

# End of Life Care

## Patients with Advanced Cancer




THE UNIVERSITY OF TEXAS

MD Anderson  
~~Cancer~~ Center

Making Cancer History®





**S**ometimes treatment cannot control advanced cancer. For some patients, the side effects of treatment or multiple organ failure causes a poor quality of life. When this happens, our care team may recommend changing the goal of the patient's care to end of life care.

MD Anderson aims to serve patients and their families with respect, dignity and integrity. If our care team recommends end of life care, this means they feel that treatment is no longer helping your loved one and death is near (expected in days or hours). They may recommend medical care that focuses on providing comfort.

In this situation, it may feel difficult to know the best choices for your loved one's care. It is normal for you to have questions and worries. Ask the care team for help and support at any time.

## **The Meaning of End of Life Care**

End of life care helps to manage the patient's anxiety, pain or distress. At this stage, the goal of care changes from active cancer treatment to comfort care. Instead of active treatment, the focus is to manage stress and pain. The patient may receive medicines that help them rest as comfortable as possible.

At this stage of care, the care team will slowly stop certain life support systems and medicines. This may include removing the mechanical ventilator or respirator, stopping kidney dialysis and stopping medicines that are used to increase blood pressure.

## **Transitioning Care**

If you decide that end of life care is right for your loved one, you can choose when to transition care. Talk with the care team about your wishes.

As part of the transition to end of life care, we recommend changing the patient's code status. Code status states what kind of treatment the patient receives if their heart or breathing stops. With end of life care, our care team will recommend changing your loved one's code status to do-not-resuscitate (DNR) status.

DNR status means the care team will not perform cardiopulmonary resuscitation (CPR) to restart the heart or lungs if they stop working.

We recommend this code status change so that your loved one may die gently, naturally and peacefully.

No one can predict exactly how long the dying process will take. Your loved one will continue to receive care day and night. The care team will do everything they can to manage pain, anxiety and distress.







## **End of Life Symptoms**

Physical changes are common when death is near. Everyone shows different symptoms, but it may be helpful to know what changes can occur. The care team will continue to provide comfort care when your loved one shows end of life symptoms. These symptoms may include:

### **Changes in Awareness**

- Drowsiness or sleepiness due to pain medicines
- Confusion with time, place or people
- Restlessness

### **Changes in Body Function**

- Sudden movement of muscles of the hands, arms, legs or face
- Droopy lips

### **Changes in Bodily Fluid**

- Dry mouth
- Secretions that build up in the mouth



## **Changes in Temperature and Circulation**

- Cold arms and legs
- Dry, damp or cold skin
- Blue or discolored skin on arms, legs, hands and feet
- Darker or paler skin color
- Fast, irregular, weak or low heart rate
- Low blood pressure

## **Changes in Breathing**

- Tight neck muscles
- Fast or slow breathing
- Noisy breathing (grunting or rattling)
- Breathing that stops for periods of up to 30 seconds

## **Changes in Elimination of Waste**

- Darker urine
- Less urine
- Loss of control of urine and stool

## **Saying Goodbye**

Visiting hours are relaxed during end of life care. People often use this time to say goodbye. Your family may want to spend time together and visit with your loved one. You may want to hold hands, talk, pray, express gratitude or just sit quietly. This is also a chance to perform religious or spiritual rituals or other activities.

## **Supportive Care Resources**

MD Anderson provides care at all life stages. End of life care includes emotional, spiritual and social support services for patients and their families.

A supportive care team is available to answer your questions and help provide comfort.

To meet with any of the following supportive care specialists, ask your bedside nurse.





## Spiritual Care

Chaplains are always available to provide spiritual support. Chaplains of different faith traditions meet with patients and families who request:

- Prayer
- Spiritual counseling and guidance
- Communion, baptism, sacrament of the sick or anointing
- Guidance with religious issues such as unresolved grief, lack of faith, loss of hope, inability to pray or abandonment by God

**713-792-7284** (available 24 hours a day)

Chapels and prayer rooms are open to anyone looking for comfort through prayer or meditation.

**Freeman-Dunn Chapel:** Main Building, Floor 1, near Elevator C

Available 24 hours a day

**Louise J. Moran Chapel:** Mays Clinic, Floor 2, near Elevator T

Hours: 6 a.m. to 11 p.m.

**Muslim Prayer Room:** Main Building, Floor 3, near Elevator E

**Musselman Meditation Room:** Main Building, Floor 2, near Elevator D

## Clinical Ethicists

Clinical ethicists give support when patients and families must make difficult choices about treatment. They can help when there is disagreement or uncertainty about the right thing to do. A clinical ethicist may help you make a choice about what is best for your loved one.

**713-792-8775** (Monday through Friday, 8 a.m. to 5 p.m.)

**713-404-2863** (weekends and after hours)

## **Social Work Counselors**

Social work counselors help patients and families cope with difficult changes during the end of life process. They are also available to assist with advance care planning documents. You may want to speak with your social work counselor about:

- Feeling overwhelmed
- Adjusting to life changes
- Talking with children about the end of life
- Managing family dynamics
- Hospice care
- Coping with death and grief
- The financial impact of cancer
- Advance care planning (including Medical Power of Attorney, Living Will and Disposition of Remains)
- Information about funeral arrangements

**713-792-6195** (Monday through Friday, 8 a.m. to 5 p.m.)

**713-792-7090** (weekends and after hours)

## **Patient Advocacy**

A patient advocate can help if you need to speak with someone about a complaint or concern. Patient advocates can help you understand patient rights and responsibilities. They can also provide information about other resources to support you and your family.

**713-792-7776** (Monday through Friday, 8 a.m. to 5 p.m.)

**713-792-7090** (weekends and after hours)



photos: istockphoto.com

Patient Education

© 2019 The University of Texas MD Anderson Cancer Center

gr | jb | 10.19 | xxx