

Eating and Drinking for Quality of Life and Comfort

Eating and drinking for quality of life, also called comfort feeding, means eating and drinking so long as it feels comfortable and is enjoyable. This handout is for people near the end of life where the goals of care are to provide comfort and improve quality of life.



Eating and drinking for quality of life may mean:

- Eating and drinking foods that bring comfort and enjoyment, even if there are some risks to your health.
- Choosing not to have modified foods or drinks suggested by your speech pathologist or doctor (for example, pureed foods).

Swallowing problems towards the end of life

People near the end of life may have trouble eating and drinking, which can affect their quality of life. They might have swallowing problems (known as dysphagia) because of:

- Weak swallowing muscles
- Feeling drowsy
- A dry mouth
- Shortness of breath.

Swallowing problems can be distressing and might cause coughing, gagging, choking, or eating and drinking less. Swallowing problems can also cause serious complications, such as chest infections.

Carers might worry that the person is hungry or thirsty if they can't swallow well. However, many people near the end of life do not feel hungry or thirsty. Those who do may only need small amounts of food and drink. Eating and drinking should focus on comfort, enjoyment, social interaction and improving quality of life.

Considerations for eating and drinking:

- **Artificial nutrition and hydration:** Tube feeding may not extend life or improve quality of life near the end of life. It can also cause more discomfort (Del Rio et al., 2012).
- **Oral cares:** Regular oral care is important for maintaining comfort and hygiene. Use wet swabs, ice chips, artificial saliva, or sips of cold drinks to help with a dry mouth. Apply lip balm to keep lips moisturised. Brush teeth with a soft toothbrush and rinse the mouth with a mild alcohol-free mouthwash or sodium bicarbonate solution.



Tips for comfortable eating and drinking:

If the person is awake, still eating and drinking a little or asking for food and drink these tips may help:

- Always make sure the person is in the best position for eating and drinking (for example, sitting upright).
- Offer food and drink slowly. Check they have finished each mouthful before giving more. Small amounts throughout the day work best.
- Don't make the person eat or drink if they are too tired. Instead, complete mouth cares to keep their mouth moist.
- Stop helping the person to eat and drink if they are upset, not enjoying the meal, or if they cough a lot or choke. Take a break and try again later if appropriate.
- Changing the texture of food or drink may help swallowing. For example, choosing thicker or pureed textured foods. Talk to a speech pathologist for ideas.
- Other: _____
- _____

Other ways to give care and support:

There are other ways to show love and care besides food and drinks. Here are some ideas:

- Listening to music
- Light massage and touch
- Sharing memories
- Introducing favourite smells.

Who to contact with questions

If you have further questions, please talk with your speech pathologist or healthcare team.

Your Speech Pathologist is: _____ Phone: _____



References: Del Rio et al. (2012) Hydration and nutrition at the end of life: a systematic review. *Psycho-Oncology* 21: 913-921.

Disclaimer: The information contained in this fact sheet is general in nature and nothing contained in this fact sheet is intended to be used as a substitute for your own health professional's advice. If you have any questions about eating and drinking with acknowledged risk, please discuss this with your speech pathologist or healthcare team.

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