Focus on Cats

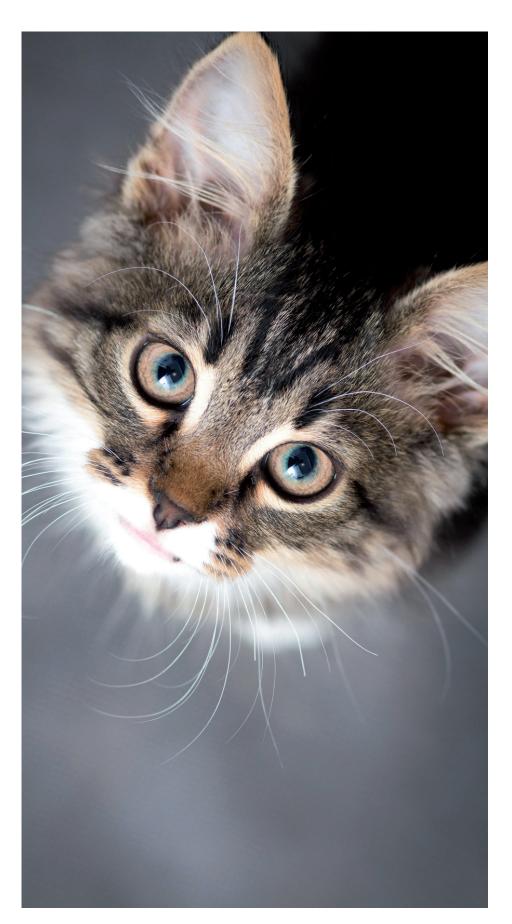
Hospice Care

and the Role of Pet Sitters



An interview with Dr. Mary Gardner

Editor's Note: Dr. Gardner is the co-founder of Lap of Love Veterinary Hospice, the nation's largest organization of in-home hospice and euthanasia veterinarians. With more than 60 veterinarians in 40+ locations around the country, they are the leaders in end-of-life care. Dr. Gardner is not only a practicing veterinarian focusing on geriatric pet care, she is also the company's chief technology officer and is responsible for the design and development of the company's proprietary software, Web presence and all Internet marketing. She is a soughtafter presenter at veterinary medical conferences as well as a speaker on pet-care topics for pet owners. In this article, Dr. Gardner speaks to PSI members about the importance of hospice care, special challenges of feline hospice cases and the role of pet sitters in hospice care.



The WORLD: Before we talk about hospice care for cats, please tell us just a bit about hospice care in general. What is the goal of pet hospice?

Dr. Gardner: The goal of veterinary hospice is to provide a family-centered service dedicated to maintaining comfort and quality of life for the terminally ill or geriatric pet until natural death occurs or the family elects peaceful euthanasia.

The WORLD: What does hospice care entail for a pet?

Dr. Gardner: Hospice care entails many aspects, but most important is educating the owners on their pet's disease or symptoms. As pets age, just like humans, things break down and unfortunately healing and regeneration also slow down. Pets get many diseases just like humans - diabetes, cancer, hypo/hyper thyroid, heart failure, arthritis - even a form of Alzheimer's. Once we educate the owner on the disease and what types of problems the disease will bring to the pet, we, as veterinarians, develop a plan for caring for the pet. This may entail pain medicine, anti-anxiety support, hygiene, appetite stimulants, hydration and changes to the environment to make sure they stay safe and comfortable, just to name a few.

Then we have a conversation about quality of life and how to assess it based on the pet's disease (or ailments), the pet's personality and the family's beliefs. It's really subjective and can differ for each family member. Creating a platform to discuss everyone's concerns, hopes and beliefs can help bring the family onto the same page and alleviate some of the stress about the situation.

We also talk about the dying process – whether that is without the vet's assistance or with euthanasia. Many people do not understand either process and it helps to set expectations so they aren't so scared of either method.

The WORLD: How can a pet owner tell whether to opt for hospice care or in-home euthanasia?

Dr. Gardner: This is a great question because it addresses the misconception of hospice. Hospice is not the opposite of euthanasia. Hospice is simply the care of a pet before the end – regardless of the actual way the pet dies. If owners are against euthanasia and want an unassisted passing, then we can discuss how that passing may feel to the pet or look like to the owner. Most everyone wants their pets to pass on their own (in their sleep) so that we don't have to make that decision. However, if that is the case, we must make sure the pet is properly cared for during the entire process.

Owners should opt for hospice when the pet is dealing with a terminal illness or is severely geriatric and its quality of life has decreased so much that medical attention and extra care are necessary.

Euthanasia is appropriate (whether in the home, which is my preference, or at the vet's office) when the quality of life is no longer what the family wishes for the pet or the pet is suffering.

The WORLD: What are some of the challenges you see for the pet owner with a pet in hospice care?

