



## Tips for Careworkers: Dyspnoea

**What it is:** Dyspnoea is when a person has trouble breathing or has shortness of breath.

**Why it matters:** Breathing difficulties are a common and distressing symptom in many advanced life-limiting diseases, and can cause significant disability, anxiety, and social isolation. Careworkers can help the older person by reporting signs of dyspnoea and keeping them calm and comfortable.

**What I need to know:** Breathing concerns:

- reduce quality of life
- affect emotional, spiritual and physical wellbeing
- are made worse by fear and panic.

Treatment often requires a combination of measures. This includes medication and other forms of care.

People with dyspnoea get tired quickly and people who tire easily often complain of dyspnoea.

Dyspnoea in palliative care and at the end of life needs to be assessed by nursing staff.

### Do

General care of dyspnoea:

- leave time between care and activities
- calm and reassure the person by being with them
- alert nursing/supervisory staff if breathing remains difficult.

### Do

Non-pharmacological ways to relieve dyspnoea at end-of-life:

- optimise air flow around the person  
e.g., table or handheld fan, open window if appropriate
- breathing-control techniques  
e.g., pretend to blow out a candle
- relaxation exercises
- position the person in:
  - supported upright sitting
  - leaning on a supportive table
  - lying in a reclining chair or electric bed with a backrest and a knee break.

### Do

Get all equipment and staff ready prior to commencing care procedures. This will shorten the time taken for care and reduce the impact on the person.

**Name:**

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## My reflections:

What is the clinical term for difficulty with breathing?

What can I do to help a person having difficulty with breathing at the end of life?

## My notes:

See related palliAGED Practice  
Tip Sheets:  
Anxiety  
Opioid Analgesics

References used to develop this sheet are available at  
[www.palliaged.com.au](http://www.palliaged.com.au)