BEYOND THE CLINIC

End-of-Life Options: Understanding Palliative and Hospice Care Services

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"How do I know when it's time? Is there anything else we can do? What would you do if this were your pet?"

Anyone in the veterinary profession has likely heard some variant of these questions from families with senior or chronically ill pets. Helping clients to navigate end-of-life decision-making is a crucial part of clinical veterinary work, but the conversations leading up to euthanasia are often more stressful for veterinarians than the act itself.[1] Discussing palliative and hospice care options with clients can help to reduce the stress of end-of-life conversations and care for both veterinarians and clients alike.

General practitioners should understand how to maximize palliative and hospice care for patients and clients. This requires understanding what this type of care entails, the limitations of offering this care in general practice, and the advantages of partnering with a certified palliative and hospice care veterinarian.

UNDERSTANDING PALLIATIVE AND HOSPICE CARE

"Hospice and palliative care is *not* about prolonging suffering," says Leigh Ann Collins, DVM, CVA, CPEV, regional director of Lap of Love. "It's about helping pets live better, longer."

While palliative care and hospice are often used interchangeably, the terms describe distinct types of veterinary care.

Palliative care focuses on relieving or reducing symptoms of disease and can be a part of treating both curable and chronic or terminal diseases.[2] Palliative care is an evolving area of practice. While many veterinarians have heard the mantra that "nothing should die without prednisone," palliative care goes beyond this. The goal is to prioritize patient comfort while also supporting the emotional, physical, and spiritual needs of the pet family.[2]

"Palliative care should begin early [in an animal's disease]," says Lynn Hendrix, DVM, CHPV, owner of The Palliative Vet and Beloved Pet Mobile Vet, noting that studies in human medicine have shown that the early introduction of palliative care supports the patient and family and can even extend life.

Hospice is an extension of palliative care in end-stage disease.[2] Hospice care may be elected when a patient's disease is no longer responding to treatment or a pet family decides not to pursue definitive treatment or further diagnostics.[3] Hospice care includes palliation of the patient's clinical signs and guiding the family through end-of-life decision-making. This care extends

to the point of death by euthanasia or hospice-supported natural death.[2,3]

DEVELOPING A TREATMENT PLAN

Palliative and hospice care plans will look different for each individual patient and pet family. These treatment plans take into account both patient and client factors, including[3]:

- the physical needs of the patient, which include managing pain and other clinical signs of the disease (e.g., nausea, diarrhea, inappetence, pruritus, mobility)
- the social wellbeing of the patient, including their ability to interact with the family and other pets
- the emotional wellbeing of the patient, which considers providing mental stimulation, reducing anxiety, and preserving dignity
- client goals for the patient's end-of-life care and beliefs around euthanasia
- client's limitations in their physical, emotional, and financial ability to provide needed care

"Hospice and palliative care is about information dissemination," Collins says. "Families need to understand what's going on with their pet and how [their] particular disease progresses so they can make the most informed decision for themselves as well as their pet." This includes discussing the available diagnostic and treatment options, the overall prognosis, the anticipated disease trajectory, and clinical signs that indicate approaching death.[3,4]

Hendrix notes that palliative care plans include "building a daily plan for clients, so they know what to do, and then creating a crisis plan and kit for clients." She suggests having handouts with disease information and trajectories, working with clients to develop advanced directives, and providing quality-of-life scales to help clients more objectively evaluate their pet's condition.

When a patient moves into hospice care, veterinary teams should discuss what the pet's death will look like for the client. This includes educating the client on the dying process, including humane euthanasia and natural death; aftercare options; and grief support. Most veterinary professionals do not have training on providing mental health or grief support to clients; therefore, providing outside resources for pet loss can be helpful for clients. This support should start before the pet dies and include discussions of anticipatory grief and caregiver burden.

COLLABORATION WITH HOSPICE AND PALLIATIVE CARE VETERINARIANS

Palliative and hospice care can be offered by general practitioners, but the conversations required to develop individual care plans are time-consuming. Instead of trying to do everything in the clinic, consider providing a referral to an experienced palliative care veterinarian, just as you might recommend referral to a surgeon for repair of a cranial cruciate ligament rupture or an ophthalmologist for a complicated corneal ulcer.

"There is a wide variety of education and services provided," Hendrix says, noting that some veterinarians provide palliative and hospice services while others provide in-home euthanasia services only. General practitioners should understand what services are offered by any end-of-life veterinarians they refer clients to.

While there is currently no boarded specialty for hospice and palliative care in veterinary medicine, certification is available through the International Association for Animal Hospice and Palliative Care.[5] This certification requires approximately 100 hours of training through on-demand modules, live continuing education and communication training, completion of a case report, and a final examination.[5]

In most cases, palliative care veterinarians work collaboratively with general practitioners to care for pets and their families. "Most [palliative care veterinarians] are not equipped to perform diagnostics or treatments beyond prescribing or adjusting medications," Collins says. Establishing clear communication between the general practitioner, palliative care veterinarian, and client is essential for success.

"Hospice and palliative care should be a collaborative effort throughout the pet's journey," Collins says. "Our goal is to protect and strengthen the bond between the general practitioner and the family, ensuring they receive consistent, compassionate care."

INTRODUCING PALLIATIVE CARE TO CLIENTS

"Hospice and palliative care often seem to be treated as 'afterthoughts' or 'last resorts,'" Collins says. "We should be incorporating these topics into senior or geriatric wellness visits, ensuring that families hear this information multiple times, ideally before they ever need it."

Additional Resources

The International Association for Animal Hospice and Palliative Care website hosts a list of palliative- and hospice care–certified providers and resources.

- **Find a provider:** go.navc.com/45LBSd7
- **Access resources:** go.navc.com/44tIc6K

Hendrix notes the importance of word choice when talking about palliative and hospice care with clients. "The term *hospice* has a negative connotation with the general public," she says. "People associate the term *hospice* with death and dying." Pet owners may respond to the term with a fight, flight, or freeze response, which manifests as becoming distant or angry or seeming to be in denial.

When introducing the idea of palliative or hospice care to pet owners, Hendrix suggests using the term *comfort care*. In her experience, this terminology helps to keep clients more open to the discussion and improves compliance when providing recommendations around palliative care options. She adds, "gently offering to keep a pet comfortable is the desire for most people."

Referring patients to a palliative and hospice care veterinarian can help to decrease stress for general practitioners, especially in cases where clients are not ready or willing to euthanize a patient with a progressive disease. Instead of worrying that a patient is leaving the clinic to go home and suffer, the general practitioner can find comfort in knowing the pet's comfort is being prioritized and supervised by a colleague with specialized training and knowledge. TVP

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