

End-of-Life Care

For Patients with Advanced Cancer



THE UNIVERSITY OF TEXAS

MD Anderson
~~Cancer~~ Center

Making Cancer History®



End-of-Life Care

Your loved one's care team may discuss end-of-life care with you. End-of-life care means the cancer treatments are no longer helping your loved one and death is expected in days or hours.

The focus of end-of-life care is to manage distress and pain. Your loved one will stop receiving treatment for their cancer and other medical issues, such as infections. They will receive medicines to help them be as comfortable as possible.

The care team will slowly stop certain life support systems and medicines. This may include removing the ventilator or respirator, or stopping kidney dialysis.

End-of-life care is provided at MD Anderson if your loved one's doctor determines they are too ill to leave the hospital to receive hospice care. It is normal for you and your loved one to have questions and worries. Ask the care team for help and support at any time.

Transitioning Care

If you or your loved one decides that end-of-life care is needed, you can choose when to transition care. Talk with your loved one's care team or a social work counselor.

The care team will recommend changing your loved one's code status to do-not-resuscitate (DNR). Code status tells the care team what kind of treatment your loved one will receive if their heart or breathing stops. DNR status means the care team will not perform cardiopulmonary resuscitation (CPR) to restart their heart or lungs.

The care team will make this code status change so that your loved one may die naturally.

No one can predict exactly how long the dying process will take. Your loved one will continue to receive care to keep them comfortable. Your loved one's 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. Your loved one's care team will continue to provide comfort care to treat pain. Your loved one may have one or more of the following end-of-life symptoms:

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 Fluids

- Dry mouth
- Fluids 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, such as grunting or rattling
- Breathing that stops for up to 30 seconds

Changes in Urine or Stool

- Darker urine
- Less urine
- Loss of control of urine and stool
- Blood in urine or stool



Saying Goodbye

Hospital visiting hours are extended 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. This is also a chance to perform religious or spiritual rituals or other activities.

MD Anderson 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.

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

Ask your loved one's nurse if you want to meet with any of the following supportive care specialists.

Spiritual Care

[MDAnderson.org/SpiritualSupport](https://www.mdanderson.org/SpiritualSupport)

713-792-7184 Monday through Friday, 8 a.m. to 5 p.m.

713-792-7090 weekends and after hours

Chaplains are available 24 hours a day to provide spiritual support. Chapels and prayer rooms are open to anyone looking for comfort through prayer or meditation. 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.

Clinical Ethicists

[MDAnderson.org/EthicsConsult](https://www.mdanderson.org/EthicsConsult)

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

713-404-2863 weekends and after hours

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

Social Work Counselors

[MDAnderson.org/SocialWork](https://www.mdanderson.org/SocialWork)

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

713-792-7090 weekends and after hours

Social work counselors help patients and families cope with the end-of-life process and discuss wishes. They are also available to assist with advance care planning. You can speak with your social work counselor about:

- Discussing end-of-life wishes
- Legacy planning
- Talking with children about the end of life
- Managing family dynamics
- Coping with death and grief
- Information about funeral arrangements

Patient Advocacy

[MDAnderson.org/PatientAdvocacy](https://www.mdanderson.org/PatientAdvocacy)

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

713-792-7090 weekends and after hours

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 your loved one and your family.

