

Advance Care Planning

Hydration (Fluids)

At different times during your cancer treatment, you may not be able to swallow well or take in enough liquids to meet your body's needs. Depending on your situation, your goals of care and treatment wishes, you and your health care team will decide if you need additional fluids through a tube, also known as artificial hydration. There are several ways in which fluids may be given through a tube such as:

- Into the stomach or intestine
- Into a vein (intravenous or IV)
- Under the skin into fatty tissue

The purpose of this document is intended to help you decide, along with your healthcare team, if artificial hydration is right for you.

How does artificial hydration work?

When your body receives fluids through a tube, the fluids are absorbed into the blood stream, allowing your body to take in the liquids it needs. Before you begin treatment, your healthcare provider will talk with you about the differences between each type and which will be best for you.

Stomach (NG Tube or G Tube) or Intestinal Tube (J Tube)

When a tube is going to be used only for a short time, it is usually placed through the nose into the stomach. This is called a nasogastric (NG) tube.

If you will be getting fluids for a longer time, other types of tubes that may be used are inserted through the skin into the stomach (G tube) or the intestine (J tube). Usually, this procedure does not require surgery.

IV Tube

When fluids are given by IV, the IV tube is connected to a bag of fluids which, in turn, flows from the bag, through the tube and into a vein. If the need for fluids is long-term, however, patients usually receive a central venous catheter (CVC). A CVC is a tube that is usually placed into a vein in the arm or under the collarbone. A CVC is placed long-term, but you can have it removed later when it is no longer needed.

Tube under the Skin into Fatty Tissue ("Clysis")

Patients may also receive fluids through a tube placed under the skin into the fatty tissue. This is called hypodermoclysis, or "clysis" for short. The fluid is absorbed from the fatty tissue into the bloodstream.

Clysis cannot give the body as much fluid as when fluid is given into an IV tube. This method works best for those needing a modest amount of fluids. It is simpler, with fewer complications. Clysis cannot be given by all providers, but can be provided by some hospices to patients under their care.

For tubes placed by any of these methods, patients may receive fluids as needed or on a continuous basis (24 hours a day).

What are the benefits of artificial hydration?

Patients receive fluids through a tube to prevent or treat dehydration. Patients who are dehydrated from not getting enough fluid in may feel weak, dizzy or thirsty. These symptoms may also happen for other reasons. Depending on the cause, symptoms may or may not be helped by fluids. Regardless, there are other treatments available to help these symptoms.

What are the possible complications?

Listed below are some of the complications that may occur from artificial hydration. However, if you experience any of the following, your healthcare provider will treat you as needed.

Stomach (NG Tube or G Tube) or Intestinal Tube (J Tube)

- Nose and throat soreness (for tubes placed through the nose)
- Skin soreness
- Tube misplacement
- Tube falling out
- Tube clogging
- Tube leaking
- Infection at the tube site

IV Tube

- Soreness at the IV site
- Infection at the IV site
- Infections of the bloodstream
- Blood clots at the IV site
- Too much fluid, which may cause swelling or breathing problems

Tube under the Skin into Fatty Tissue (Clysis)

- Uncomfortable swelling at the tube site
- Infection at the tube site

When should someone not receive artificial hydration?

When the risks outweigh the benefits, you may decide not to receive additional fluids. Artificial hydration does not work as well in people whose bodies cannot use the fluids properly. This often happens in the later stages of an illness, when the body begins to shut down. Comfort may be the main goal of care at this time.

People often worry that their loved ones will become thirsty and need water if it is not given. Most people in this situation, however, are not thirsty. If they are thirsty, they only need very small amounts of fluids to quench their thirst, together with good mouth care to keep the mouth clean and feeling refreshed.

Should I receive fluids through a tube?

Your health care team will help you choose what is best for your care. Getting fluids through a tube may or may not help you. An open talk about the benefits and risks is best when it is done before you need it, if possible.

- Learn the facts and understand the pros and cons, and how they apply to you.
- Talk it over with your health care team and your loved ones.

Do not hesitate to talk with your doctor or nurse about any questions or concerns you may have.