

# Palliative Care for Dogs & Cats – How You Can Help

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- BS in Animal Science: Oklahoma State University - 1997
- DVM: Oklahoma State University - 2002
- Small Animal Rotating Internship with California Animal Hospital – Dept of Surgery – 2002 to 2003
- ECC clinician with ASEC (W. LA) & All Creatures ER Center (Newhall, CA) – 2003 to 2012
- Opened Peaceful Pets In-Home Services – Sept. 2011
- General practice vet in Santa Clarita Valley – 2012-2019
- Full time with Peaceful Pets – 2019 to present
- Certified Hospice Palliative Care Vet (CHPV) certification - 2020
- Animal Aromatherapy Specialist certification - 2023



# Learning Objectives

- To understand the definition of palliative care for dogs and cats
- To understand when palliative care can/should be initiated
- To understand the modalities that can be incorporated into palliative care
- To learn how to best discuss palliative care recommendations with clients
- To learn about palliative care examples for dogs and cats
- To understand the numerous QOL scales available to clients
- To understand when palliative care becomes hospice care

# Veterinary palliative care & hospice

- Palliative care (and hospice) is a “newer” discipline in veterinary medicine, but noteworthy since 1995
- Principles have been adopted from human medicine (minus humane euthanasia)
- *Pawspice* was introduced to vet med by Dr. Alice Villalobos in 2009 and her QOL scale in 2010
- International Association for Animal Hospice and Palliative Care (IAAHPC) was established in 2009
- First IAAHPC conference was held in 2011 in Ft. Worth, TX with 44 attendees





# Veterinary palliative care & hospice

- Animal Hospice & Palliative Care (AHPC) Certification program launched in 2016 – **CHPV & CHPT**
  - Certification is 100 hours of coursework designed to enhance the knowledge and skills of veterinarians, licensed veterinary technicians, and nurses in the field of animal hospice and palliative care.
- **Hospice and Palliative Care for Companion Animals** textbook was published in 2017 (2<sup>nd</sup> edition in 2023)
- Animal Hospice and Palliative Care (AHPC) Social Work Certificate program launched in 2018
- Increased number of hospice/palliative care vet services nationwide



# What is palliative care?



- Treating the symptoms of a condition, rather than treating the underlying condition itself
- The World Health Organization defines palliative care as "the active total care of patients whose disease is not responsive to curative treatment"
- Goal of palliative care is improving, or at least maintaining, QOL without necessarily slowing the progression of a disease or improving lifespan
- It is a PHILOSOPHY OF CARE, not a specific protocol of care, thus there is flexibility in delivery
- Depending on the pet and its circumstances, palliative care typically lasts from days to months

# When is palliative care initiated?

- Diagnosis of life-limiting disease
- Decision not to pursue curative treatment
- Curative treatment has failed
- Symptoms of chronic illness that interferes with the pet's routine or QOL
- Curative treatment has failed
- Pet requires long-term intensive care
- Progressive illness or trauma with associated health complications



# When is palliative care initiated?

- YOU are already doing PALLIATIVE CARE!!!!
  - CRF, CHF, OA, dementia, degenerative myelopathy, etc....
- Palliative care requires an understanding that treating symptoms is DIFFERENT from curative treatment of the disease
- Requires planning, forethought, and coordination among the family and the veterinary healthcare team
- It requires creative thinking about what the pet AND the family need
- Palliative care does NOT have to require expensive/fancy equipment





# Modalities of palliative care

- **Acupuncture ( & acupressure)** modifies the perception of pain by sending signals to the brain and nervous system, releases painful trigger points in muscles, and reduce abnormal nervous system activity
- **Massage** (trained provider or pet owner) can lessen discomfort and stress of muscles and joints
- **Cold laser therapy** modulates the nervous system to reduce pain, increases circulation, and decreases inflammation
- **Extracorporeal Shockwave Therapy (ESWT)** uses shockwaves to treat chronic, painful conditions of the musculoskeletal system



# Modalities of palliative care

- **Physical therapy/Rehabilitation** can help improve stability as well as prevent and manage pain



- **TENS (Transcutaneous Electrical Nerve Stimulation)** provides pain relief by stimulating nerve fibers and blocking pain signals to the brain
- **Palliative radiation therapy** is an option for cancer patients that can help improve their QOL by relieving pain and other cancer related symptoms

