

Agitation at the End of Life

Recognising and Responding from a nursing perspective

What is Palliative Agitation?

- Anxious, restless or unsettled behaviour in the last few days of life.
- Can be accompanied by impaired cognition and altered consciousness.
- Agitation can be a symptom of delirium but you can see this agitation without delirium.

Signs of Palliative Agitation

- Distressed behaviour
- Confusion
- Cognitive changes

Signs of Palliative Agitation

- Facial cues

- Fidgeting

Potential CAUSES of Terminal Agitation

- Urinary retention or constipation
- Uncontrolled pain
- Anxiety, anguish, spiritual distress
- Organ failure
- Infection
- Febrile episodes
- Dehydration
- Hypoxia (low oxygen)
- Medications that effect the Central Nervous System – especially
 - Opioids, benzodiazepines, antidepressants, corticosteroids

How to help – Without medications

- Early referral to social work
- Don't dismiss the signs as 'behaviours'
- Reorientate patient if able to
- Provide reassurance
- Divert attention
- Reduce stimuli in room
- Address spiritual needs

How to help – Without medications

- Mouth care and eye care
- Repositioning
- Check for areas of pressure and any redness or sores
- Minimise noise and glaring lights

How to help – Clinical Interventions

Assess and treat reversible causes

- Urinary retention
- Constipation
- Shortness of breath
- Hypoxia
- Pain

Pain assessment

- Pain assessment in the terminal phase is often underestimated which can result in under treatment.
- Signs of pain in a person that can't tell you they have pain (non verbal cues of pain) may include:

How to help – Clinical Interventions

After non-pharmacological interventions have been explored, use of medications may be appropriate – **if the resident has pain or shortness of breath, it is never appropriate to provide sedation only.**

Examples of common medications

- Agitation/Anxiety
- Pain
- Shortness of breath
- Nausea and Vomiting

Palliative agitation trouble shooting

- The process of working out what is causing the palliative care agitation can be difficult.
- Ensure holistic assessments are attended to (pain, constipation, urinary retention, comfort, nausea, febrile, family/existential distress).
- Reassure and explain what is happening to family
- Stay calm.