

## Agitation and restlessness can be distressing for the person as well as carers.

Do not confuse deathbed visions - when the person is seeing a relative or friend from the past that you may not see – these visions are normally peaceful and do not cause any distress to the person. It might be scary for the carers.

Before we can relieve this symptom, we need to understand what may cause this.

### Possible causes of agitation and restlessness

#### Physical

- Unrelieved pain symptoms – this may be unrelated to the current diagnosis.
- Full bladder
- Full bowel
- Uncomfortable bed
- Nicotine, alcohol or other withdrawal symptoms
- Rash or itch
- Unfamiliar environment

#### Psychological discomfort

Feelings such as:

- Hopelessness
- Helplessness
- Anger
- Guilt
- Fear
- Spiritual discomfort
- Unfinished business
- Hallucinations (visions)

#### Do any of the following apply?

1. Person does not know what to do with themselves “something not quite right”
2. Involuntary movement, such as twitching or jerking
3. Purposeful movement, such as fidgeting, fumbling or plucking.

#### How to treat or remove possible causes of agitation or restlessness

1. Change the person's position if they can tolerate this. It may be beneficial to massage joints or do some gentle passive movements before you change position. Ensure you have help to avoid hurting yourself or the person.

2. Check when the person last passed urine
3. Check when the person last opened their bowels, even if they have not been eating, this still needs to be addressed. If they have not had a bowel motion and are NOT restless it does not cause a problem.
4. Make sure the person is safe. Someone might need to just sit next to them and try distraction. Try reading, singing, massage or something the person enjoyed while they were well.
5. Reduce the stimulation in the environment. Preventing irritating sounds such as phones, vacuum cleaner or noise from a disturbing TV show.
6. Use familiar voices, pictures and belongings if this is appropriate.
7. Play gentle music that the person enjoys. This can relieve stress and anxiety and give a sense of well-being.
8. Gentle stroking/massage if this is something the person would agree to.
9. Aromatherapy – use the aromatherapy oils that the person likes

10. If the agitation is due to nicotine withdrawal, discuss this with the care staff as the person may need to use nicotine patches.
11. Consider the body core temperature, if the person is too hot, they may become restless. Cold hands, feet, nose and ears do not reflect the true body temperature. If appropriate feel the chest or back between the shoulders. Remove extra blankets and consider opening windows or the use of a fan.
12. Likewise, if the persons body temperature is too cold, they may become restless. The use of light fleece blanket may be needed. Do not use heavy bedding/blankets.
13. Spiritual support, religious guidance if appropriate for the person, family or carer.

**For more information:**



<https://www.healthnavigator.org.nz/health-a-z/p/palliative-care/care-in-the-last-few-days-of-life/>



<http://www.hospice.org.nz/>



<https://www.dyingmatters.org/page/being-someone-when-they-die>



We would like to thank Mercy Hospice for sharing their resources.

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Last Days of Life Care – Non-Pharmacological  
Agitation / Restlessness



## Agitation Restlessness

*‘Ways you can help without medication’*

**Important for use alongside appropriate medication**



This pamphlet offers suggestions of support for yourself and those around you should it be needed.