

The Multimodal Approach to Palliative Care

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What is the Palliative Approach to Care?

When providing patient care, we can approach it in a variety of ways. In animal hospice situations requiring palliative care, the best approach is the one that alleviates suffering, both physical and mental, as completely as possible. We use a variety of tools, such as medicine, supplements, physical therapies, and more to manage a patient's symptoms. If one does not work, we switch to another and if necessary, such as with painful conditions, we may start with more than one approach right away. It all depends on our patient's needs and good medical support to stay ahead of discomfort and distress. We anticipate the patient's needs early on and prepare the team to act swiftly and efficiently.

And of course we must care for the entire patient. Animal hospice patients include both the pet and the caregiver. In this paper, we will explore the emotional needs of the pet and caregiver as well as the physical needs of the pet. There is much to be learned on these topics, but here we will focus on more common situations and symptoms.

Emotional Needs of the Patient

Animals have emotions and animals therefore have emotional needs. Near death, these emotions may be tested as an animal senses physical changes. It is unclear if animal can predict its impending demise. However, if quality of life and normal daily routines begin to dwindle, some of the Five Freedoms may be in jeopardy and compromise emotional stability.

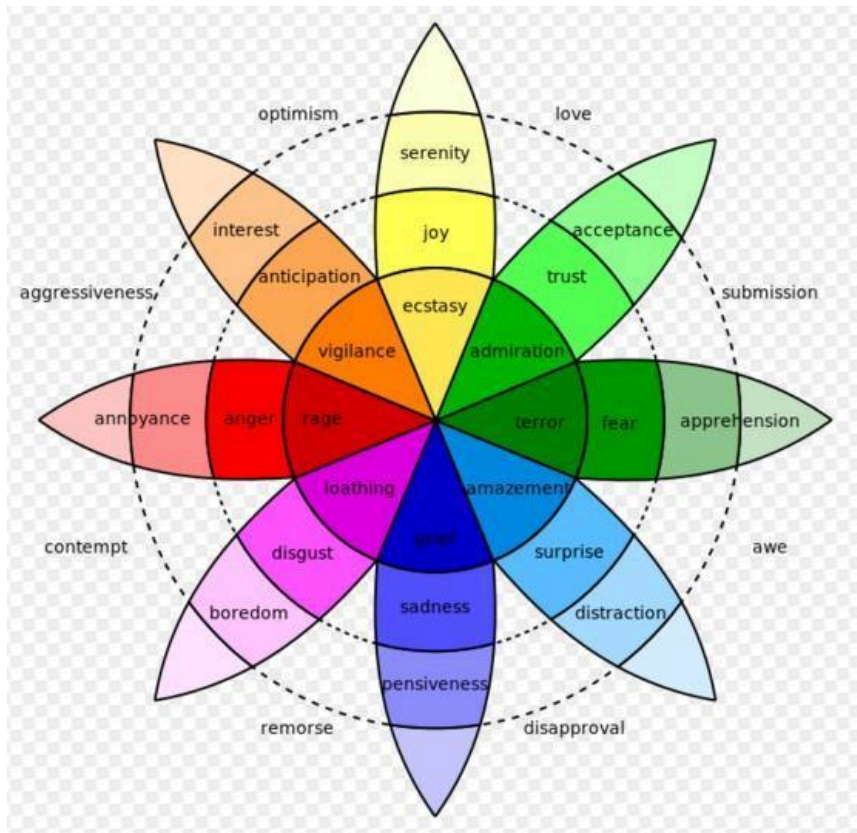
The Five Freedoms

Freedom from hunger and thirst
Freedom from discomfort
Freedom from pain, injury, and disease
Freedom to express normal behavior
Freedom from fear and distress

These Five Freedoms are well known in veterinary ethics and animal welfare. Caring for animals' emotional wellbeing is as important as caring for their physical symptoms. Giving attention to animals' emotional wellbeing involves doing whatever possible to both prevent and alleviate their negative emotional states (through managing pain, reducing sources of anxiety, minimizing boredom and isolation, etc).

We do what we can to maximize happiness through attention to the need for mental stimulation, social interactions and affection, good foods, comfortable environment, opportunities for play, and so forth. What exactly provides pleasure will be unique to each individual; thus, careful attention might be placed on the unique life experience, personality, and preferences of the animal patient. Because emotional states are temporal and shifting, quality of life assessments can be used and should follow a trajectory over time, and seek to understand and value all past, present, and future experiences.

In short, we want to keep them happy, socially engaged if they want, able to sleep deeply, and satiated until THEY choose to longer take in food or water. This is an important concept in end- of-life care. These Five Freedoms pertain to animals requiring the Five Freedoms for happiness. In the dying process, animals typically lose interest in food and water, they do have disease, and no longer express “normal” behavior.... rather they will have a “dying” behavior. This is important to keep in mind in our decision-making regarding euthanasia vs more palliative care.



https://simple.wikipedia.org/wiki/List_of_emotions#/media/File:Plutchik-wheel.svg

What emotions do animal's experience? Experts have different opinions on this, and we certainly expect to learn more through research in the near future, but most agree on the second ring (from the center) of emotions shown here: joy, trust, fear, surprise, sadness, disgust, anger, anticipation. We could certainly move beyond these into some of the other spaces: love, interest, boredom, etc. Obviously, we want to strive for the positive emotions and minimize the negative. The negative emotions will come from negative experiences so even more reason to take a multimodal approach and manage all symptoms deeply and thoroughly as best we can.

