



DEATH AND DYING

**Emotional and Physiologic
Elements of Death and Dying**



EMOTIONAL TRANSITIONS AT LIFE'S END

Although there are many theories about the emotional transitions encountered by dying people, the best known is.



ELISABETH KUBLER-ROSS



- Landmark work entitled *On Death and Dying*
- Identified five emotional stages experienced by dying individuals



FIVE EMOTIONAL STAGES

- **Denial - or “no not me”**
- **Anger - or “why me?”**
- **Bargaining - or “Yes, but. . .”**
- **Depression - or “It’s me!”**
- **Acceptance - or “It’s part of life.
I have to get my life in order.”**



DEATH CAN INVOLVE FEARS THAT ARE PHYSICAL, SOCIAL, AND EMOTIONAL

- **PHYSICAL** - Helplessness, dependence, loss of physical faculties, mutilation, pain
- **SOCIAL** - Separation from family, leaving behind unfinished business
- **EMOTIONAL** - Being unprepared for death and what happens after death



INTERVENTIONS FOR FEARS

- **Talk as needed**
- **Avoid superficial answers, i.e. “It’s God’s will**
- **Provide religious support as appropriate**
- **Stay with the patient as needed**
- **Work with families to strengthen and support**



PHYSIOLOGY OF DYING

- **Somatic death or death of the body**
- **Series of irreversible events leading to cell death**
- **Causes of death varies**
- **However, there are basic body changes leading to all deaths**



THESE BASIC BODY CHANGES RESULT IN THE DEATH OF ALL VITAL BODY SYSTEMS



- **PULMONARY:**
- **Unable to oxygenate the body**
- **Assess for poor oxygenation-skin pale, cyanotic, mottled, cool**
- **in dark skinned - assess mucous membranes, palms of hands, soles of feet**



CARDIOVASCULAR



- **Large load on heart when lungs fail**
- **Heart not getting needed oxygen**
- **Pumping heart not strong enough to circulate blood**
- **Blood backs up causing failure**
- **Leads to pulmonary and liver congestion**



BLOOD CIRCULATION

- **Decreased, as heart less able to pump**
- **May have a “drenching sweat” as death approaches**
- **Pulse becomes weak and irregular**
- **If pulse relatively strong, death is hours away**
- **If pulse is weak and irregular, death is imminent**



COMBINATION OF THESE EVENTS LEADS TO CELL DEATH, AND DEATH OF THE ORGANISM (HUMAN)