Dr. Gardner: The biggest challenge for pet owners is deciding "when it is

time." Assessing quality of life is vital at this stage. For those owners who want euthanasia, they need help determining 'when' to call a veterinarian. It is much more than saying, 'When they stop eating' or 'You will know' – because they may not stop eating (many dogs with arthritis may eat on their last day yet they are unable to walk at all) and most owners don't actually 'know' when it is time. They need educated guidance.

Another challenge is simply managing the pet and its symptoms. It is not easy caring for an elderly or terminally ill pet. Many are incontinent, can't walk well, pant and pace all night, vomit or have diarrhea. It takes the entire family and hospice team to support the owner and pet during this time. This is where pet sitting can really help. I can't tell you how many times people do not go out of town for work or vacation when they have an ailing pet. They are either scared their pet will suffer and die when they are away or they simply do not trust anyone else to care for their fragile best friend.

The WORLD: How about challenges for the rest of the care team – veter-inarians and other support people?

Dr. Gardner: My biggest challenge personally is when there is more than one owner involved (husband and wife for example) and they are not in agreement on the care to provide to the pet. You become a makeshift counselor at times. My first job, however, is to be the advocate for the pet. What is best for that pet is my priority.

Support staff challenges can be compliance from the owner. They don't give



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medications properly, they aren't able to keep the pet clean, etc.

End of life is a very emotional time for pet owners and that can bleed into the support team's life. It is easy to get frustrated with the disease and the challenges you face caring for the pet. This can lead to compassion fatigue.

Lots of families ask, "How can you do this every day?" (both hospice and euthanasia) and the answer is simple. It's an honor. Our pets are not just treated as family members, they are our family members. I get to spend my day with loving owners who happily share their pet stories while we get to love up on their furry baby. And there is nothing better than an old dog or cat. Their personalities are so developed and interesting! They just make me smile. I love helping families care for their pets as they become fragile, sick or even ornery as they age! And when the time comes, I am honored to be there for the families as they say goodbye to their furry loves.

I do not suffer from compassion fatique (a huge problem in the veterinary world) but instead I am infused with compas-

sion after every appointment. I'm able to help owners feel empowered that they can care for their pets and make the best decisions possible for them during that time.

The WORLD: Is there anything else about hospice care that should be shared?

Dr. Gardner: I think it is important that we do not judge pet parents with the decisions they make. Some people can manage a very intense disease and

care program while others cannot. It isn't that they don't love their pets – but there are many budgets that get used up in hospice and I don't just mean the financial budget. Time, physical and emotional budgets need to be considered and when one of those is depleted, alternative options should be sought.

The WORLD: So, on to cats. What are the major differences between hospice care for cats and the care of canine hospice patients?

Dr. Gardner: In some ways cats are easier to care for during the end-of-life stage. Most obvious is that they are smaller and lighter (a 50 pound dog that cannot move is challenging)!

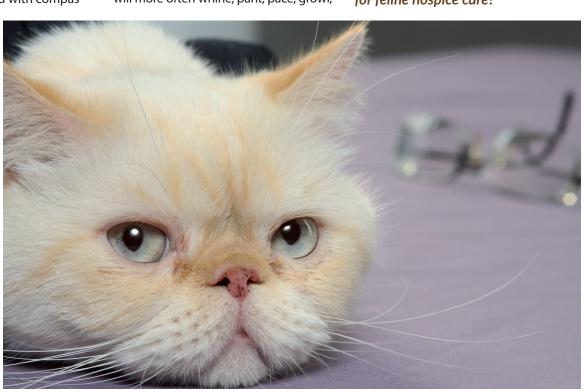
But let's look at the ways they are more difficult. First, they tend to be more difficult to medicate. Second, they often stop eating – which leads to more difficulty in medicating. Third, they typically 'keep quiet.' Behavioral manifestations of pain in a cat is different than a dog. The cat becomes quiet, lays around more, does not interact and will even find quiet places to rest when it is not feeling well. A dog will more often whine, pant, pace, growl,

etc., when it is in pain. I can usually spot pain on a cat or dog but it is difficult for owners - and the cat is much harder. This difficulty to assess pain or discomfort often leads to medical problems being missed by owners. So it's important to really pay attention to the cat as it ages and let your veterinarian know of even the most insignificant change – because it could mean something greater.

When dealing with a cat that cannot be medicated, we can often prescribe medications that are absorbed through the skin (like the ear pinnae) or have medications formulated into a yummy tasting gel like tuna!

Cats and dogs can get the same diseases, however each species is more likely to get a few over the other. For dogs, the number one cause for hospice is mobility issues. Most cats do have arthritis but they are not as affected as much as dogs. You may see them not able to jump on your bed as easily – but rarely do they need a harness like dogs need.