Let's take the example of an old male Labrador Retriever. He's been slowing down for some time, slowly decreasing his appetite, and finding it more difficult to be near his family due to mobility issues. He's been very social all his life and his family is worried he will get lonely and stressed if he is unable to be with them. Our role as his palliative care guide is to try to keep him feeling joy, love, trust, serenity, interest, etc. We are going to try to limit sadness, fear, boredom, anger, and other negative emotions. One major way we do this is by meeting his physical needs; food if hungry, water if thirsty, mobility support so he can safely maneuver in his usual way. We provide medical management of anything that brings discomfort.

Another way to help find emotional stability is through the use of calming aides. Some common ones include:

- Essential oils: lavender, sandalwood, Peace and Calming, frankincense
- Melatonin
- Composure chews (Vetriscience)
- Nutricalm (Rx Vitamins)
- Rescue Remedy (Bach)
- Harp music
- Pheromone diffusers
- Spaces for sanctuary
- Pharmaceuticals

These calming aids can be used alone or together in conjunction with what you are using for physical support. With respect to the multimodal approach, we can approach the needs of the pet through smell, sound, and other sensory stimuli. One of my personal favorites is space to get away and find true rest. Busy households are challenging for dying patients who need space for transitioning. A quiet nook somewhere can bring great relief.

The importance of emotional health and living free of stress and anxiety cannot be overlooked, especially with palliative care resources available to relieve them. Managing the physical needs helps us manage the emotional needs. If a time comes when overwhelming anxiety builds and any pet's emotional needs are too great, euthanasia can be chosen to relieve it.

Emotional Needs of the Caregiver

There is much to say about this topic, but with the limits of this paper, I will touch on just a few basic ideas. Our caregivers, being part of the hospice patient, also have emotional needs and need to be included in the multimodal approach. When they are faced with a pet's life-limiting illness and eventual death, a myriad of emotions and feelings will present.

End-of-life experiences and the eventual loss of a beloved friend will bring feelings of sadness, fear of the unknown, fear of death, fear of being alone, and more. They may feel anger over the sickness, anger at how the sickness is affecting their pet, anger for improper disease management, and more. And anticipation. This is an emotion that can prevent caregivers from living in the moment and rather have them living in the future in anticipation of the loss. All of these and more are a normal part of grief and certainly are allowed and shouldn't be suppressed.

With a good and supportive animal hospice experience, we hope our caregivers feel trust in us and the journey, serenity throughout, joy in the gift of every day together, and of course love. If all goes well, caregivers can be even surprised at how beautiful the end of lifetime can be.

It doesn't have to be scary at all. Regular communication and education should help reduce fear and anxiety. Kindness and empathy are always appropriate. Keeping their pet comfortable and enjoying life is a part of our multimodal approach. AND one of my favorite ways to support families in hospice is to give them calming aids like I do my pet patients. Harp music is commonly reported back to me as their favorite calming tool because everyone receives its benefits.

Physical Needs of the Patient

A dying pet will exhibit various symptoms. Some can happen gradually over the last 6 months of life or right at the end during the active dying process. In preparation, we can learn the means to palliate each symptom. Our multimodal approach tells us to try a variety of things such as medicine, physical modalities, diet changes, and complimentary therapies. Listed below are multimodal remedies to a few of these symptoms.

Common physical symptoms near the end of life include:

- Diarrhea
- Constipation
- Sores
- Dehydration
- Infections
- Fever
- Anxiety
- Pain
- Nausea
- Dyspnea
- Incontinence
- Poor hygiene
- Loss of mobility
- Loss of the senses: vision, hearing, taste, smell

Nausea

Alternative therapies

Homeopathy, herbs (catnip and others), oils (peppermint, ginger, patchouli, DiGize)

Medications

Antacids, antihistamines, probiotics

NK1 receptor antagonist (maropitant)

Dopamine receptor antagonist (metoclopramide)

Diet

Low allergen, bland, withhold, etc

Physical therapies

Acupressure, acupuncture, removal of "disturbance"

Constipation

Alternative therapies

Homeopathy, herbs (slippery elm, dandelion, senna), oils (ginger, peppermint, basil, fennel)

Medications

Stool softener, laxative, probiotics

Fluid therapy

Diet

Increase in fiber, increase in moisture, consistent diet

Physical therapies

Increase in activity, acupuncture, massage, enemas, rectal stimulation

Urinary Incontinence

Alternative therapies

Homeopathy, herbs, oils (cypress)

Medicines

PPA, estrogen, bladder support supplements (Vetriscience bladder support, RxVitamins Cranberry Rx)

Diet

Low sodium, rich in omegas

Physical therapies

Acupuncture, chiropractic, surgery, diapers, pee pads, doggy door

Summary

Approach every case considering both the physical and emotional needs. Our animal hospice patient, consisting of both the pet and caregiver, is complex and will need creative support. We provide care by looking at the big picture and honing it down to what will make the biggest impact, all the while remaining open to trying various things at once. Try for plan A, but have plan B and C at the ready. When required, try A, B, and C all at once. This will help minimize suffering and keep the caregiver(s) feeling they are in more control. If caregivers are unsure about offering too many multimodal modalities at once, stand firm on those that will make the biggest difference and provide the most comfort.

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