Veterinary Hospice Care
Post Conference Reflections

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The first International Symposium on Veterinary Hospice Care took place March 28-30, 2008, hosted by UC Davis School of Veterinary Medicine in Davis, California, in fulfillment of Kathryn Marocchino’s twelve-year vision to begin the professional exchange on end-of-life care for animals. Marocchino’s Nikki Hospice Foundation for Pets co-sponsored the event with Jeri Ryan, PhD, of the Assisi International Animal Institute.

This first annual event attracted 135 people from various professions and walks of life. Veterinarians and veterinary technicians were there as well as university personnel and students of veterinary medicine. The symposium also attracted human hospice workers and volunteers, pet sitters, animal communicators, animal chaplains and pet loss grief counselors as well as representatives of animal sanctuaries, humane societies and the ASPCA. Last but not least in the audience were animal lovers interested in having hospice services available for their four-legged friends.

What unfolded over the course of three days reflected the wide spectrum of interpretation of what it means to provide hospice care for animals. This conference marked a milestone in history as in mainstream veterinary practice the term “hospice” is often not utilized at all, much less its philosophy and practice, as it has been generally ignored in veterinary schools and in training veterinary technicians. Colorado State University stands out as an exception as it has a student-run program offering in-home visits for those who wish to provide hospice care for their animals and who are lucky enough to live within 30 minutes from the university.

In contrast, pet loss support hotlines and groups are widely established, echoing the dire need in the animal-loving population to receive support when facing end-of-life challenges vis-à-vis an animal companion.

The term “animal hospice” has been used in many ways, and as a profession we have yet to define what it truly stands for. It is not unusual for veterinarians to consider it “hospice care” when in-home services are offered for geriatric or terminally ill animals while generally assuming that euthanasia will be utilized to end the patient’s life. Specialty veterinary clinics may call it “hospice” when they provide care for the terminally ill until the final shot is given. Some call it “hospice” when actually solely grief support is offered to the animal’s caretaker. And then there are those who are looking to support an animal to the end of its life in ways similar to those used in human hospice care.

Gap in the Standard of Care

The trend in our society is to protect our animal companions from suffering, and dying has been assigned an emotionally charged, bad reputation. As a result, euthanasia, once perceived as a final resort, has become the standard procedure at the end of an animal’s life. At the same time it is acknowledged that the human-animal bond has developed to such an extent that our animal companions have reached the status of a family member.

This opens up a wide gap in end-of-life care for animals. As medical technology advances, it becomes important to educate clients when heroic measures may no longer be in the best interest of their animals. Yet, just as we do not usually euthanize human family members, there are those caretakers who wish to allow their animal to pass on in their own good time if a peaceful death seems within reach. Chances are that their veterinarian will advise them otherwise, ranging from “just” exerting emotional pressure, through a professional but one-sided perspective, to declining to provide further palliative care, to downright refusing to let the caretaker leave the clinic with his or her animal alive.

We are not talking about cases here where the animal is in utter uncontrollable pain. We are talking about veterinarians disenfranchising clients from their basic right to choose what they feel is best for the animal they have cared for throughout its entire life. This could not have happened to us? But may be we have at times hastened an animal’s death unnecessar-
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ily because we did not know of other options to keep it comfortable and it’s owner sufficiently supported in caring for it? Even if we are trying to communicate kindly and with compassion, how can one choose which route to take if only a one-way street is being offered?

Those clients who manage to withstand the “invitation” and return home with their animal alive will find that there are almost no written resources to fall back on, and that their relatives and friends may well chime “Don’t you think it’s time?” even if the animal is rather content with its situation. Repetition does not create truth, yet this increasing pressure at a time of utmost vulnerability may easily add up to the caretaker’s questioning his or her personal perception that the animal, just as most human loved ones, may prefer to live out its life, even if that entails a certain amount of discomfort.