# Modalities of palliative care

- **Palliative surgery** is an option typically for cancer patients to improve QOL
- **Chinese Herbal Supplements: Traditional Chinese Veterinary Medicine (TCVM)** is an effective treatment to help complement current medications and improve pain management
- **CPTG Essential oils** can be used to alleviate various symptoms, such as anxiety, shortness of breath, nausea, feeling of tension



# Discussing palliative care with clients

- Communication & Documentation!!
- Evaluating the pet owner's needs, beliefs, and goals for pet
- Education about disease progression
- Developing a personalized care plan for pet
- Applying palliative and hospice care techniques
- Planning for and providing emotional, knowledge, and practical support for the pet owner and family leading up to and after pet's death





# Animal Hospice Care Pyramid



# Discussing palliative care with clients

## Questions to consider –

- Who is caring for the pet?
- What are typically daily activities? How can these activities be preserved?
- Any mobility challenges? Can these be addressed or overcome?
- Is tumor-reduction surgery a reasonable option?
- How will the progression of chronic disease be tracked?
- Are supportive care treatments “do-able” at home?
- Are there other pets in the house?
- Do they have beliefs that interfere with the choice of humane euthanasia?

# Discussing palliative care with clients

## Communication elements (as per pet-parent)

- Empathic communication and shared decision-making
  - Breaking bad news
  - Clarifying goals
- Managing progressive symptoms
  - Preparations
  - When? discussions
- Advanced directives

## Communication elements (as per vet)

- Empathy and decision-making
- Take time with client communication
- Deliver information in Layman's terms using a gentle tone
- Advanced directives: provide options and hope

# Osteoarthritis



## **“Nani” 12 yr old F/S Cattledog mix**

- Hx: At 10 months old, had right TL amputation after traumatic DBW
- Active dog – lives on 2 acres
- Slowing over the past couple of years, but more trouble rising and becoming more agitated over the past 10 months.
- PE: Decreased flexion and thickening of left carpus with moderate discomfort. Moderate hyperextension of left carpus. Discomfort with extension of both hips and flexion/extension of both stifles.  
BCS 5/9
- Assessment: Suspected osteoarthritis (3 limbs)
- Initial Plan: Carprofen 50 mg PO BID; Adequan 2x/week for 4 weeks, then monthly; Gabapentin 200 mg PO in PM
- Rug runners/yoga mats; controlled walks/play; ROM exercises in all limbs 2-3x weekly; limit time around other pets



# Osteoarthritis




- Recheck 2 months later – owner reports notable improvement, but still seems uncomfortable. Nani is still annoyed with other pets and now noting on/off pacing and panting.
- Added: Copaiba essential oil soft gels BID; Fluoxetine 20 mg PO SID
- Increased Gabapentin to 200 mg BID to TID PRN
- Recheck 1 month later – noting continued improvement and comfort. Less reactive with other pets!

Go  
Nani!



# Quality of Life Scales

- Quality of life (QOL) is a term used to describe a pet's overall physical, mental, and behavioral well-being.
- Subjective vs Objective
- When evaluating a pet's QOL, you can consider things like:
  - Eating and drinking habits
  - Mobility
  - Interests/Engagement
  - Behavior
  - Hygiene
  - Pain and discomfort
  - Respiratory status



# Quality of Life Assessment

MN Pets has compiled the most important aspects to consider when thinking about your pet's end of life decision. We know this is not an easy decision to navigate and every pet is unique, please don't hesitate to touch base with us to discuss results or anything else you may be seeing.

	1 = All of the time	2 = Sometimes	3 = Never	Score 1-3	Running Total
<b>M</b> Mobility	When your pet moves, is capacity diminished?				
	Has your pet lost the ability to move around unassisted?				
	Does your pet struggle to walk on your flooring?				
	Does your pet struggle to groom themselves or stay clean?				
	Is your pet avoiding certain positions or lying down?				
<b>N</b> Nighttime	Is nighttime more difficult for your pet?				
	Has your pet's sleep schedule changed?				
<b>P</b> Pain	Is your pet sleeping or resting in different places than normal?				
	Is your pet exhibiting increased panting, shaking, or limping?				
	Is your pet isolating or hiding?				
	Has your pet's body posture changed?				
	Does your pet react differently when petted?				
<b>E</b> Energy	Has your pet's vocal behavior changed?				
	Is there a known disease process causing pain?				
	Does your pet seem painful if they are able to move?				
	Does your pet seem depressed or sad more often?				
	Does your pet seem weak or feeble and unsteady?				
<b>T</b> Time	Is your pet restless or anxious more often than normal?				
	Is your pet less interested to go about their daily routine?				
	Is your pet unable to play and go on walks?				
	Are the bad days outnumbering the good days?				
	Is your pet asking for something that is unclear?				
<b>S</b> Self	Do you have concerns about responding to an emergency?				
	Do you struggle to manage daily medications and care?				
	Do you have concerns about affording your pet's medical care?				
	Does your pet rely on you to move or carry them?				
	Are you changing your own sleep patterns to attend to your pet?				
Do you feel ready?					


