



Quality of Life & Eating for Comfort

Eating and drinking is something that can bring joy and pleasure. With illness, eating and drinking can be physically difficult or unsafe. This brochure answers questions about eating and drinking for comfort.

**We hope that the following information will help you decide if
‘eating for comfort’ is the right choice for your loved one.**

What is eating for comfort?

People with dementia or other end-stage diseases will eat and drink less as their disease progresses. They will likely not feel hungry or thirsty. They may not even recognize food and drinks. They may also have difficulty swallowing.

Eating for comfort focuses on eating for enjoyment when a person is not able to eat or drink enough to sustain life.

The goal of eating for comfort is to:

- Eating favourite foods and drinks for enjoyment, adding to quality of life
- Eat and drink in a safe and satisfying way
- Foster a positive and caring interaction
- Spend time with another person, and
- Being consistent with expressed wishes

Staff will help the person eat or drink when they are interested. How much food the person eats or drinks is not important at this time. As part of this approach, food and fluids are only provided by mouth. This means no tube feeding, intravenous (IV) fluids or providing fluids with a needle under the skin.

Giving IV fluids may not be helpful to the patient and maybe uncomfortable. Some of the side effects of giving IV fluids can include:



- Extra fluid in the lungs, which may make it difficult to breathe. This can also lead to coughing, choking, and result in the need for suctioning, which can be uncomfortable



- Swelling of the arms and legs as extra fluid that the body is unable to use can collect under the skin, which can be uncomfortable



- Skin irritation, breakdown or infection may happen around the IV site, causing discomfort



- The IV tubing can limit the person's ability to move around
- Re-insertion of the IV, and/or blood work for monitoring may be needed, which can be painful

If we don't give IV fluids, will my loved one be dehydrated?



Dehydration may be a result, but it does not cause discomfort. IV fluids do not relieve thirst. However, having a very dry mouth is uncomfortable. Good mouth and lip care can allow for a more comfortable experience for your loved one when they can't eat or drink.



Lip moisturizers and frequent mouth care will keep the mouth moist, clean, and comfortable. Vaseline or lip balm will help with moisturizing lips to prevent dryness

What about water and ice chips?



Giving water and ice chips can help with dry mouth and promote comfort. There is little risk of choking on small amounts of water. It is important to make sure their mouth is clean.

Will they be hungry or thirsty? What will they be eating/drinking?

Older adults and people with dementia may eat and drink less. They may not feel as much hunger and thirst. When they feel hungry or thirsty, they may be satisfied with only small amounts of food and drinks.

Once eating for comfort is chosen as the best option for your loved one, you and the interprofessional team will decide the best food and drink options based on:

- Personal preferences, which may include nutritional supplements
- Swallowing ability and safety
- How awake your loved one is, and
- Removal of some food restrictions can be considered to allow for enjoyment

What are the risks of eating for comfort?

Your loved one may be at an increased risk of choking, or having fluid and/or food particles enter the airway. This may lead to congestion, discomfort, or even pneumonia. Dehydration may also occur, but symptoms such as dry mouth and lips can be managed with good mouth care and small sips of fluid.

What are the other treatment options?

If eating for comfort is not the approach you think your loved one would choose, please speak with your unit physician to explore other treatment options.

What are some tips for helping my loved one eat?

Staff will assist your loved one in eating as long as it does not cause distress. The following are some general guidelines for safe mealtime assistance, but please consult with your healthcare team for specifics related to your loved one:

Safe



Unsafe

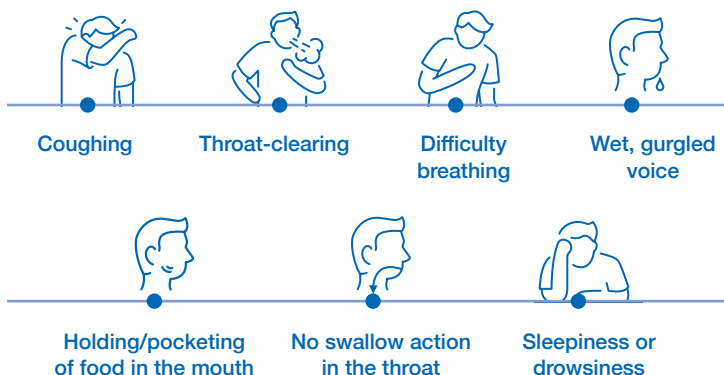


Figure 1: Safe and unsafe positioning when eating or drinking

When assisting with eating:

- Offer food and drinks only when the person is alert, and upright, as close to 90 degrees as they can tolerate
- The line of their jaw should be pointing downwards, not straight out, and not up (Figure 1)
- Intake should only occur if their mouth is clean, and free of debris
- Follow these steps:
 - Offer 1 teaspoon (tsp) or small sip per swallow
 - Watch for the swallow (the complete rise and fall of the Adam's apple)
 - Ensure the mouth is clear before giving more

Watch for:



If you see any of the above, please take a break from assisting with eating and let the nurse know.

What if they stop being able to swallow?

If your loved one stops being able to swallow, then food and drink will not be given. When eating is no longer safe, staff will continue to support and interact with your loved one.

Other ways to make someone comfortable

- Keeping the mouth and lips moist and clean
- Controlling pain with medication
- Providing oxygen or medication for shortness of breath
- Offering spiritual and emotional support
- Music and conversation

What if they improve?

The team will pay close attention to how your loved one is doing. If your loved one gets better, the approach to eating can be changed. The team is available to speak with you about other options.

I have more questions. Who can I talk to?

Open communication with your loved ones' healthcare team is always encouraged. You may wish to speak with the chaplain, dietitian, doctor, nurse, social worker, or speech-language pathologist.

**This booklet has been updated for the
Sunnybrook Veterans Centre**

Susan Deering, MD, FCFP

Physician Division Lead, Division of Long Term Care

Zubeen Dharshi, MScSLP, CCC-SLP, RegCASLPO

Speech-Language Pathologist, General Medicine

Annie Hoang, MEd, RD

Professional and Education Leader, Clinical Nutrition

Karen Johansen, RN, MN, CHPCN(C)

Advanced Practice Nurse, Palliative Care

Amanda Woo, MscPT, MScHA

Manager Rehabilitation Services, Veterans Centre

With input from the Veterans Centre Family Advisory
Council, Clinical Dietitians, Speech-Language Pathologists
and Advanced Practice Nurses of the Veterans Centre

Sunnybrook Health Sciences Centre is located on the treaty territory of the Mississaugas of the Credit First Nation and ancestral and traditional lands of the Anishinaabe, Haudenosaunee, Ojibway/Chippewa and Huron-Wendat Nations. Today it is still home to many First Nations, Inuit, Métis and urban Indigenous people from across Turtle Island and we are grateful to have the opportunity to work in the community, on this territory.

Sunnybrook Health Sciences Centre
Veterans Centre
2075 Bayview Avenue
Toronto, Ontario M4N 3M5
Telephone: 416.480.6100

sunnybrook.ca/veterans

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