Artificial Hydration Decision Aid



What is artificial hydration?

Artificial hydration is a medical treatment that gives water and sometimes salt for the body. This is done when a person is not able to drink enough on their own or when they have problems swallowing.

How is artificial hydration given?

It is given as a liquid through tubes such as:

- An **IV tube** (intravenous tube) under the skin.
- An NG tube (nasogastric tube) put through the nose into the stomach.
- A PEG tube (percutaneous endoscopic gastrostomy tube) or G tube (gastric tube) placed during surgery into the stomach or small intestine.



When they cannot drink normally by mouth. The problem may be short-term (temporary) or long-term (permanent).

Reasons for short-term artificial hydration may include:

- Serious illness, surgery, or a severe injury.
- Brief loss of alertness or awareness.
- To cope with special treatments like radiation.

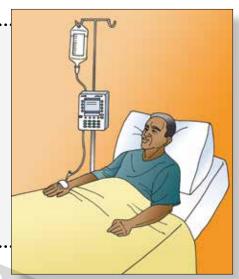
Reasons for long-term use may include:

- Loss of the ability to swallow normally due to illness, stroke, or injury.
- Brain injury with a loss of alertness or awareness.
- Inability to drink enough fluid by mouth.

Who should use this guide?

This decision aid is for people with serious illness.

It can be used to support medical decision-making and conversations about **artificial hydration**.



How might artificial hydration help a person?

- It supports the body's organs.
- It can help people to live longer.
- It can help people to feel better, have more energy, and be more alert.
- It supports blood pressure.
- It can help people to get through treatment, go through surgery, and recover faster.



How might artificial hydration cause harm?

- A few people will have leaking around the tube.
- A few will have skin infections.
- A few will have bleeding around the tube.
- Some people may have swelling in the body.
- Fluid may leak into the lungs which can cause shortness of breath.

Does artificial hydration work to help people get better?

It depends on the type of medical problems they have and why they are having problems drinking.

Who is most likely to be helped by artificial hydration?

- People who were mostly healthy before the illness or injury and have the strength to recover.
- Those who only need hydration for a few hours or days.
- People who can be expected to live well with long-term artificial hydration.

Who is less likely to be helped by artificial hydration?

- People who are seriously ill from heart, lung, liver, or kidney failure.
- Those with a terminal illness such as advanced cancer or advanced dementia.
- People who are older, weaker, or very frail.

Can people try artificial hydration for a short while?

Yes, people who are unsure about artificial hydration may want to try it for a short period (trial period) to see if it helps. They should talk with their doctors and medical team about what to expect and how to tell if it is helping.

What happens for people who decide NOT to try artificial hydration?

They can get other treatments.

Deciding ahead of time that you don't want to try artificial hydration does not mean you can't get other medical care that you do want. This may include surgery or time in the intensive care unit. Help with pain is always available.

- People who can swallow safely may still be able to drink or be assisted by hand.
- Caregivers can help ease dry mouth with ice chips, moist sponges, moistening sprays, or liquids placed inside the mouth.
- Water, gum, lozenges, or candies can be given to people who can still swallow.

They may not feel hungry or thirsty.

It is normal for people who are very ill to need less food and water because their body isn't using calories in the same way. Seriously ill people may not feel hunger or thirst the way healthy people do.

They may not be able to delay death.

If a person cannot drink normally and does not receive artificial hydration, their death may not be delayed.

How do people decide whether or not to try artificial hydration?

They talk with their medical team about how artificial hydration might help them to reach important health goals. They think about the risks of artificial hydration and how it might help them.

Talk with your doctors and medical team about:

- How artificial hydration might help you to reach your goals, such as getting back to a
 certain level of health or ability.
- How long the treatment might be needed.
- What kinds of problems the treatment might cause.
- How long you might live with or without artificial hydration.
- What life might be like while using artificial hydration.

Who chooses to use artificial hydration?

- People who are able to get better or are expected to live well and to have an acceptable quality of life often choose artificial hydration.
- Some people who are willing to try artificial hydration with the hope of living longer, even if they are uncomfortable or if it might cause other medical problems.

Who chooses NOT to use artificial hydration?

Some people with a serious or terminal illness may choose not to use artificial hydration because:

- They may want to avoid more medical treatments.
- They may want to avoid swelling or other side effects.
- They may not wish to delay death.

What feels right for you?

When thinking about yourself and the choices, it may help to talk with:

- Anyone who might make medical decisions for you in the future.
- Any person for whom you are the medical decision-maker.
- Your doctors and medical team.
- Family or friends.
- Your spiritual or faith leaders.
- Others who have chosen artificial hydration in similar situations.

Making Your Decisions Known

- Tell your family, close friends, and your doctor about your decision.
- Create an Advance Directive* and assign someone to speak for you when you cannot speak for yourself.
- Talk with your medical provider about whether your decision should be recorded in a special medical order. (Learn more at POLST.org.)
- Give copies of these forms to your family, to your doctors, and to your hospitals.
- Keep important documents in an easy-to-find place.
 - *Advance health care directive forms are available at CoalitionCCC.org or from your healthcare provider.



This decision aid was made possible through a grant from the California Health Care Foundation.

References, copies, and additional aids are available online at CoalitionCCC.org or by email to info@CoalitionCCC.org.