SISTER HUMAN HOSPICE

Human hospice care is relatively young, yet as it meets a very essential need, it developed very quickly within a history that reaches back only 40 years. Its strength and effectiveness are due to a team based multidisciplinary approach covering a territory that is very distinct from what medical doctors know how to address. Hospice care acknowledges that dying is far more than a medical event, offering support in many practical ways but specifically in regards to the emotional, psychosocial and spiritual aspects that arise for the caretakers.

Guy Hancock, DVM, M. Ed., formerly the director of the Veterinary Technology Program at St. Petersburg College in St. Petersburg, Florida, has served on the boards of several human hospice programs and wants to encourage the veterinary community to “avoid repeating the mistakes the medical profession made...Human hospice has now become nearly mainstream, but it has taken 40 years.” In recognition of a trend among veterinarians to only focus on medical needs, Hancock emphasizes: “The perspective I have developed...is that the nursing and medical aspects serve as a base to enable the other two, the psychosocial and spiritual component (of hospice care), which are actually more important.”

As veterinarians, our focus has been almost exclusively on the medical aspect, and even then grasping the value of palliative care and recognizing when to stop diagnosing can truly become “mission impossible”. As it turns out, even the brief and general AVMA guidelines on veterinary hospice care were created at Kathryn Marocchino’s request in 2001, 2007 revision being an exact copy of the original version.

RE-EVALUATING THE PLAN OF CARE

A foremost pioneer of veterinary hospice care, Eric Clough, VMD, and his wife Jane Clough, BA, RN(H), strongly promote reduction and even elimination of “futile testing and treatment.” Clough has distilled a simple guideline from his life’s work: “We need to work towards understanding of clients and veterinarians, so that they will automatically think and ask about a treatment or a procedure at the end of life:

- Will it make a difference, e.g., knowing the result of a test?
- Will it change the outcome?
- Will it cause pain?

If the answers are NOT: yes, yes, and no, then we need to walk away from offering them as professionals or accepting them as owners.”

Even when we have made it past the hurdle of recognizing a condition as terminal and have turned to palliative support, some veterinarians still find it a stretch to include all the facets of care that are employed in human hospice. But why re-invent the wheel entirely; we can examine what our fellow human hospice workers have learned over the years. In its original sense, “Hospice neither hastens nor postpones death. Goals are to ease and alleviate the patient’s discomfort, and support the family in caring for their dying loved one. It provides for the physical, psychological, social and spiritual needs of the entire family, remaining sensitive to values and beliefs of each individual.” (Hospice Center Bend-La Pine, OR)

EMBRACING THE DYING PROCESS

We may feel the value of euthanasia being threatened when all that is asked from us is to let it be an option, not a default solution. The term “dying naturally”- used to indicate that euthanasia is not necessarily the ultimate outcome of hospice or that an animal has passed on its own-- raises concerns for some that such an animal has been left to die on it’s own. While we develop our terminology, it is important to keep in mind that the point of the discussion is not that euthanasia should no longer be used. This is more about expanding our perspective so we can recognize and offer options besides euthanasia. And regarding the medical and nursing aspects, palliative care can be all that is needed in a number of cases.

How sobering to have a veterinarian colleague pose the poignant question of how many of the veterinarians at the symposium had actually seen an animal die on its own and only have a handful respond affirmatively.
How telling to have one courageous participant at the end of the first two days of discussion cautiously state she thought she had come to a conference on animal hospice but was no longer so sure after listening to presentations with so much emphasis on euthanasia. Many professionals and lay people alike resonated strongly with her sentiment. And yes, why would it be necessary for clients to be Hindu or Buddhist to have their desire to not euthanize be taken seriously, and to be given options? Other attendees felt equally as strongly that they were speaking of hospice care, i.e. equating hospice care with generally euthanizing at some point. And some had not thought of hospice as being able to provide appropriate support through a natural dying process prior to attending the event. At this point in time, there is even a challenge in finding speakers who are experienced in this work, as it is simply not widely done.

