

**Symptom Management Handbook**  
**for Palliative Patients and their caregivers**



# SYMPTOM MANAGEMENT

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## Pain

You may experience a variety of sensations that you might describe as pain or discomfort. Pain usually begins at the physical level but is affected by your thoughts and emotions. We recommend you talk to your Family Physician about the specific causes of your pain. It is important to remember that pain can be controlled in a variety of ways and your Care Team will devise a plan to help relieve your discomfort.

### You May Notice:

- ❑ Your discomfort comes and goes.
- ❑ Certain things make it worse and certain things relieve it.
- ❑ Your pain varies in intensity (e.g. mild, moderate, severe).
- ❑ Your activity level decreases.
- ❑ Your ability to sleep is affected so you don't get adequate rest.
- ❑ You don't feel like visiting with family and friends.
- ❑ You feel irritable or agitated.

### Comfort Measures:

- Take pain medication on a regular basis. ***A constant source of discomfort requires a constant source of relief.***
- A warm blanket can soothe cramping pain.
- Find a new position to relieve the discomfort of stiffness.
- Gentle massage of your hands, feet or back may be soothing.
- Activities that provide diversion may help distract you from you pain.
  - Watch television.
  - Listen to music.
  - Have someone read to you (stories, prayers, poetry, etc.).
  - Listen to a relaxation tape.
  - Practice a visualization exercise.

**Other Measures:**

It is important for you to tell others what you notice about your pain, so that treatment can be adapted to your special needs.

*If you are unable to take your pain medications regularly or find they are not providing the relief they once did, please contact your Home Care Nurse or Family Physician or advice.*

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## Nausea and Vomiting

These are common problems in a progressive disease. There are several possible causes for nausea and vomiting, e.g. irritation or pressure on part of the digestive system. These symptoms may also arise as a side effect from medications required for pain. We recommend you discuss the specific cause of your nausea and vomiting with your Family Physician.

### You May Notice:

- ❑ You feel sick and are unable to eat.
- ❑ You vomit occasionally or frequently.
- ❑ You are unable to keep down oral medications.
- ❑ You are comfortable to rest but feel ill or become nauseated with any movement.

### Comfort Measures

- Adjust your diet according to the severity of your nausea and vomiting. For example, very small amounts of clear fluids are best for severe vomiting. Seek advice regarding your particular situation from you Home Care Nurse or Family Physician.
- Take prescribed anti-nausea medications regularly every four hours. It can often help to take these medications 30 minutes before any other medications.
- While you are feeling nauseated, it may be necessary to take medications in a way other than by mouth. Your Home Care Nurse may suggest suppositories or injections while you are feeling sick. It is important to maintain your medications to ensure your comfort through this temporary situation.
- Freshen your mouth thoroughly after vomiting with a mild mouthwash or toothpaste. Stomach contents can be very irritating to the lining of the mouth.
- If you vomit, have the basin removed and cleaned promptly.

### Other Measures

If you are unable to tolerate oral medications, it is important that you contact your Home Care Nurse or Family Physician.

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## Poor Appetite

You may notice you no longer desire the same amount or type of food you once did. As you become less active, your body will naturally not want or need as much food. It is important to remember that this is a normal and expected change. Do not force yourself to eat as this is likely to make you feel uncomfortable.

### You May Notice:

- ❑ You eat very little.
- ❑ You feel nauseated if presented with large portions of food.
- ❑ You do not wish solids and find that liquids are filling and satisfying.
- ❑ You are losing weight.

### Comfort Measures:

- Take nourishing snacks; e.g., egnogs, soups, ice-cream. Ensure recipe is on page 17.
- Keep meals small and light. Take favourite foods which are soft and easy to eat.
- Ask a family member or find to sit with you while you eat, if you are unable to be with the rest of your family at mealtime.
- Make sure you are in a comfortable position before starting to eat.
- If nausea is a problem, tell your Home Care Nurse or Family Physician so appropriate medication can be ordered.
- Keep your mouth fresh and clean.
- If your dentures have become loose, get them relined or try Polygrip.
- If your lack of desire for food is upsetting to family members, ask your Home Care Nurse or Family Physician to discuss this with them.

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## Constipation

Constipation is a common problem. It can be caused by progress in the disease, changes in your diet and decreased activity. Also, if you need to take narcotics to control pain, this will slow the movement of the bowel.

It is important not to cut back on pain medications if you are constipated. There are bowel medications which can be given to counteract the slowing effect of the narcotics.

### You May Notice:

- ❑ You have bowel movements less regularly and sometimes not for several days at a time.
- ❑ Your stool is constipated and you need to strain to have a bowel movement.

### Comfort Measures:

- Take bowel medications as advised by your Home Care Nurse or Family Physician.
- If nausea is not a problem, take fruit juices, fluids of all kinds and natural laxative foods.
- If you have no bowel movement for 3 days it is important to tell your Home Care Nurse or Family physician so your bowel medications can be adjusted. There may be times when you need a suppository or a small enema.

