

VDFP – DINE & LEARN FINAL DAYS AT HOME

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NO DISCLOSURES or MITIGATING BIAS

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CASE

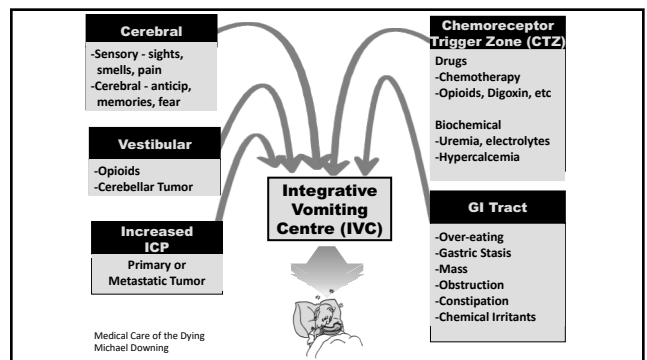
- PPS 20% (bedbound, minimal intake, high risk of imminent death)
- Nursing calls family doc because the person is having nausea, not responsive to metoclopramide or prn haloperidol. They are also having some nighttime restlessness
- MOST M2

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NON PHARMACOLOGIC TREATMENTS

- Treat other symptoms (pain, short of breath, constipation, anxiety)
- Avoid foods that are not pleasing to patient
- Relaxation and breathing, swallowing techniques
- Loose, unrestrictive clothing
- Avoid lying flat 2 hours after eating
- Encourage more frequent, small meals
- Acupuncture or acupressure

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| Chemical (Dopamine, Serotonin) | Cerebral (GABA-BDZ complex, Cannabinoids) | Cranial | Vestibular (Anticholinergic H1, Anticholinergic) | Visceral (Dopamine, Serotonin) |
|-----------------------------------|--|----------------------|---|-----------------------------------|
| Haldol 0.5-1.5mg q8h | Ativan 0.5-1mg SL | Dexamethasone 4-16mg | Gravol | Gravol |
| Nozinan 5-12.5mg q8h | Nozinan 5-12.5mg q8h | Haldol 0.5-1.5mg q8h | Scopolamine patch | Nozinan 5-12.5mg q8h |
| Olanzapine 2.5-10mg (tab or ODO) | Cannabinoids (Nabilone vs. Medicinal Cannabis) | Nozinan 5-12.5mg 18h | Nozinan 5-12.5mg q8h | Metoclopramide 5-10mg qid * |
| Ondansetron 4-8mg ^{***} | | | Olanzapine 2.5-10mg | Haldol 0.5-1.5mg q8h |
| | | | | Olanzapine 2.5-10mg |
| | | | | Domeperidone 10mg tid * |

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OR.....KEEP IT SIMPLE!

- ✓ Haldol 0.5-1mg q8h
- ✓ Metoclopramide 5-10mg q6h
- ✓ Nozinan 5-12.5mg q8h
- ✓ Dexamethasone 4-8mg od (to bid)
- ✓ Olanzapine 2.5-10mg qhs (to bid)

- ✗ Ondansetron constipating, \$
- ✗ Gravol Anticholinergic, dose limited, \$
- ✗ Scopolamine hard to find, \$

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