

Changes in Elimination During the Dying Process



Constipation/Diarrhea

Changes in bowel patterns may occur during the dying process. The body slows down its natural functioning, and bowel patterns are often affected by this slowing. Constipation continues to be treated with laxatives and other treatments in the plan of care. Even though the patient may not be eating, he/she will still produce waste materials. Constipation and fecal impactions can be very uncomfortable. In addition, diarrhea can result in skin irritation and ulceration. Meticulous perineal care is important at all times, even more so when the patient is bed bound.

Incontinence

The patient may lose control of the bowel and bladder as muscles begin to relax in the sphincters. Care needs increase when a patient becomes incontinent of stool and urine. Not only is good perineal care necessary, but incontinence can cause psychological distress for the patient and family. Often patients describe loss of control of bowel and bladder function as one of the most difficult, undignified times.

Many family members feel that caring for a loved one with incontinence is beyond their abilities and/or an invasion of the patient's privacy. It may be difficult for a daughter to undertake perineal care for her father who was always a "private" person. Hospice professionals take into account these psychosocial issues when educating the family about incontinent care. As hospice team members, we accept family members "where they are". If they have difficulty with perineal care, hospice professionals may need to increase home health aide/certified nurse aide visits, find caregivers who can assist with this care, and creatively care plan to solve this problem. While indwelling catheters are used as a last resort, they may provide a great deal of comfort to the patient and family who have difficulty physically and psychosocially meeting this care need.