

Tips for Nurses: Respiratory secretions



What it is: The inability to clear secretions from the upper respiratory tract results in the presence of pooled respiratory secretions. Air flow through the secretions when breathing can result in noisy respiration (rattling).

Why it matters: Noisy breathing is one of the most common terminal phase symptoms in people who are dying. 'Death rattle' is a strong predictor of death.

Problems related to respiratory secretions can be caused by infection or aspiration, or by pooling of normal oropharyngeal secretions in a patient who is weak or unable to swallow or cough effectively or who has a reduced state of consciousness. Pulmonary oedema also causes increased respiratory secretions.

What I need to know: There is currently no evidence to show that medications for treating respiratory secretions at the end of life are effective.

There is no evidence that noisy breathing distresses the person experiencing this. However, noisy breathing can be distressing to carers and family and therefore it may be necessary to initiate treatment based on individual needs.

Counselling of relatives and caregivers is important. Not all people find the symptom distressing but for those that do this needs to be considered.

Antimuscarinic agents such as hyoscine or glycopyrrolate can be used to reduce the salivary secretions. These agents inhibit salivary secretions more than bronchial secretions. Currently no particular medication is recommended.

Actions

Noisy breathing due to respiratory secretions may be referred to as 'death rattle' or 'rattling'.

If the older person has noisy breathing, repositioning them from side-to-side in a semi-upright position may help. A physiotherapist can help manage symptoms associated with respiratory secretions, including education for careworkers and the family.

Suctioning of the oropharynx is sometimes recommended, but its effectiveness has not been established and it may cause distress.

If medications are prescribed, monitor for side effects including:

- delirium / agitation
- sedation
- dry mouth
- urinary retention
- palpitations.

Counsel family and carers to ensure they understand what is happening.

Continue to provide frequent mouth care.

Name: _____

My reflections:

Does 'death rattle' worry the older person?

Does my organisation provide any material for family and friends to help them better understand what 'death rattle' is?

My notes:

See related palliAGED Practice
Tip Sheets:
Oral care
Signs of imminent death

For references and the latest version of all the Tip Sheets visit

www.palliaged.com.au

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