

## About St Josephs Hospice

St Joseph's Hospice provides care 24 hours a day, 7 days a week, to local people affected by life-limiting illnesses. As a registered charity, we rely on the financial support of our community to keep providing world class care, free of charge to individuals and their families.

## Contact us

St Joseph's Hospice  
Mare Street  
London  
E8 4SA

Reception: 0208 525 6000

First Contact Team: 0300 3030400

E-mail: [info@stjh.org.uk](mailto:info@stjh.org.uk)

Website: [www.stjh.org.uk](http://www.stjh.org.uk)

This leaflet is reviewed by service users

Published June 2021

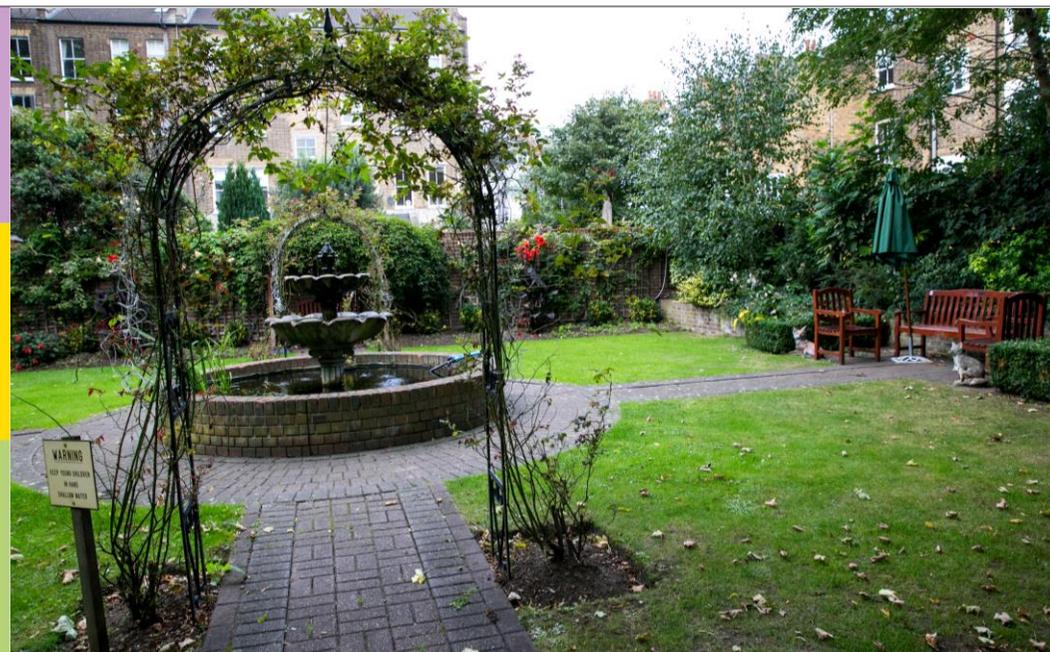
St Joseph's Hospice,  
Mare Street, Hackney,  
London E8 4SA

T: 020 8525 6000  
E: [info@stjh.org.uk](mailto:info@stjh.org.uk)  
[www.stjh.org.uk](http://www.stjh.org.uk)



St Joseph's  
Hospice

Founded in 1905 under the care of the Religious Sisters of Charity. Charity No. 1113125



St Joseph's  
Hospice

# Medicines in the last days of life

## Medication in the last days of life

Everyone is different, so it's not easy to say exactly what will happen when someone comes to the end of their life. But in the last weeks and days before death, it's common to experience certain changes. The body starts to slow down and the person may spend more time sleeping. Not wanting to eat or drink is common and can be upsetting for loved ones.

In order to reduce the worry which often comes from the unknown, this leaflet hopes to give you some more information about medicines in the last days of life.

It tries to answer the questions that you may want to ask and hopefully it will encourage you to ask for further information.

## Syringe pumps

A syringe pump is used to give a constant dose of medicines over 24 hours, to keep a person as comfortable as possible. It is often used if a person cannot take their usual medicines, or if they are needing a lot of extra medicines.

A very small needle or plastic tube is inserted just under the skin. The site where it enters the skin will be reviewed daily as it may need to be changed.

If the person is at home, the district nurse will bring the syringe pump with them. The family will need to collect any medicines from a pharmacy, which will be arranged by the GP and district nurses.

When someone is in the last days of life, sometimes the normal fluids from the chest and throat cannot be cleared. These can build up and make someone sound “chesty”. The breathing may sound noisy, but is not normally uncomfortable.

Sometimes changing position may help, but we can also use medicines to help dry up some of the secretions. Medicines called glycopyrronium or hyoscine can sometimes help, which are given by an injection under the skin.

### **Sickness and vomiting**

If a person is feeling sick, medicines can be given to help and can be given by mouth or injection. Examples of medicines which we use are haloperidol, metoclopramide and cyclizine.

When someone is approaching the end of their life, they may become sleepy and find it hard to take medicine by mouth. At this time a person’s usual medicines will be reviewed carefully.

There are some medicines which are important to keep taking. We may be able to give them by injection if they can’t be taken by mouth.

Some medicines, even ones that have been taken for years, are no longer wanted or needed in the final days of life. Stopping these can sometimes feel worrying, but this will always be talked through with you.

People may not need any medicine during their last few days, and may die peacefully and without any symptoms at all. For some people they may need extra medicine to manage their symptoms. This is explained in more detail in this leaflet.

## **Pain**

Not everyone who is dying will have pain, but for those that do, it is reassuring to know that we have many different options to manage it.

Medicines will be assessed on an individual basis. Drugs such as morphine can be useful, and may be given by mouth or by an injection underneath the skin. These medicines are never given unless they are needed and are started at the lowest dose.

## **Restlessness**

In the last days of life some people may become confused or restless. This can be difficult for any loved ones, but again there are many different things we can do. It can help to keep the environment calm and quiet, and to gently give reassurance by holding their hand and talking to them.

The doctors and nurses will also check for any other causes which might be causing any distress. Sometimes medicines are used which can help these symptoms. Examples of these are lorazepam or midazolam.

## **Breathing problems**

The breathing pattern may change as the body slows down. Sometimes it may be fast, sometimes shallow or deep, and there may be pauses in between breaths.

If there are feelings of being breathless, simple measures can be used such as changing position or using a fan. Oxygen is not commonly used as it may not be needed and can cause side effects.

Sometimes we will offer medicine to help with these symptoms. Morphine and similar drugs can be very helpful. We can also use the same drugs which are used for distress (mentioned above), as breathing problems are often made worse by anxiety.