**“How to live and die well: know more about what might happen and plan ahead as much as possible”**

This is a short video for people who are well just now, but who might get a serious illness or a life-threatening condition at some time in the future. It is to help us all think ahead and be better prepared. The secret to living and dying well is to understand what may happen for people with different types of serious illness, talk about it with the people close to us and plan as best we can.

100 years ago people died from 3 main causes: infections, in childbirth or in accidents - and these happened relatively quickly. Nowadays, most people have one of three main types of declining health: a rapid decline taking weeks or months (most often in certain types of cancer), an unpredictable and variable decline taking months or years (typically with longer term lung or heart problems, or a longer gradual decline, most often found with general frailty or dementia

Let’s look at these 3 typical illness trajectories or patterns of decline. Having an idea of what happens to people with different groups of conditions, can help people cope with thinking and planning ahead. It is important to remember that the future is always a bit uncertain and people develop new health problems.

But getting seriously ill isn’t just a physical experience. It’s a 4-dimensional one: Physical, Social, Psychological and Spiritual and these other dimensions may be more important to a person and their family than symptoms or physical health problems.

Let’s look at these different dimensions. The “rapid trajectory”, typically some cancers. Physical decline, we’ve seen, happens more predictably towards the end of life; loss of social contacts and relationships tends to run in parallel with poorer physical health, but there are key times when people might have more psychological distress, anxiety and when questions about the meaning and purpose of life can be common. So knowing about these common patterns and issues allows us to prepare in advance and get better support to minimise distress in all these aspects of life.

Looking at this more fluctuating trajectory, there are times when people get a flare up of the disease and have to be admitted to hospital or have much more care at home. This can be very worrying, and bring social problems at the same time. Existential issues like what this all means in this sort of illness pattern are more uncertain too. So preparing and planning in advance to cope with these unpredictable events and getting extra psychological and social support at these times can make a big difference to how people cope.

Finally, the gradual decline, typically of frailty or dementia. Our research shows that actually these other aspects - social, psychological and existential, frequently decline long before the person dies. What this means is that we should try hard to help people and their carers maintain social contacts, and share their anxieties and worries with friends and health and social carer professionals. Talking and planning helps people get help to do the things that are most important for them, and keep as much of their independence and sense of meaning and purpose as possible.

Everyone dies, we will all die even if we are feeling quite well just now. It may suddenly tap us on the shoulder or creep up on us. To know about these patterns of declining health in advance can help us deal with the different challenges that we will face one day. Help us live and die as well as possible whatever happens.

It’s good to think ahead and be prepared Then we are most likely to live life to the full, and then have a good and dignified death.