28-60  
Consider Euthanasia

60-75  
Consider Quality of Life Discussion

75+  
Consider Routine Care

https://journeypet.com/quality-of-life-scale-pets/

Quality of Life Scale (The HHHHHMM Scale)	
Pet caregivers can use this Quality of Life Scale to determine the success of Pawspice care. Score patients using a scale of: 0 to 10 (10 being ideal).	
Score	Criterion
0–10	<b>HURT</b> — Adequate pain control & breathing ability is of top concern. Trouble breathing outweighs all concerns. Is the pet’s pain well managed? Can the pet breathe properly? Is oxygen supplementation necessary?
0–10	<b>HUNGER</b> —Is the pet eating enough? Does hand feeding help? Does the pet need a feeding tube?
0–10	<b>HYDRATION</b> — Is the pet dehydrated? For patients not drinking enough water, use subcutaneous fluids daily or twice daily to supplement fluid intake.
0–10	<b>HYGIENE</b> — The pet should be brushed and cleaned, particularly after eliminations. Avoid pressure sores with soft bedding and keep all wounds clean.
0–10	<b>HAPPINESS</b> — Does the pet express joy and interest? Is the pet responsive to family, toys, etc.? Is the pet depressed, lonely, anxious, bored or afraid? Can the pet’s bed be moved to be close to family activities?
0–10	<b>MOBILITY</b> — Can the pet get up without assistance? Does the pet need human or mechanical help (e.g. a cart)? Does the pet feel like going for a walk? Is the pet having seizures or stumbling? (Some caregivers feel euthanasia is preferable to amputation, but an animal with limited mobility yet still alert, happy and responsive can have a good quality of life as long as caregivers are committed to helping their pet.)
0–10	<b>MORE GOOD DAYS THAN BAD</b> — When bad days outnumber good days, quality of life might be too compromised. When a healthy human–animal bond is no longer possible, the caregiver must be made aware that the end is near. The decision for euthanasia needs to be made if the pet is suffering. If death comes peacefully and painlessly at home, that is okay.
<b>*TOTAL</b>	<b>*A total over 35 points represents acceptable life quality to continue with pet hospice (Pawspice).</b>
Villalobos and Kaplan, 2017	



## Pet Quality of Life Scale and Daily Diary

Directions: Use the key factors of quality of life below to help assess your pet's condition. Use the Daily Diary to keep track of your pet's progress. Fill in the appropriate number for each category and then add the numbers from each category for that day. The maximum score is 12 and you can determine your own scale. You can even add categories that pertain to your pet's particular situation. For example, "Respiratory Rate" if your pet suffers from heart failure or lung cancer. You can give half or quarter points if appropriate.

**MOBILITY**  
2 Good Mobility – No difficulty getting around, enjoys walks and going outside  
1 Poor Mobility – Difficulty getting up, hard to get in position to eliminate, short walks only  
0 Bare Minimum Mobility – Needs assistance, pain medication/anti-inflammatory medications do not help.

**INTERACTION/ATTITUDE**  
2 Interacts normally with family and other pets  
1 Some interaction with family and other pets  
0 Hides in the closet or under the bed

**ELIMINATION**  
2 Normal urination and/or defecation  
1 Reduced/irregular urination and/or defecation  
0 None

**NUTRITION**  
2 Good Appetite  
1 Poor Appetite – Hand feeding, needs enticing  
0 No Appetite

**HYDRATION**  
2 Adequate Intake  
1 Poor Intake/ or increased in some patients with particular diseases  
0 Requires Clys (subcutaneous fluids)


**FAVORITE THINGS**  
2 Normal favorite activities, hobbies, etc  
1 Decrease in doing their favorite things  
0 No interest in their favorite things

