Emotional Distress

Are you feeling nervous, upset, sad, depressed, restless, or anxious? When you are seriously ill, it is **natural and expected** to have some of these unpleasant feelings. “Emotional distress” can affect your sleep, mood, energy level, appetite, mental focus, memory, desire to take care of yourself and your ability to be with other people.

Anytime you are having unpleasant feelings, no matter what kind, please talk to your care team about what is happening. **They may not be able to make the feelings go away, but they can help you manage better.** There are medicines that can help manage distressing feelings, and many other ways to find relief without using medicine that you and your caregivers can try at home.

**Signs and symptoms of anxiety, sadness, depression, and restlessness**

**Anxiety**

Feeling nervous, bothered, worried, or filled with dread can all be “anxiety.” These emotions are natural as you go through changes to your body, your mind and your life that are beyond your control. Anxiety can be hard to recognize because there are many ways you may react to it:

- Feeling tense, not able to relax
- Feeling of butterflies in stomach or lump in throat
- Muscle tension, aches, soreness
- Feeling very tired or exhausted
- Trouble falling asleep or staying asleep, or having nightmares
- Worrying about what could or may happen
- Sweating/flushing
- Headache
- Cold, clammy hands
- Dry mouth
- Diarrhea
- Urinary frequency
- Trouble concentrating
- Feeling that small tasks seem hard to do
- Getting upset about things that normally would not upset you
- Feeling that heart is beating too fast
- Panic or extreme nervousness, feeling something needs to be done but unable to do anything
- Trouble breathing
- Increase in pain

Feeling anxious can be uncomfortable, but if you and your care team can discover what is causing your anxiety, they can help you try to find relief. Please let them know what you are feeling.

**Sadness**

The losses you experience during your illness – loss of self-worth, of hope, of the ability to do the things you like to do, of the ability to communicate and care for yourself – may make you sad or “down.” Sadness may come and go. You may show sadness by crying or:

- Getting upset about things that normally would not upset you
- Feeling very tired or exhausted
- Having trouble concentrating
- Feeling that small tasks seem hard
- Wanting to be alone more than usual
- Having less interest in activities you once enjoyed

We can offer support that may help you find some relief from sadness. Please talk with any member of your care team about what you are feeling.
Depression
Depression is sadness or hopelessness that seems like it will never end. It gets in the way of your daily functioning and may cause you physical pain. You may have some of the signs of sadness shown on the previous page, as well as sleeplessness, sleepiness, or lack of appetite. The most serious sign of depression is having thoughts of suicide. Depression lasts, but it is treatable. Please ask your care team for help.

Restlessness/Agitation
Some people become restless or physically agitated during a serious illness. Depending on your diagnosis, this may happen in the last days – or it could start much earlier. Regardless of when these feelings start, they may cause you to:
• Not be able to relax
• Pull/pick at clothing or bed linens
• Cry out/moan
• Make faces, clench your teeth
• Have trouble breathing
• Attempt to remove clothing
• Constantly move in bed or try to get out of bed
• Sleep very little

Restlessness and agitation can be related to fear or emotional/spiritual concerns about the end of life, or it may have an underlying, treatable cause, such as pain, constipation, inability to urinate, lack of oxygen, trouble breathing, infection (urinary or pneumonia), low blood sugar or medication side effects. Your care team will look for both physical and emotional causes if you are feeling restless or agitated.

What can be done to relieve emotional distress?
Feelings
• Talk about your feelings, fears, and concerns with someone who will listen and provide support, including family, friends, doctor, clergy and/or your care team.
• Allow yourself to cry.
• Keep a journal and write about your fears, feelings, concerns and/or things that are happening in your life. If you have difficulty writing, speak into a recorder, record on a smartphone, or ask someone to write for you.

Relaxation
• Enjoy a relaxing activity: take a hot bath, color, read a good book or watch a favorite movie.
• Listen to soothing music.
• Take a short walk or find a place where you can relax for a while.
• Take slow, deep breaths.
• Take time to rest, and practice being kind to yourself.
• Try to keep a regular routine.

Comfort
• Find new ways to enjoy your favorite activities and surround yourself with things that feel good. For example, if you enjoy gardening, put flowers in your home.
• Read, have someone else read to you, or listen to an audiobook. Put books you enjoy – or have always wanted to read – around you.
• Let the sunshine in and enjoy sunny days when possible.
• Talk with someone you trust, pray, use relaxation techniques, or get a massage.

Interaction with People
• Stay connected with your friends by phone, text, email or writing letters if you are able. Have a volunteer write for you if you cannot write yourself. 
• Invite family and friends to visit when possible. 
• Ask for your help when you are unsure about what you need. 
• Make a list of things you want to do, break the list into small jobs, and ask friends to help. Celebrate small progress. 

Suggestions for family/caregivers
• Treat your loved one with respect, empathy, and patience. Gently reassure them and give them time to talk about any worries. 
• Continue to offer hope, and find joy in all victories, no matter how small. If your loved one has had a good day, offer encouragement: “You did have a really good day,” and “I’m proud of you.” 
• Be flexible. Your loved one may want to talk one day and need quiet the next. 
• Listen without minimizing their thoughts or feelings. Say, “Tell me more about that.” 
• Be willing to be with your loved one without having to “do” something. Hold their hand or otherwise use touch, as appropriate, to comfort them. 
• Provide a calm, relaxed setting if this is comforting to your loved one. 
  › Turn down bright lights.  
  › Keep the room as peaceful and quiet as possible.  
  › Try playing soft, soothing music.  
  › Explain to visitors the need for quiet, soothing surroundings. 
• Talk in a calm voice. When giving care, softly explain what you are doing. 
• Take time for yourself. Ask someone to stay with the patient while you rest, go for a walk, run an errand, or do an activity you enjoy. 

If your loved one is restless or agitated:
• Help them change positions (such as from sitting to lying down). 
• Change their location/environment, if possible – help them move to a different room or open a window. 
• Pad their sides with pillows or place pillows against the bedside rails for safety. 
• Make sure someone is always with them; ask family and friends to help. 

Anytime you are concerned about emotional distress, no matter what kind, please talk to your care team about what is happening.