The Royal Wolverhampton
NHS Trust

Eating, Drinking and Swallowing at the End of Life

Adult Speech and Language Therapy
Acute and Community AHPs

The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- **Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available**
- **If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice from 111**
- **Keep the environment clean and tidy**
- **Let's work together to keep infections out of our hospitals and care homes.**

Introduction

This leaflet is for adults and their families who are making decisions about eating and drinking at the end of life. It aims to provide compassionate guidance and information about the role of Speech and Language Therapists in supporting individual needs, promoting comfort, and enhancing quality of life during this sensitive time. The leaflet does describe some of the changes which can take place, related to eating, drinking and swallowing at the end of life. Every individual is different. So if you have any questions, please ask a member of the team.

What does End of Life mean?

End of Life refers to the final phase of a individual's life, when they are approaching death. During this time, healthcare workers prioritise comfort, dignity, and quality of life. This is often provided through palliative care. End-of-life care can take place in various settings, depending on the individual's needs and preferences, including at home, in a hospice, a care home, or a hospital.

What is a Speech and Language Therapist?

A Speech and Language Therapist is a healthcare professional who specialises in the assessment, diagnosis, and treatment of speech, language, communication and swallowing (dysphagia) difficulties. They work with individuals of all ages across various settings, including hospitals, care homes, community clinics. They tailor their care to each patient's needs.

What is the role of a Speech and Language Therapist in End-of-Life care?

At the end of life, Speech and Language Therapists (SLTs) provide compassionate care to help individuals with communication and swallowing difficulties. Their role includes:

- **Supporting communication:** SLTs help patients express their needs, wishes, and emotions, enabling meaningful conversations with loved ones and healthcare teams. They may introduce alternative communication methods, such as communication books and pictures to support patient decision-making

- **Supporting swallowing:** SLTs assess and manage swallowing difficulties with the goal of promoting comfort, safety, and individual well-being. They may suggest different texture diets or feeding strategies to reduce discomfort while enhancing the enjoyment of eating and drinking. If an individual finds different texture diets or thicker drinks distressing, or they express a desire to enjoy a different diet or liquid texture, SLTs work to support these choices, making sure care is person-centred and focused on quality of life

What does eating and drinking to look like at the end of life?

As an individual nears the end of life, changes in their eating and drinking habits are a natural and normal part of the dying process. These changes can be upsetting for family and carers but they do not affect how long the individual will live. Here are some common changes which may occur:

- **Reduced Appetite:** The individual may eat and/or drink less, and they may refuse food and/or drink more often. Eventually the individual may stop eating and drinking and may be unable to swallow medications
- **Support:** They may need more support from others with their eating. 'Hand over hand assistance' may be a helpful technique to trial
- **Swallowing Difficulties:** Some people may keep food and/or drinks in their mouth and begin to cough after eating and drinking. This could be due to neurological changes, weakened muscles or fatigue
- **Fatigue:** They may begin to fall asleep whilst eating and drinking. If they begin to fall asleep, stop feeding and try again later
- **Saliva:** Some people may drool more or experience thick sticky saliva
- **Dry Mouth:** Some people may experience a dry mouth due to reduced saliva production and/or medications. Some people may benefit from a saliva substitute spray or gel to reduce dry mouth – this can be discussed with your Doctor, Speech and Language Therapist or Palliative Care team

- **Nausea:** Some people may experience nausea which could reduce their appetite. If this symptom occurs, please discuss with your Doctor or Palliative Care team
- **Medical Interventions:** Using a feeding tube or a drip (for fluids) is generally not appropriate for patients at the end of life. Your Doctor and Palliative Care teams will be able to advise on this

How can I help?

Helping an individual with eating and drinking at the end of life involves prioritising their comfort and respecting their needs and wishes. Here are some ways to help:

- **Follow their lead:** Offer food and drink regularly and provide it if they ask. Turning their head away, biting the spoon or clamping their lips closed, can be signs that they do not want to eat and/or drink
- **Prioritise comfort over quantity:** Forcing someone to eat and/or drink can cause discomfort. Instead, offer small sips of their favourite drinks or small mouthfuls of their favourite foods if they want it. This is sometimes referred to as 'Tastes for Pleasure'
- **Provide thorough oral care:** Use a soft-bristled, small headed toothbrush and toothpaste to gently clean teeth, gums, cheeks, tongue and palate. Lip balm can also be used to moisturise lips
- **Be flexible:** an individual may experience a change in preferences, they may request specific flavours or foods of a softer texture
- **Alertness:** Ensure the individual is fully alert when being offered food and/or drink
- **Positioning:** Ensure the individual is sat fully upright when being offered food and/or drink
- **Seek guidance:** If you are unsure how to best help

Other useful materials:

Marie Curie – Eating and Drinking less at the end of life

NHS Changes in the last hours and days of life

British Geriatrics Society – End of Life Care in Frailty: Dysphagia

End of Life Care in Frailty: Dysphagia | British Geriatrics Society

Royal College of Speech and Language Therapists – supporting a good end of life

Supporting-a-good-end-of-life-factsheet.pdf

How do I get in touch?

Speech and Language Therapy Service
The Gem Centre
Neachells Lane
Wednesfield
Wolverhampton
WV11 3PG

Telephone: 01902 444363

Monday – Friday 8:30-16:30

Email: rwh-tr.Speech-And-Language@nhs.net

English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

Traditional Chinese

如果您需要以其他方式了解信息，如易读或其他语种，请告诉我们。

如果您需要口译人员或帮助，请告诉我们。

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