**As pulmonary and cardiovascular
systems fail, other body systems
begin to fail, also**



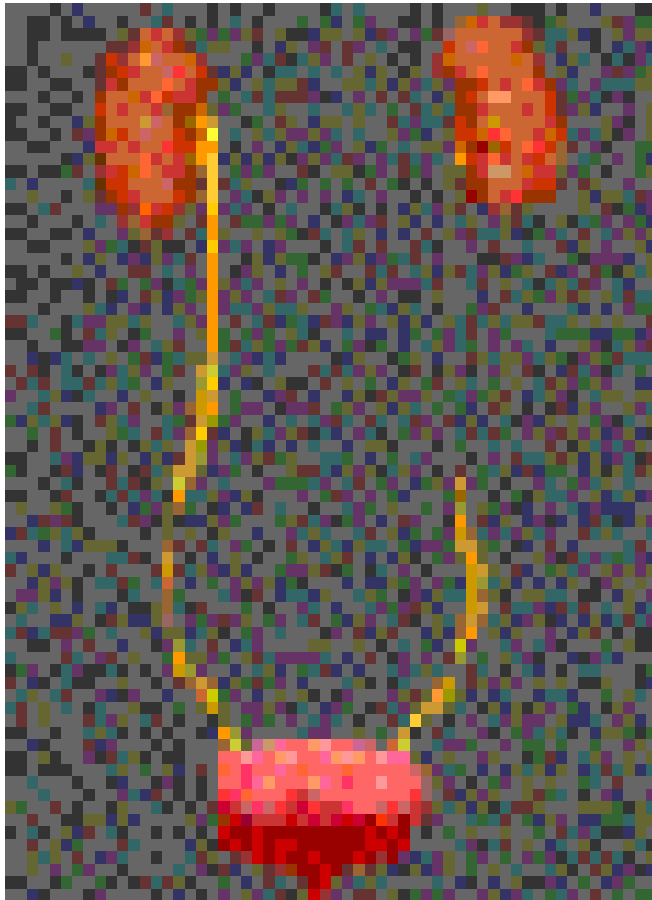
FAILING METABOLISM



- **Metabolic rate decreases, almost stopping**
- **Feces might be retained or incontinence might be present**



FAILING URINARY SYSTEM

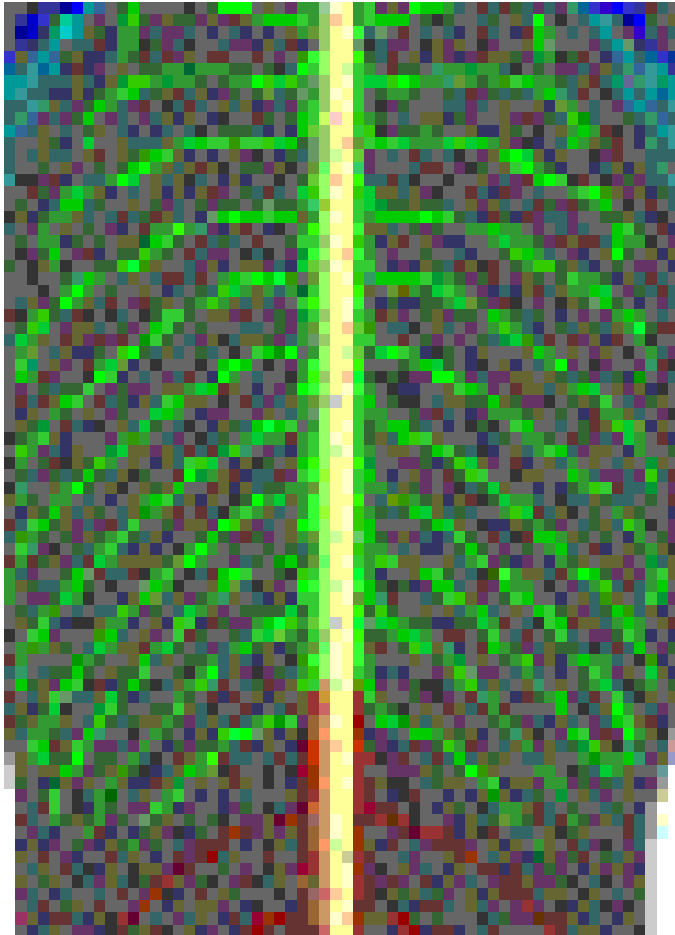


- **Urinary output decreases**
- **Blood pressure too low for kidney filtration**
- **Further load on cardiovascular system due to increase circulating volume**



FAILING NERVOUS SYSTEM

- Decrease oxygen to the brain, means decreasing brain function
- Sensation and power lost in legs, first, then arms
- May remain conscious, semi-conscious, or comatose





SPECIFIC SENSORY DECLINE

- **Dying person turns toward light - sees only what is near**
- **Can only hear what is distinctly spoken**
- **Touch is diminished - response to pressure last to leave**
- **Dying person might turn toward or speak to someone not visible to anyone else**
- **Eyes may remain open even if unconscious**
- **Person might rally just before dying**



FURTHER NEUROLOGIC DECLINE AT DEATH

- **Pupils might react sluggishly or not at all to light**
- **Pain might be significant**
- **Assess for pain if person unable to talk: restlessness, tight muscles, facial expressions, frowns**
- **Provide pain medication as needed**



NEVER LOSE SIGHT...

- **Death is the end, as we know it, for that person**
- **We can only support, listen therapeutically, and**
- **Make the person as physically comfortable as possible**
- **We can also use our knowledge and expertise to strengthen, support, and prepare the family**