

What is Dehydration?

Dehydration occurs when the body loses more fluid than what is taken in and lacks sufficient water and other fluids to perform its normal functions.

Dehydration can happen more easily in individuals with:

- Diabetes
- Experiencing vomiting or diarrhoea
- Prolong exposure to the sun (heatstroke)
- Excessive alcohol intake
- Profuse sweating
- High temperature
- Medication that increases urination (diuretics).

Medication that can affect fluid loss to the body video: <https://youtu.be/ypQ-cU9XLPk?si=sJ74I5hEE2mQ-d8i>

Signs and symptoms of Dehydration?

Spotting the signs of Dehydration Video: <https://youtu.be/N8LaeOGSPjM?si=DPAGjgHdCzdbmlnz>

- Dry mouth/ lips/ tongue
- Thirsty
- Headache
- Dry skin
- Passing less urine/ Smelly urine/ Dark or cloudy urine
- Dizziness
- Lethargy
- Sunken eyes
- Nocturia (frequent urination at night)
- Pee that looks cloudy, dark or has a strong smell
- Sudden urges to urinate
- Confusion
- Low blood pressure
- Lack of tears or sweat
- Rapid heart rate
- Poor concentration

[Dehydration - NHS \(www.nhs.uk\)](https://www.nhs.uk)

<https://www.nhs.uk/conditions/urinary-tract-infections-utis/>

<ul style="list-style-type: none"> • Irritability <p>How does dehydration affect the body? Effects of dehydration poster (nhs.scot)</p> <p>How does hydration and nutrition impact the risk of infection and fighting off illness?</p> <p>Dehydration and Poor nutrition impacts susceptibility to infection in the following ways:</p> <ul style="list-style-type: none"> • Prolongs wound healing due to lack of protein • Impairs wound healing • Increases the risk of skin breakdown and pressure sores • Impairs respiratory function <p>Poor hydration increases the risk of Urinary tract infections</p> <p>Urinary tract infections (UTIs) affect your urinary tract, including your bladder (cystitis), urethra or Kidney's infection. UTIs may be treated with antibiotics, but they're not always needed.</p> <p>Dehydration is a common cause of hospital admission for nursing home residents. One in four nursing home patients admitted to hospital are dehydrated. Dehydration increases the risks of UTIs which can lead to multiple complications including confusion, falls, Acute kidney Injury and hospital admission. UTIs in the elderly are often over-diagnosed and over treated.</p> <p>Reduce UTIs through improving hydration in nursing and residential homes.</p> <p>Urinary tract infections Video: https://youtu.be/zBen05zCCHU?si=HI3zt n8W3GErZyZG</p>	
<p>Improving Hydration Good Hydration improving hydration video:</p>	

<p>https://youtu.be/6hZR8DX_Tao?si=VToeWSTBtT3SPSp-</p> <p>Improving Hydration through structured drinks rounds in care homes video: https://youtu.be/xZuJwJScgAM?si=hIYoPXqKy3Fwmbj</p>	
<p>How much Fluid intake do you need? Aim to drink 6 to 8 cups or glasses of fluid a day unless on a fluid restriction. This may include water, milk, sugar free drinks, coffee, hot drinks.</p> <p>Some residents may need further support to stay hydrated. For example:</p> <ul style="list-style-type: none"> • Choose a cup suitable for the resident they may prefer to use a straw • Support and encouragement to maintain fluid intake throughout the day It could be as simple as set drink routines rather than relying on thirst alone • Jelly, soups and other food rich in fluid can be offered to increase fluid intake if the resident doesn't want to drink • Encourage fluids when giving care at night if sufficient fluid intake cannot be taken during the day. 	<p>https://northeastlondon.icb.nhs.uk/wp-content/uploads/2022/04/MM-ELHCP_Hydration_guidance_care_home.pdf</p> <p>Water, drinks and hydration - NHS (www.nhs.uk)</p>
<p>Fluid Charts Fluid balance is a term described as the balance of the input and output of fluids in the body to allow metabolic processes to function correctly. It is an essential tool to determine hydration status.</p> <p>Fluid charts may be started on residents if they are unwell and there is a concern, there are new residents and there's a need to get a baseline that can be used in future to identify declining changes, fluid intake is low, residents with UTI.</p> <p>It's important that the fluid chart is recorded accurately to provide the correct support for the resident.</p>	

<p>Hydration in Palliative care and at End of Life</p> <p>Drinking is a basic human need, but as death approaches the desire to take in fluid can diminish.</p> <p>A daily assessment highlights the changes in the residents/service user's hydration status.</p> <p>There are ways to support patients with eating and drinking, and to help manage changes such as difficulty swallowing.</p> <p>Supporting residents with hydration at the Palliative care and End of life stage</p> <ul style="list-style-type: none"> • Help them record their preferences about eating and drinking in an advance care plan. It could include foods they do and do not enjoy (which may change over time) and decisions around artificial nutrition and hydration. <p>*Read the End-of-life competences regarding the universal care plan.</p> <ul style="list-style-type: none"> • If they can eat and drink on their own – make sure they can reach food and drink when they want it. • Make sure they're comfortable, help them to sit upright in bed or in a chair. • If they have dentures – find out if they wish to wear them while eating. Check they're clean and offer to help insert them if needed, making sure they fit comfortably. • Check if they need help to eat or drink, they may need adapted cups or cutlery, or you may need to help them. 	<p>https://www.nice.org.uk/guidance/qs144/chapter/Quality-statement-4-Hydration</p> <p>https://www.mariecurie.org.uk/professionals/palliative-care-knowledge-zone/symptom-control/hydration-nutrition#supporting</p> <p>About – Universal Care Plan (onelondon.online)</p>
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- Help them enjoy the social part of eating if appropriate, include them in mealtimes with other people.
- [Help them with mouth care.](#)
- If they have glasses or hearing aids encourage, they wear them and check they fit comfortably, as enjoying eating can be helped by using different senses. Being able to see the food and hear any guidance (for example to slow down) can help the patient have a more enjoyable eating experience.

Difficulty Swallowing (Dysphagia)

Dysphagia is when the person may find it difficult to swallow.

If someone has difficulty swallowing, there's a risk that food and drink can go into their airway or lungs this is called aspiration

Signs of difficulty swallowing

Check the resident/service user is swallowing safely.

Signs they may have difficulty swallowing include:

- coughing or choking when eating or drinking
- bringing food back up through the mouth or nose
- drooling of saliva
- being unable to chew food properly
- pain when swallowing
- taking a long time to eat or drink
- holding food in their cheeks
- feeling that food is stuck in their throat or chest
- a wet or gurgly sounding voice
- weight loss (however, this is common in patients receiving end of life care)
- dehydration
- repeated chest infections.

<p>If you suspect the resident/service user has difficulty swallowing, contact their GP, district nurse or specialist nurse to arrange an assessment with a speech and language therapist.</p>	
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Hydration competences for carers working in Adult Social care in North Central London

Please ensure you adhere to your local protocols, policies and guidelines relating to Hydration