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End of Life Nutritional Care

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Cultures around the world approached death in different ways. For many cultures Death was actually a person, someone who would carry the person into the afterlife. In most cultures, death was the beginning of a new life. As such in cultures like Ancient Egypt, the body would be embalmed and preserved for this purpose. In the Mesopotamian civilization as in Egypt, treasures would be buried along with the dead for them to spend in their afterlife. The concept of heaven and hell were present in all great existing religions of the world.

Today, things are different. Science has separated us from spirituality. We live in a world driven by hard evidence. And as there is no evidence of existence beyond the body, when someone is about to die, they experience feelings of shock, sadness and frustration initially. How do we get around this? How do we ensure that over time this can be replaced by a feeling of acceptance? While the spiritual few may have already reached that mental state of acceptance where they are at peace with themselves, with what is about to happen, how do we get others on board? By convincing them that the best thing to do, at that point in life, is to actually live the life that is remaining.

We must start with the body. The body will of course fight to the last dying breath because it was designed for survival. It has evolved over millions of years to become the body that supports every living person today. As the body continues to fight, diminishing day after day in strength and immunity, it is absolutely crucial to get support. And what better support for the body than what it has been provided all life long, food and water! When administering end of life care, nothing is as crucial as providing the right nutrition and hydration. Let's face the hard facts first. As the illness continues, the gut will slow down and metabolism will no longer be what it was. This means that the appetite will no longer be what it used to be!

True it is, as a doctor I believe that we eat to live, and not live to eat. If a person is to die, however, and is slowly experiencing a loss of appetite, I think it is not just any more to force the person to eat. I think as doctors we must accept the fact that the person is about to die and allow the person access to foods that he/she likes provided those are soft foods and do not detrimentally affect the health of the patient. Thus, providing the foods that the patient loved to eat previously might also bring back the enjoyment of eating lost due to the illness and the mental burden of death.

To counteract the lack of appetite, provide foods and water at regular intervals, food in small scoops and water in short sips to ensure that the person does not suffer from hunger or dehydration. But also make these the times that the patient feels most comfortable having food so that you can counteract the effect of a poor appetite. If there were any dietary restrictions imposed earlier and if the doctor approves that it is okay that they be relaxed given the context of the patient, then they must be. Nutritional supplements are of great help and might improve quality of life during such a time and must be considered, with due consultation from the GP/Palliative care physician.

Bring the smiles back! Move the patient to a dining room, where they interact with family or friends and smile and laugh while they have food. Remember that this used to be an activity they enjoyed during their life and would probably continue to do even during their last days. Always have help ready to manage discomfort, pain or nausea. Last but not least, about letting the patient die with dignity, I think they should be if they chose to. Also, if there is some scope of spiritual training, whatever the religion the patient belongs to, that would help as well. Spend the time well, take a whole day to plan the months or days ahead, but follow your heart.

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