

From autumn to winter: pets' end-of-life journeys



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Sieske Valk MSc, discusses some of the considerations for VNs and the wider team when encountering clients with pets nearing the end of their lives

GOING through a pet's end of life is not only hard on its guardians, but also on the veterinary team.

Having to deal with euthanasia decisions, the rollercoaster of emotions of the humans who care for pets and the fact that you can't save them all due to various reasons leads to high occupational stress. Veterinary nurses suffering from moral distress, compassion fatigue and burnout is a common sight in practice¹.

On the flip side, clients walk away from euthanasia and often don't return. Whether they are traumatised, or contented, with how the euthanasia procedure went, they often find it too painful to set foot into the veterinary surgery and face the same people who have "put their beloved friend to sleep"^{2,3}.

For these reasons and many more, it's very important to start end-of-life communication with pet guardians much earlier than we are currently doing, to enable an empowered and beautiful story ending.

What role do VNs (and receptionists) play in the autumn of a pet's life?

In an ideal world, every veterinary clinic would have a social worker who can emotionally support families through

the autumn of their pet's life. But in the real world, you as nurses have been given the intuitive power to hold space for a patient's well-being and its family. It's you they turn to for comfort, to ask questions about what to say to the kids or whether it's weird they feel sadder about their pet's passing than their Aunty Jo's.

Clients are more inclined to confide in you that they are struggling. That could be about the practical care for walking their heavy dog with osteoarthritis, giving their spicy cat oral medication multiple times per day, paying the veterinary bills or coming to an agreement about the well-being or euthanasia of their pet.

Being part of a family's journey with their pet can be experienced as an honour, yet veterinary nurses feel the weight and burden pressing on their shoulders when a client is sent home feeling helpless and confused. Empowering families to make that journey as beautiful, in control and dignified as possible might just be the solution you need to stay in the job and continue doing what you (used to) love.

When to start end-of-life conversations

Preferably, we would start talking about ageing pets' journeys when they are still in their prime; for example, your

Assessment	Link
Autumn Animals QoL assessment	www.autumnanimals.com/quality-of-life-assessment
Lap of Love QoL assessment	www.lapoflove.com/quality-of-life-assessment
Grey Muzzle app	Available in Google Play and App Store
Feline Grimace Scale app	Available in Google Play and App Store
Digitail app for Food, Mood and Loo diary	Available in Google Play and App Store

clinic can introduce a nurse clinic for ageing pets where the focus will be on preventive diagnostics such as blood pressure measurements, osteoarthritis pain management and cognitive well-being. This will signal that, indeed, pets also suffer from the same age-related diseases as humans do and give the client more face-to-face time with a veterinary professional before the pet gets ill.

I would suggest performing a quality of life (QoL) assessment with the pet's guardian, such as the ones shown in **Table 1**, discussing the findings, and setting up a follow-up plan (for example, arranging a referral note for manual therapy, acupuncture or pain-relieving injections, or an alternative is the client could perform the QoL assessment monthly to monitor progress).

I have found that follow-up calls are paramount for a continued bond with the guardian, and increase the likelihood of them going ahead with treatment.

QoL assessments are great tools for starting a conversation about the variety of ways certain aspects of life have an impact on the pet's well-being

and that of the whole family. It's not just about whether they are still eating and keeping themselves clean. A good QoL assessment also asks tough questions, such as: "What is your line in the sand?"

In his must-read book *Being Mortal*⁴, Atul Gawande discusses the case of a few states in Canada where the local government started sending social workers to visit people around the age of 60 to start a conversation about their wishes for when they grew older. These states have shown lots of older people don't like the idea of resuscitation, but need to be intensively cared for. Therefore, they have put better plans in place for their end of life.

Ryan Sutherland agreed: "Transparent, realistic and sensitive end-of-life conversations can help patients maintain autonomy and dignity in the dying process and increase their quality of life as they near death(...) can alleviate emotional stress and physical symptoms, prevent invasive, costly, unnecessary, and unwanted care, aid grieving families through the bereavement process and increase patients' satisfaction with end-of-life care provisions."⁵

What makes Fluffy's life worth living?
What is on Fluffy's bucket list?
How do you feel about euthanasia?
Would you like Fluffy to pass away peacefully in their sleep? (This gives a good intro into explaining how euthanasia works)
What questions do you have for me or the veterinarian about Fluffy's end of life?
Shall I talk you through the euthanasia process?
What would you like to happen with Fluffy's body after they have passed away?
Who are Fluffy's favourite people? (this can be other animals or humans, no matter their age).

It's almost as if making people ask themselves tough existential questions empowers them to be proactive and take control of the narrative, rather than going with what is expected from the health care industry, which is maintaining life for as long as possible.

By implementing QoL assessments with our veterinary clients early on in a pet's life, we are empowering them to take proactive care of their pet and start the conversation with other family members much earlier to discuss what makes their pet's life worth living.

It's important to have regular check-ins (for example, a short monthly telephone call can be included in a wellness plan), during which you can start asking the more difficult questions (**Table 2**).

At a certain point, when it looks like a pet's life is coming towards its crescendo, it's useful to schedule a face-to-face consultation with all of the pet's guardians where you can sit down with them and discuss options and answer all their questions, no matter how silly they might seem. It's also a good opportunity to discuss the euthanasia procedure. The pet doesn't even have to be present for this.