Learning about the special needs intrinsic to veterinary hospice care does not mean giving up the availability of euthanasia, as the latter always remains a possibility. Fortunately, we are not in an “all or nothing” situation, but euthanasia does not have to be the “treatment modality” or the only option for “comfort care” merely because an animal has a life-limiting disease process. There is more than a “one size fits all” solution to alleviate the suffering potential that concerns us all so greatly. The time has come to investigate how to utilize continued medical advances to support the needs associated with the innate design process of dying, and to shift the focus of our profession from “when” to “whether” to euthanize.

**Suffering and the Will to Live**

Taking the animal’s will to live into account when considering euthanasia should not be a novel idea, even if it eludes linear measurement. We may have established what we consider sufficient quality of life for an animal, but without a well-founded understanding of the natural process of dying we are bound to miss what qualifies as part of a peaceful passing. We may feel concerned that animals will end up suffering when dying on their own becomes more accepted. However, this perspective can easily backfire if we allow it to prevent us from becoming educated about and offering hospice services. It is already a harsh reality that animals indeed end up experiencing more discomfort than necessary solely because their human caretakers don’t dare call their vets anymore, because all they expect to hear is that they should euthanize their animal loved ones. If we don’t re-evaluate our approach, euthanasia may end up having a bad reputation. It does not deserve that, and neither does dying.

Fear has never been a wise guide, and looking into our own hearts with great honesty in order to identify and deal with our personal issues in regard to...
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to dying, or dying under “undesirable circumstances”, is a great first step in discovering what may be driving our actions besides our societal imprint. We may discover that providing animal hospice care can be deeply fulfilling despite all of the challenges it may bring, can enhance the human-animal relationship, and can notably lessen the intensity of grieving.

Dying is Part of Life

If “holistic” means looking at the whole, then opening up to that phase of life called dying and learning about both the stages of the dying process and about animal hospice care become essential to practicing holistic veterinary medicine.

This author would like to propose that the AHVMA, as a leading organization representing holistic veterinary medicine, partake in bridging the gap in our professional education. A great step would be to offer an introduction to animal hospice as part of the basic introductory tract at each annual conference, and to have more in-depth presentations in the advanced tracts. It is essential that the training continue to be ongoing, not a one-time offering.

The Second International Symposium for Veterinary Hospice Care is planned for Labor day weekend, September 5-7, 2009. The date will officially be announced on www.pethospice.org and www.spiritsintransition.org. Please come, and feel free to forward the invitation widely.

We have much work to accomplish as a profession when it comes to end-of-life care for animals, but we can start with where we are now. Thankfully, the dialogue has started among colleagues and among those we can work with or serve in this sacred work. Much gratitude is extended to you, Kathryn Marocchino, for your tireless stand to have hospice care for animals become widely available in the future. Thank you, feline Nikki, for being Kathryn’s ongoing inspiration. Your departure could have been so much gentler, but promise: we will work together to ask the deeper questions and explore the answers, so we can meet the needs of both the animals and their human loved ones through all the seasons of life.

We can make of every moment an opportunity to change and to prepare, wholeheartedly, precisely, and with peace of mind— for death and eternity.

Sogyal Rinpoche
The Tibetan Book of Living and Dying

About the Author

Ella Bittel is a 1994 veterinary graduate of the “Tiermedizinische Hochschule Hannover” in Germany. She practices in California, specializing in holistic treatment modalities, including Veterinary Acupuncture (IVAS certified 1999), Veterinary Chiropractic (AVCA certified 1998) and cranio-sacral work. Ella also utilizes homeopathy and Bach flower essences, is a TTOUCH practitioner and is certified in Energy Medicine techniques (CEEMP) by Donna Eden, who’s methods Ella applies in her work with animals.

In recognition of the public need for information on end-of-life care for animal companions, Ella Bittel developed the weekend seminar “Spirits in Transition”. This presentation travels throughout the US. For more information or to contact Ella, please go to: www.spiritsintransition.org.

Ella was a speaker on end-of-life care issues at the 2007 AHVMA conference in Tulsa, OK and at the First International Symposium on Veterinary Hospice Care in Davis, CA, in 2008. She is a member of IVAS, AAVA, AHVMA and IVAPM.