



## **The Truth About Food and Fluids**

*Information you need to know when caring for a loved one with advanced illness*

- Food and fluids are important for energy and good health. For most of us, food is closely tied to life itself. Food is also an important part of our social system.
- For people living with a terminal illness, loss of appetite is a common response to the progression of their disease. The body no longer needs large amounts of food and the digestive system is slowing down.
- Although you would probably feel better if your loved one had a good meal, it is perfectly normal for the seriously ill person to feel very little hunger or thirst. Weight gain and increased strength from food and fluids are often unrealistic goals for the seriously ill person.
- Your loved one is less physically active as their disease progresses and requires only the amount of food that makes him/her comfortable. Talk to a dietician for food recommendations.
- Prepare whatever your loved one likes or will tolerate and do not be overly concerned with a balanced diet. Serve small portions in a comfortable, relaxed atmosphere.
- If your loved one can't tolerate solid food, offer fluids—popsicles, milkshakes, egg nog, protein supplements.
- Do not force your loved one to eat or constantly remind them of their decreased appetite. The choice to eat is your loved one's. Remember, as their disease progresses they need less nourishment.
- If your loved one enjoyed alcohol before his/her illness and can still tolerate it, then feel free to offer them a drink. If your loved one is in hospital, check with his/her nurse or doctor first.
- If nausea is a problem, talk to the doctor or nurse. Anti-nausea medication given before meals may help.
- Eventually, your loved one will no longer need nourishment for strength, to prevent weight loss or to delay death. Refusal of food and water is a natural part of the dying process. Let the dying person lead the way. Trust that your loved one is following cues from his/her body.
- Watching your loved one lose interest in eating and drinking is often hard for families because this signals the end of what normally sustains life. You may even feel angry that your loved one is "giving up", not trying to stay alive. These are normal feelings.
- As eating and drinking taper off, the body naturally becomes dehydrated. When this happens the dying person may become sleepier and may be less aware of pain or discomfort. This is a normal part of the dying

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process and there are ways to keep the person comfortable.

- Forcing food or fluids when a person doesn't want them, or can't digest them properly, may cause nausea, vomiting, choking or other problems.
- Dry mouth is an unpleasant side effect of dehydration. If your loved one can swallow, ice chips, fluids on a spoon or frozen juice bars/popsicles could satisfy thirst. Be sure the head is raised to avoid accidental choking. Even sucking on a cool, wet face cloth may help. Try lip balm or a water soluble lubricant on your loved one's lips.
- Many families wonder about intravenous (IV) fluids when their loved one doesn't appear to be getting enough fluid. Talk to your physician or nurse about this. Generally, dying people are not given IV fluids because it may not help your loved one be more comfortable or live longer. In fact, it may actually cause more problems, such as fluid overload.
- There are medications that can stimulate the appetite, but these have not been found to bring comfort or improve life expectancy. Their effects are short-lived (weeks) and there are potential side effects as with all medication.
- Tube feeding is artificial nutrition and hydration given when a person cannot eat or drink. A chemically balanced mix of nutrients or fluids is provided by either placing a tube through the nose into the stomach (nasogastric tube—NG tube) or directly into the stomach (percutaneous endoscopic gastrostomy—PEG). Unlike ordinary eating, artificial nutrition and hydration does not offer the sensory rewards, social interaction and comforts that come from the pleasure, taste and texture of food and liquids. There are also potential side effects such as infections, breathing difficulties caused by fluid overload and pneumonia caused by inhaling the “feed” into the lungs. Generally, dying people are not given artificial nutrition and hydration because it may not help your loved one be more comfortable or live longer. At a certain stage of illness, the body can't use the nutrition effectively. Talk to your physician or nurse about this.

*Reference: “Supportive Care at Home: A Guide for Terminally Ill Patients and Their Families” by Marilyn Deachman and Doris Howell; “Journey's End” by Deborah Sigrist; “Last Acts” - A national coalition to improve care and caring near the end of life.*

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