**FAVORITE SCALE IS AS FOLLOWS:**  
12 – 9 Everything is okay  
6 – 8 Requires intervention  
< 6 = 5 Consider humane tranquilization and euthanasia

### Daily Diary

Date	Mobility	Nutrition	Hydration	Interaction/Attitude	Elimination	Favorite Things	Total & Daily Notes

Visit our online Quality of Life Scale at [www.PetHospiceJournal.com](http://www.PetHospiceJournal.com)

Lap of Love  
VETERINARY HOSPICE  
Dr. Rose Collofford

### How Do I Know When it's Time?

Assessing Quality of Life for Your Companion Animal and Making End-of-Life Decisions

Survey Date: \_\_\_\_\_


Weight: \_\_\_\_\_

Poor Quality of Life

Good Quality of Life

My pet...	Strongly Agree (All the Time) (Severe)	Agree (Most of the Time) (Significant)	Neutral (Sometimes) (Mild)	Disagree (Occasionally) (Slight)	Strongly Disagree (Never) (None)	
Does not want to play	1	2	3	4	5	
Does not respond to my presence or does not interact with me in the same way as before	1	2	3	4	5	
Does not enjoy the same activities as before	1	2	3	4	5	
is hiding	1	2	3	4	5	
Disorientation/behavior is not the same as it was prior to diagnosis/illness	1	2	3	4	5	
Does not seem to enjoy life	1	2	3	4	5	
Has more bad days than good days	1	2	3	4	5	
Is sleeping more than usual	1	2	3	4	5	
seems dull and depressed	1	2	3	4	5	
seems to be or is experiencing pain	1	2	3	4	5	
is panting (even while resting)	1	2	3	4	5	
is trembling or shaking	1	2	3	4	5	
is vomiting and/or seems nauseous	1	2	3	4	5	
is not eating well - (may only be eating treats or only if fed by hand)	1	2	3	4	5	
is not drinking well	1	2	3	4	5	
is losing weight	1	2	3	4	5	
is having diarrhea often	1	2	3	4	5	
is not urinating well	1	2	3	4	5	
is not moving normally	1	2	3	4	5	
is not as active as normal	1	2	3	4	5	
does not move around as needed	1	2	3	4	5	
needs my help to move around normally	1	2	3	4	5	
is unable to keep self clean after soiling	1	2	3	4	5	
has coat that is greasy, matted, or rough-looking	1	2	3	4	5	
How is my pet's overall health compared to the initial diagnosis/illness?	Worse	1	2	3	4	5
Current Quality of Life (taken "X" along the line that best fits your pet's quality of life)	Poor				Good	

Much of this document has been adapted, with permission, from the following sources: The HHHHHMM Quality of Life Scale: Dr. Alice Villalobos; Quality of Life Survey: Dr. David Weil; End-of-Life Values and Goals worksheet, University of Tennessee Veterinary Social Work Department

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Honoring the Bond  
[vet.osu.edu/honoringthebond](http://vet.osu.edu/honoringthebond)

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# When palliative care becomes hospice care

- Open dialogue with pet owner
- “It’s an APPROPRIATE time”
- The goal is to make a pet's final days or weeks more pleasant with the proper use of pain medications, dietary strategies and human interaction
- Consider sending home a “Comfort Kit”
- Humane euthanasia vs natural death
- Euthanasia: in-home vs in-clinic
- Provide clients with resources for grief management (pet owner, children, other pets)



The seemingly easiest and most sensible rule for doctors to follow is: always fight. Always look for what more you can do...But our fight is not always to do more. It is to do right by our patients, even though what is right is not always clear.

Atul Gawande, MD, MPH



# References

- VCNA: SAP—Palliative Medicine and Hospice Care. 2011;41(3).
- Shanan A. *Hospice and Palliative Care for Companion Animals: Principles and Practice*.
- Lam WWT, Fielding R, Choi LY. Optimizing palliative care and support for pets -perspectives of the pet-parent and the veterinarian. *Front Vet Sci*. 2023 May 19;10:1162269. doi: 10.3389/fvets.2023.1162269. PMID: 37275606; PMCID: PMC10235628.
- End-of-Life Care and Pawspice: Caring Beyond a Cure. Robin Downing, DVM, MS (Bioethics), DAAPM, DACVSMR, CVPP, CCRP

Thank  
you!!



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IG: [peacefulpetservices](https://www.instagram.com/peacefulpetservices)

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