# **Continuous palliative sedation**



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There are times when suffering at the end of life can no longer be relieved by the palliative care already in place. In these cases, continuous sedation may be offered. Learn more about this care and the role family members can play.

### What is continuous sedation?

It consists of giving medication to a person at the end of life to ease their suffering that has become severe. To achieve this, these drugs put the person to sleep until they die. The person is then in an unconscious state.

Continuous sedation is part of palliative care.



### Who can receive this care?

The use of this treatment is regulated by law. It can be used when all the following conditions are met:

- quality palliative care is already being provided and is appropriate for the patient
- despite this quality care, the patient has symptoms that they (or their family) and the care team consider to be intolerable
- the patient is at the very end of life, with an estimated life expectancy of a few hours or a few days (less than 2 weeks)

## When is this care offered?

It's offered only as a last resort, when other palliative care is no longer sufficient and this is the only way to provide comfort and wellbeing at the end of life.

# How is the decision made to start continuous sedation?

This is an important decision that needs to be discussed with the health care team.

The patient must be informed of:

- the expected course of the disease
- the estimated remaining time of life, and thus the expected duration of the sedation
- the effect of continuous sedation, that is, being put to sleep and becoming unconscious until death
- the fact that once this care is started, it is maintained until death

A meeting with family members is advisable to discuss other options and the progress of the disease. The family should ideally be comfortable with the decision and the care plan.

The patient will have to give their consent. This can be done orally or in writing, if the patient is capable. If not, a representative can do it for them.



# What happens when the patient can't give consent?

This can happen, for example, if the patient is confused. In this case, the patient may still receive continuous sedation if:

- a family member or a trustee (a person chosen by the patient to represent them) gives consent on the patient's behalf
- the patient is alone, and the physician or the specialized nurse practitioner makes the decision to begin this care for their wellbeing in the last moments of life



The ideal is to know in advance the wishes of the person receiving end-of-life support. In other words, to know what care they would like to receive or not receive. There are different ways of communicating these wishes: discussing them with family members and loved ones, discussing them with the care team, or stating them in a mandate of protection in case of incapacity, for example.

# How is continuous sedation done?

The medical team continues to care for and monitor the patient on a regular basis. They watch for any discomfort by looking at the patient's facial expressions, for example, and how the patient reacts. As needed, medication will be adjusted.

#### MEDICATIONS

- > The patient is given sedative medication(s) until death. These medications render the patient unconscious.
- > Any pain medication (analgesics) already being given is continued.

### COMFORT CARE

- > Bodily care is continued, such as changing the position in bed, personal hygiene, and mouth care.
- > A tube (urinary catheter) may be installed to avoid discomfort related to the inability to urinate.

The care team remains available to support loved ones as best as possible during the last moments of life.

### What is the role of loved ones?

Family members are encouraged to be present. If they wish, they can even participate in some of the care, such as that done to relieve dry mouth. In the home, they may have to administer medications on a regular basis.

They can also provide feedback on their loved one's comfort to the doctor and the nurses.

It can be difficult to see a loved one in this condition without being able to interact with them. A calm and reassuring presence, gentle words, and a delicate and attentive touch are important, both for the patient and for their loved ones. Even if the person can't speak, it is believed that they can hear and feel touch.



# Where can continuous sedation be provided?

It can be provided at home by a home care team. It's also available in hospitals, long-term care facilities, and hospices.

# Who can I contact if I have questions?

Feel free to discuss your questions with your loved one's doctor or nurse.



#### **USEFUL RESOURCES**

Health fact sheets:

Palliative care

Consent for care

The final moments of life

End-of-life care:

To learn more about the Act Respecting End-of-Life Care (requirements, rights) or about palliative care in general:

> quebec.ca/en

Click on Health -> Health system and services -> End-of-Life Care

Other health sheets published by the CHUM are available. Ask for those that might fit your situation.



You can also find them on our website chumontreal.qc.ca/fiches-sante

The content of this document in no way replaces the recommendations and diagnoses made, or the treatment suggested by your health professional.

To find out more about the Centre hospitalier de l'Université de Montréal **chumontreal.qc.ca** 