The WORLD: What are the most common causes you see in the need for feline hospice care?



Dr. Gardner: Kidney failure is our number one disease that we see in cats! The kidneys are responsible for filtering toxins, concentrating urine and also producing a hormone that stimulates red blood cell production. When the kidneys don't function properly, cats will get dehydrated, start to feel sick and become anemic. They can also develop oral and stomach ulcers from the toxin buildup. Sub-cutaneous fluids are a huge help as well as pain medicine and other medications, depending on the severity of the disease.

The second most common cause we see is some type of cancer. Nasal tumors, oral tumors, lymphoma and mammary tumors are most common in my practice.

The WORLD: What are some of the special challenges in keeping feline hospice patients comfortable during their last days?

Dr. Gardner: The biggest problem is that they usually always stop eating. Changing food is effective for a little bit. Then adding an appetite stimulant can help, but usually for a small time period. Owners often try to syringe feed (or give fluids via a syringe), but this is dangerous as the pet can aspirate. There is a saying in human hospice that I love: "The body won't eat or drink for a future it knows it doesn't have." There comes a point where they simply will not eat and we have to realize that nothing will change that.

Sub-cutaneous fluids are a huge help in cats with kidney failure, as I mentioned above. But many other diseases prevent the cat from drinking enough – so fluids every day or a few times a week can really give a cat a little boost!

Environment is also important. Keeping litter boxes low to the ground (get rid of the high-walled boxes), multiple boxes around the house, wee-wee pads bordering the box (some cats simply can't get in or think they are in the box when in reality they are not). Stairs so they can get up and down from the couch and bed are wonderfully helpful during this time. Nothing makes



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me sadder than a pet that can't be close to its owner. So making the house friendlier for a sick and dying cat is key.

The WORLD: What role does pain management play in feline hospice and how is it accomplished?

Dr. Gardner: Pain management plays a huge role in feline hospice. Again – cats rarely complain, but we know certain diseases are painful or make cats feel very sick. It is important to have a veterinarian prescribe the best combination of pain relief for the cat. Usually a pain medication plus an anti-inflammatory drug are prescribed.

As mentioned above, we have great ways to reformulate common drugs to make them easier to administer. Acupuncture has been found highly beneficial as well as laser therapy.

It's important to not get too focused on the word 'pain' because many people then do not think of the other symptoms that are not comfortable and decrease quality of life. For example, dehydration, toxin buildup, nausea, malaise. Those can all lead to sufferable conditions and need to be addressed.



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The WORLD: What can pet owners with older cats do in advance to prepare for the possibility of hospice care for that pet?

First – start keeping a diary of their cat's activities, favorite things, things they hate, etc. Write notes every month and look for trends. If they see a decline in activity, appetite or happiness, it may be a signal to an underlying issue.

Second – take pictures and videos of the cat every month. Often, when in the midst of our busy lives, we overlook the subtle changes we see. Pictures may alert you to weight loss, muscle wasting or even a mass that you never noticed. Videos will help owner assess activity and movement.

Third – do not hesitate to take your cat to the vet. About 50 percent of my clients who call me to euthanize their cats have not been to the vet in more than two years. The sad part is, many of those cats could have benefitted from options their vets could have given them. I know that cats don't like to go to the vet. Trust me, I know that! I am a vet and I own five cats – none of them liked coming to work with me. But a yearly checkup could prevent many problems or at least bring awareness to an issue. We may not be able to increase quantity of life, but we certainly can improve the quality of the remainder life.

The WORLD: Is there anything else about hospice care for cats that pet sitters – and pet owners – should know?

Dr. Gardner: Knowing that hospice should not be a depressing time. It's the most important time we have with our pets. Fill it with joy, memories and love. Pets trust us entirely with their lives and also entrust us with the way they pass as well.

The WORLD: And finally, what role do you see professional pet sitters playing on a hospice care team and what do you recommend for PSI members?

Dr. Gardner: Professional pet sitters have a huge role in the hospice team. As I mentioned earlier – owners will not leave town when they have an ailing pet. They must have someone they can trust to care for their pets. Also, many pets in hospice need care during the day while their parents are at work. Most need medications more often, or to be let outside more frequently, or simply to have someone there so they aren't nervous. Professional pet sitters should learn proper techniques for administering medications orally as well as subcutaneously. This would be a huge benefit to owners who have pets on multiple medications. Owners who have a pet in hospice are more sensitive to their pet's well being - catering to that is key. Sending texts, pictures, videos, etc., are priceless.

Professional pet sitters can be one of the most important hospice team members after the veterinarian and pet parents!

The WORLD: Thank you, Dr. Gardner! Your insight, information and advice are just what professional pet sitters need to educate themselves to be that critical hospice team member you have described. psw

