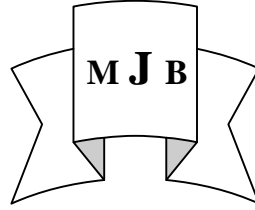


## For Dying Patients: Artificial Hydration, is it Necessary or not?

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### Review Article

#### Abstract

Eating and drinking are essential for life. There are clinical situations that artificial hydration is necessary. For dying patients artificial hydration looks useless and in many conditions could even be harmful (e.g. pulmonary edema in hypoalbuminemic patients). In our medical culture artificial hydration is a symbol of care to the patient and withholding it, is a very emotive issue, especially to the family. Attention to autonomy, explanation about advantages and disadvantages of artificial hydration to the family and reassure them that the patient will be looked after and kept comfortable till the last seconds might be the solution of this ethical dilemma.

للمرضى المحتضرين: التغذية بالسوائل الوريدية هل هي ضرورية أم لا؟

#### الخلاصة:

الطعام والشراب من ضروريات الحياة، هناك حالات سريرية تقتضي أن تكون التغذية عن طريق الوريد ضرورية، لكن للمرضى المحتضرين فان التغذية الوريدية تكون في بعض الأحيان عديمة الفائدة وأحيانا مضره (كحصول الوذمه الرئوية للمصابين بنقص البروتين في الجسم).

في واقعنا الصحي التغذية الوريدية تشكل رمز من رموز العناية بالمرضى وحجبها عنه لها تأثير عاطفي سيء خاصة لدى عائلته المريض.

الانتباه والتركيز على وضع المريض من كافة جوانبه الطبية والتوضيح بفوائد ومضار التغذية الوريدية للعائلة وطمئنه ذوي المريض بان مريضهم سوف يتم الاعتناء به لكي يبقى في وضع مريح حتى الثواني الاخيره من حياته يمثل الحل الأمل لهذه المعضلة الاخلاقيه.

#### Introduction

What is the definition of dehydration? Babylon's says: abnormal lack of water in the body due to insufficient intake of liquids or extreme loss of fluids by sweating or vomiting or due to diarrhea. In dying patients desire for drinking decreases and studies shows artificial hydration has no effect on survival or symptom

control [1]. There is no powerful evidence that recommend the routine use of artificial hydration for terminally ill patients with cancer [2]. There are two studies that revealed dehydrated dying patients survived longer than those who received fluids [3].

beneficence and justice- should be respected in every medical action [12]. We, physicians, usually act as if our patients have to follow our orders. But, that is not true and every patient has the right to accept or reject suggested medical treatment. The integration of palliative care into healthcare system besides caring of patients who are not curable now is the rationalization of resources [13]. In palliative care we try to avoid all

futile treatments, irrelevant tests and other interventions such as artificial hydration or total parenteral nutrition for end of life stage. Avoiding the use of futile treatment means: reducing costs by avoiding the admission of patients in hospitals for artificial hydration inappropriately and releasing beds to other patients. Therefore, palliative care would have an influence much broader than

Originally defined and could increase the effectiveness and the equity of the healthcare system as a whole.

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