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## Dry, Sore Mouth

Your mouth may become dry and sore if you are unable to drink your usual amounts of fluids. This may happen if you have nausea, vomiting or a lack of appetite. The reduced amount of body fluid will also dry up saliva. A dry mouth can also be aggravated if you tend to breathe through your mouth.

### You May Notice:

- ❑ Your mouth feels dry and uncomfortable.
- ❑ Your tongue is red and coated.
- ❑ Your lips are dry and cracked.
- ❑ You have a bad taste in your mouth.

### Comfort Measures:

- Clean your mouth frequently, especially after eating.
- Check commercial mouthwashes before you use them, as many contain alcohol which makes the dryness worse. Sometimes rinsing with other solutions may be helpful.  
  
Other suggestions:
  - Combination of 4 cups water, 1 teaspoon salt, 1 teaspoon baking soda
  - Diluted brandy or favourite alcohol
  - Ginger ale
  - Combination of 1/3 water, 1/3 hydrogen peroxide, 1/3 mouthwash
- If you have dentures, remove them and brush twice a day.
- After cleansing your mouth, put a water soluble lubricant such as Muco or K-Y Jelly on your lips.
- Take small amounts of fluids as often as possible. Sips of water or dilute juices are best if nausea and vomiting are a problem.
- Suck on ice chips, popsicles or fresh pineapple chunks.
- Add small amounts of lemon juice to ice water or crushed ice to stimulate saliva.

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## Thrush Infection

Thrush in the mouth sometimes occurs due to a lowered body resistance to infection.

### You May Notice:

- ❑ Patches of white curds on tongue or inside of cheeks.
- ❑ You have a sore throat or a burning sensation in upper chest.
- ❑ You have difficulty swallowing.
- ❑ Your tongue is swollen and reddened.

### Comfort Measures:

- Use a medication called Mycostatin which is very effective in decreasing the white patches and soreness associated with thrush. Your Family Doctor can prescribe this medication for you.
- Clean your mouth after eating with a very dilute mouthwash or plain water to reduce any stinging.
- Gently remove white patches when they begin to loosen, using a soft toothbrush.
- If you have dentures, soak them overnight in full-strength Listerine. Rinse before putting in your mouth.

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## Shortness of Breath

Problems with breathing can be due to physical changes caused by progression of your disease. We recommend you talk with your Family Physician about the specific cause of your shortness of breath.

### You may Notice:

- ❑ You become breathless when you move around, get dressed or if you try to carry on a conversation.
- ❑ You have difficulty breathing even when you are resting.
- ❑ Your breathing sounds congested.
- ❑ You sometimes cough up mucus.
- ❑ You feel the need to cough up mucus and find you are unable to.
- ❑ You feel anxious or frightened if you are unable to breathe normally.

### Comfort Measures:

- If your shortness of breath is worse when you move, try to plan frequent rest periods between your activities.
- If conversation makes you feel breathless, try reducing visiting times or ask family members and friends to just sit quietly with you so you do not feel the need to talk.
- If your Family Physician has prescribed any medication for shortness of breath, take it as directed.
- You might find a humidifier helpful in loosening mucus so you can cough more easily.
- Get as much fresh air as possible by opening a window or by using a fan flowing directly at your face.
- Remove any clothing or bedding that makes you feel tight or constricted.
- Change your position if possible. Usually a high sitting position is best. This can be done by putting several pillows behind your back.
- You might find a recliner chair useful for sleeping as it keeps you in a semi-upright position.
- Ask a family member or friend to remain with you if you feel anxious.
- Try to keep as relaxed as possible; tensing of your muscles will add to our feeling of breathlessness.

**Other Measures:**

If prescribed medication and comfort measures do not relieve your breathlessness, please call your Home Care Nurse of our Family Physician.

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## Skin Breakdown

Sore areas or breaks in the skin can occur if you have lost weight and are in bed for long periods of time.

### You May Notice:

- ❑ You have red, sore skin at pressure areas such as your tailbone, elbows, etc. or in skin folds.
- ❑ You have itchy skin.
- ❑ You have rashes or broken areas that are moist.

### Comfort Measures:

- Change your position frequently, approximately every 4 hours.
- Lift your body across the sheet rather than sliding.
- Use small pillows or padding such as rolled-up towels to keep skin surfaces from rubbing together and to keep skin from constant contact with the bedding.
- Have extra padding put on your bed. Foam mattresses, sheepskin pads and other special mattresses (Spenco) are available.
- A full bath is not required daily as frequent washing can dry the skin. Keep skin folds and creases clean and dry.
- Use lotions or oils in the bath to help dry or itchy skin.
- Tell your Home Care Nurse if you notice any reddened or open areas. There are protective dressings that can be applied to sensitive skin or pressure areas to reduce irritation and make you more comfortable.

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