Symptom management

COLUMBUS COMMUNITY HOSPITAL
HOME HEALTH & HOSPICE

To help keep you/your loved one comfortable, hospice has recommended starting/increasing medication(s) for pain.

Pain medications available for the patient:	**How much to give:**	**When to give more:**

Medications given for pain, especially those containing narcotics can cause other side effects while they are helping your loved one feel comfortable. These side effects often lessen over time and are not necessarily a reason to stop taking/giving the medication.

Please report to hospice any symptoms which are concerning to you or your loved one, including those below:

Constipation: This common side effect of opioids can often be lessened. An increase in fluids and/or an increase in dietary fiber (if your condition permits), can help lessen constipation. Hospice also has laxatives or stool softeners available if constipation is a problem.

Nausea and vomiting can sometimes occur in the first day or two of taking pain medication. Taking the medication with or without food, sniffing pleasant clean smells such as lemon or peppermint, or sucking on peppermint candy can help. Hospice also has anti-nausea medications available.

Sedation, drowsiness, or clouded thinking: Sometimes pain medications can cause sedation, drowsiness, or sleepiness for the first day or so or after a dose is started or increased. Some people find that they become confused, disoriented, or simply absentminded after receiving a medication for pain relief. If such effects become pronounced, please let us know, so we can offer suggestions for yours or your loved ones unique situation.

Slowed breathing: some pain medications can slow breathing, particularly at high doses. This usually goes away as the body gets used to the medication. Hospice monitors respiration and other vital signs as needed. If slowed breathing becomes uncomfortable or is otherwise troublesome, please let us know.

A hospice RN is on call and available by phone 24 hours a day, 7 days a week, even on weekends and holidays by calling 402-562-3300.

WHAT TO DO WITH RESTLESSNESS OR AGITATION

Toward the end of a person's life it is common for the person to become or feel restless or anxious. While normal, this restlessness, agitation and or anxiety can be treated and lessened. Below are a list of things you can do/check to help lessen these feelings:

- **Play favorite music, softly**
- **Give a warm bath, shower or bed bath**
- **Back rubs or hand/foot massage**
- **Read or sing**
- **Talk about pleasant events**
- **Recite prayers or poetry**
- **Look at and talk about family photos**
- **Check for pain, if pain is present and it is time for a dose of pain medication, give that dose**

Symptom management (continued)

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- **Has the patient been lying or sitting in the same position for a long time, if so repositioning them can help them be more comfortable**
- **If the patient has a urinary catheter, make sure the tubing is not bent or kinked and that urine is flowing into the bag**
- **Watch for trouble breathing, if the patient has treatments for shortness of breath or wheezing and it is time, give that treatment**
- **Has the patient had a bowel movement recently, if not, constipation may be causing restlessness**
- **If you have been instructed to use a medication for restlessness, anxiety or agitation, and it is time for a dose, give that medication**

If none of these seem to be the issue or are helping, please contact us at hospice. Hospice has medications and other treatments, including starlight therapy to help with agitation.

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MANAGING TROUBLE BREATHING NEAR THE END OF LIFE

Shortness of breath, also called dyspnea, is commonly associated with some serious illnesses. Hospice care includes proven therapies to manage difficulty breathing. Below are several ideas to help provide comfort if trouble breathing is an issue. Remember, your Hospice Team is always just a phone call away, even on weekends, nights and holidays to help you. **If these ideas below are not working please call Hospice at 402-562-3300.**

Non-medical options for trouble breathing:

- Use a fan to move air across the face. A portable fan gives patients more control over the breeze and can be a tool to self-manage their symptoms.
- Breathing slowly in through the nose and out through pursed lips, (smell the roses and blow the candles) can help
- Correcting poor posture, including sitting more upright in a chair or bed, or elevating the head of the bed can help relieve pressure on the diaphragm and lungs.
- Increasing humidity levels or lowering the room temperature sometime make breathing easier.
- Reduce irritants such as smoke, dust and pet dander.

Medications to relieve trouble breathing:

- You may have been prescribed an Inhaler or Nebulizer for shortness of breath, if you have these medications and it is time for a dose, use them.
- Your inhalers and/or nebulizers: _____
- Morphine is a safe and effective treatment for shortness of breath. It works by relieving the feeling of air hunger and reducing anxiety, allowing for easier breathing. Research shows that morphine, given in a hospice setting, can reduce air hunger and improve a patient's energy level. Labored breathing takes work. Low doses of morphine can help patients relax and catch their breath. If you been instructed on how to use morphine by the Hospice RN, giving a dose can be helpful. If this is the first time you/your loved one has needed morphine or the dose you have given is not providing relief, please contact Hospice at 402-562-3300.
- Oxygen can sometimes be helpful in relieving shortness of breath. At other times patients who feel breathless sometimes have normal oxygen levels or their disease process causes oxygen not to be helpful. Hospice team will help identify when oxygen may be helpful.

Always remember, a Hospice RN is on call & available by phone 24 hours a day, 7 days a week, even on weekends & holidays by calling 402-562-3300 to help with symptom management.