mouthcare, Taste for Pleasure may be introduced. After a person's mouth has been cleaned as per their care plan, taste for pleasure involves the use of the person's favourite drink. This may be tea, lemonade, wine or a cocktail, and aims to introduce a small amount of their favourite taste.

This taste can be introduced using a tiny amount of fluid on a spoon or from a cup. If the person is unable to take it this way, then a soft toothbrush can also be dipped into the person's favourite drink and then placed in their mouth. This can be very effective to support the person to have a small taste to enjoy the flavour, rather than provide hydration.

Taste for Pleasure process

1

Ensure the mouth is clean as per individual care plan

2

Using a soft toothbrush, cup or spoon, dip this into a cup of the person's favourite drink / taste

Tap off any excess

3

Apply to the person's tongue or lips so that they can taste the flavours

4

Repeat as often as the person wishes / as appropriate

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Patient and Carer Experience Team

If you need advice or have feedback on a community hospital in Gloucestershire or on our community health and adult social care services, you can contact one of the advisors from our service experience team.

All enquiries are completely confidential.

You can contact us between 9am and 5pm, Monday to Friday.

Telephone: **0300 421 8313** (answerphone available outside office hours)

Email: **experience@ghc.nhs.uk**

Website: **www.ghc.nhs.uk/get-in-touch/give-us-views**

Write to: **Patient and Carer Experience Team**
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