

# *Eating and drinking at the end of life*

For families and carers



*because  
you matter*

**St Nicholas  
Hospice Care**

A Registered Charity No. 287773

**For an alternative format or  
language, please contact;  
enquiries@stnh.org.uk**

## Later stages of Palliative Care

When someone is in the last few weeks of their life, they may experience decreased appetite and loss of interest in food and drink. This can be worrying for their family and carers but is a natural and expected part of the dying process.

The focus when eating and drinking should be for enjoyment and comfort rather than nutritional intake.

People who are alert enough should be offered:

- small sips or teaspoons of thin/normal fluids;
- food and drink options as chosen by patient (their favourite foods);
- puree/smooth foods may be easier to swallow e.g., yoghurt, custards, blended favourite meals.

## Changes to eating and drinking during the last few weeks of life:

- changes to smell and taste;
- nausea;
- loss of appetite and loss of interest in food and drink;
- fatigue;
- sore or dry mouth;
- being able to swallow may deteriorate when reaching end of life;
- people may struggle to swallow food, drink or even their saliva - signs of this may be coughing, throat clearing or experiencing a wet and gurgly vocal quality when swallowing;
- in some cases, there may be an element of risk when swallowing (food and drink going into the lungs), however this should be balanced with eating and drinking for quality-of-life purposes (the enjoyment food and drink);
- it may be appropriate for a Speech & Language Therapist to support with swallowing difficulties - speak to a member of your hospice team if you would like to discuss this further.

## Top tips:



- Ensure the person is sitting as upright as possible when eating and drinking. If in bed, raise the bed head and use pillows to support.



- Ensure the person is awake and responsive.



- Don't overload spoons with food - try a teaspoon.



- Try using a short straw or non return valve straw.



- Stay with the person when they are eating and offer assistance as required e.g., giving them hand over hand assistance to support them to eat and drink.





- Allow the person time to swallow – wait until they have swallowed before offering more food.



- If the person does not want to eat and drink, leave it for now and offer again later.



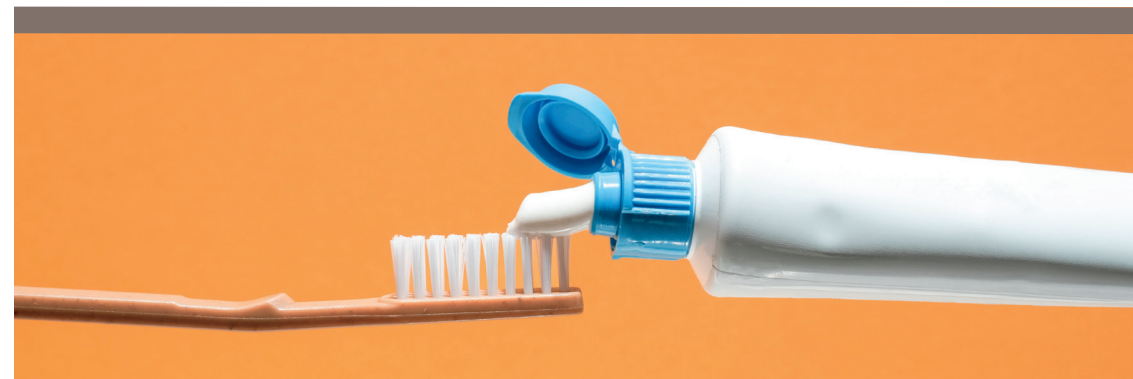
- Some people may prefer sweeter foods and it is okay to order puddings for meals.



- If the person is coughing or in distress, stop and try again later unless they are requesting more.

## Oral hygiene:

- good mouth care can help with comfort, cleanliness and dignity, especially when people are eating and drinking less towards the end of their life;
- it can also help to improve a dry mouth and relieve any potential feelings of thirst;
- mouth care involves continuing to brush teeth/tongue in order to keep the mouth clean and moist;
- use a small toothbrush and a small amount of non-foaming toothpaste;
- there are also dry mouth products such as gels and sprays;
- sugar free sweets or gums;
- some family members/carers may wish to be involved in giving mouth care – speak to a member of your hospice team if you would like to discuss mouth care/dry mouth products further.



# Hospice **Advice line**

Call our 24/7 advice line for healthcare professionals and families if you need support with symptom management and end-of-life care.

**enquiries@stnh.org.uk**  
**www.stnicholashospice.org.uk**

**01284 766133**

## Your Experience **Survey**

We want to develop our services in response to feedback; please consider filling out our survey which is available online or can be requested in paper form.

**www.stnicholashospice.org.uk**  
**/your-experience-survey**



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