



## Comfort care measures in the ICU



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Transitioning from Curative to



Comfort Care

## Objectives

- 1. List quantitative symptom assessment scales appropriate for communicative and non-communicative patients.
- 2. Recognize non-pharmacologic interventions for symptom management in the dying patient.

## Potential symptoms that may encounter in the critically ill dying patient

- Dyspnea
- Anxiety
- Confusion
- Delirium
- Agitation
- Pain

## Quantitative symptom assessment scales

- Behavioral Pain Scale
- Critical-Care Pain Observation Tool
- Faces Pain Scale
- Edmonton Symptom Assessment System
- Memorial Symptom Assessment Scale

## Behavioral Pain Scale

**Table 4. The Behavioural Pain Scale.**

Sub-scale	Description	Score
	Relaxed	1
Facial expression	Partially tightened	2
	Fully tightened	3
	Grimacing	4
Upper limbs	No movement	1
	Partially bent	2
	Fully bent with finger flexion	3
	Permanently retracted	4
Compliance with ventilation	Tolerating movement	1
	Coughing but tolerating ventilation for most of the time	2
	Fighting ventilation	3
	Unable to control ventilation	4

Albright, S. and McKeown, S. (2007) Unrecognized and untreated pain in ICU—Causes, effects, and how to do better. *Open Journal of Nursing*, 1, 268-29. doi: 10.4236/ojn.2007.12024


### Critical Care Pain Observation Tool

**Table 8. The Critical Care Pain Observation Tool.**

Sub-scale	Description	Score
Facial expressions	Relaxed, neutral	0
	Tense	1
	Grimacing	2
Body movements	Absence of movements	0
	Protection	1
	Restlessness	2
Muscle tension	Relaxed	0
	Tense, rigid	1
	Very tense or rigid	2
Compliance with ventilation	Tolerating ventilator or mask sound	0
	Coughing but tolerating	1
	Fighting ventilator	2
Vocalization (unintubated patients)	Talking in normal tone or no sound	0
	Sighing, moaning	1
	Crying out, sobbing	2

Admission, S and M Kubicek. S (2013) Unintubated patients and pain in ICU—Causes, effects and how to do better. Open Journal of Nursing, 3, 68-84. doi: 10.4236/ojn.2013.31004

### Faces Pain Scale (FPS)



The scale goes from left to right and signifies increasing amount of pain.

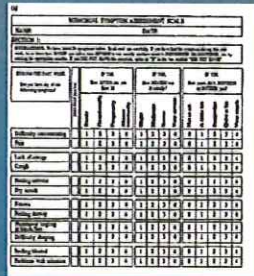
http://www.grieterpain.org/Content/Assets/meds/Infect/Document/FPS\_scaled.pdf

### Edmonton Symptom Assessment System, (ESAS)

- 10 visual analog scales
  - Pain
  - Dyspnea
  - Depression
  - Anxiety
  - Drowsiness
  - Appetite
  - Sensation of well-being
  - Sleep
  - Fatigue
  - Nausea
- Please circle the number that best describes:
  - No pain 0 1 2 3 4 5 6 7 8 9 10 Worst possible pain
  - Not tired 0 1 2 3 4 5 6 7 8 9 10 Worst possible tiredness
  - Not nauseated 0 1 2 3 4 5 6 7 8 9 10 Worst possible nausea
  - Not depressed 0 1 2 3 4 5 6 7 8 9 10 Worst possible depression
  - Not anxious 0 1 2 3 4 5 6 7 8 9 10 Worst possible anxiety
  - Not drowsy 0 1 2 3 4 5 6 7 8 9 10 Worst possible drowsiness
  - Best appetite 0 1 2 3 4 5 6 7 8 9 10 Worst possible appetite
  - Best feeling of well-being 0 1 2 3 4 5 6 7 8 9 10 Worst possible feeling of well-being
  - No shortness of breath 0 1 2 3 4 5 6 7 8 9 10 Worst possible shortness of breath
  - Other problem 0 1 2 3 4 5 6 7 8 9 10

### Memorial Symptom Assessment Scale

- Assess 32 physical and psychological symptoms
- Global symptom distress
- Psychological symptom distress
- Physical symptom distress



### Non-pharmacologic interventions for symptom management in the dying patient

- Behavioral interventions
  - Relaxation Techniques
  - Breathing Exercises
  - Address psychosocial distress
  - Create calm environment

### Relaxation Techniques

- Helpful for management of dyspnea, agitation, anxiety
- Music therapy

### Breathing Exercises

- Helpful for management of dyspnea, agitation, anxiety



### Address psychosocial distress

- Helpful for management of dyspnea, agitation, anxiety
- Address social issues
- Address spiritual distress

### Create calm environment

- Helpful for management of anxiety, agitation, dyspnea, delirium and confusion
- Decrease noise, lights, alarms and monitors sounds.
- Familiar faces, help to keep patient calm
- Reduce room temperature, maintain humidity
- Use a fan gently blowing across face

What are non-pharmacologic measures for symptom management that can be utilized for care of the a dying patient?

- A. Reduce environmental stimuli and noise
- B. Adhere to spiritual or religious traditions
- C. Provide adequate pain control
- D. Both A and B

"How people die remains in the memories of those who live on"

Dame Cicely Saunders