A big chance exists of tears being shed during this consultation, but an even bigger chance will present that fears are dispelled and questions are answered. A lot of power comes with knowledge, and I have found most people are pleasantly surprised by how peaceful and, more importantly, not scary, the euthanasia process can be. This is also an opportunity to discuss after-passing wishes or to give the client a leaflet of the crematorium you work with so they can have a look at it at home, and decide what kind of after-passing care they want for their pet before the actual euthanasia has happened.

During these conversations, it's very important to actively listen and to practise "WAIT" (which stands for **Why Am I Talking**).

Humans are generally uncomfortable with silence during conversations, and we jump in to fill them up. Yet, silences are necessary to let others settle their thoughts, digest something they just said or have been asked, and process feelings⁶. When we jump in to fill the silence, we disallow them to make their own decisions or come to terms with harsh truths.

As a doula, I work with the assumption that most people are perfectly capable of solving their problems if only they are given the space and tools. This is why I allow silences to occur after asking a (sometimes difficult) open question – a question that can't be answered with an easy yes or no.

It's equally important to not impose your feelings or experiences on the client. Humans often try to relate to a person or client by saying something like: "I know how you feel, I went through the same thing last year with my pet." However, by saying this, you not only assume to know what a person is feeling, but you're also taking away the attention from their grief and pulling it towards yourself. It takes the opportunity away from the client to sit with their feelings.

Table 3 shows a few examples of things that are often said and done around pets dying, and ways to improve them.

A welcome benefit of these practices is that you're not taking on the burden of relieving suffering and carrying a difficult conversation, something that empathic people are inclined to do. Instead of empathising, we show compassion that "(...) moves beyond empathy. You'll be learning how someone feels by becoming a neutral ally and witness. When showing compassion, we make no assumptions, give adequate safe and boundless space to explore these feelings for themselves"⁷.

Accepting that people must go through their own emotions, and can do so when given space, will help you to create some boundaries and, ultimately, not burn yourself out. Adding a solid self-care routine around these consultations will support you in this role of facilitating difficult conversations.

How do we know what (not) to say and do?

As veterinary nurses, you need to be able to know and care for several animal species, including humans. Even though end-of-life care is a rather specialist area, you deal with it weekly, if not daily. Some resources are listed in **Panel 1** which range from a quick bedtime read to an easy listen on your commute and full CPD courses to learn more about the subject, so that you feel comfortable

Nay	Yay
They are suffering.	They are in discomfort.
You have made the right decision.	We as a team have made the right decision.
I know what you are going through.	I have no idea what you must be going through. Would you like to share your feelings with me?
Fluffy is not suffering anymore	By letting Fluffy go, you have shown them the biggest and most difficult act of love.
They are in a better place now	Do you believe Fluffy has gone somewhere even nicer?
You were so lucky to have spent x number of years together.	There's never enough time with our beloved pets. But what a good job you did, taking such good care of Fluffy all this time.
Send a standard sympathy card.	Write a personal note or anecdote about their pet on a sympathy card.
No follow-up with the client.	Give them a short call a few days after the euthanasia consultation to see if they need mental health or grief support.

Panel 1. Resources to assist veterinary teams in end-of-life care

- VETgirl podcast "The environmental impact of pet burial with pentobarbital toxicity" (bit.ly/48x50x5)
- Francesca Lynn Arnoldy's book *Cultivating the Doula Heart: Essentials of Compassionate Care* (bit.ly/485WVVE)
- Euthabag free CPD webinars on the subject of euthanasia and aftercare (bit.ly/3thaOS6)
- Blue Cross pet bereavement support course (bit.ly/3GHBpLc)
- University of Vermont end-of-life doula for companion animals course (bit.ly/3Tp3oXK)
- The International Association for Animal Hospice and Palliative Care's certification programme (<https://iaahpc.org/certification>)

guiding your clients through the autumn of their pet's life.

If it's available to you, I would highly recommend visiting your local pet crematorium to witness the process of aftercare and talk to the often wonderfully caring people who work there. If you have children, why not bring them along? They are often excellent at asking interesting questions you might have not thought of before. Being able to tell clients what happens to their beloved pet's body after it has passed away helps clients to trust in the process.

And finally, when you're lost for words and don't know what to do, it's usually enough to just sit with a grieving person and let them cry.

If you would like to learn more about end-of-life communication, supporting people through euthanasia and grief, or how to improve your self-care during difficult times, contact me via hello@autumnanimals.com



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References

1. Foote A (2020). Moral distress, compassion fatigue and burn-out in the veterinary practice. bit.ly/3Rr5gMG
2. Veterinary Practice (2019). Improving the euthanasia experience: How can we increase the number of clients that return to a practice after euthanasia? *Veterinary Practice*, bit.ly/48gqW55
3. Mason JA. 10 dos and don'ts of euthanasia, veterinary webinar available at bit.ly/3t6Weg4 or bit.ly/3RloEED
4. Gawande A (2014). *Being Mortal: Illness, medicine and what matters in the end*, Profile Books, London.

Sieske is the founder of Autumn Animals, a veterinary hospice organisation providing holistic support for pets and their families. Sieske has experience working as a veterinary nurse in the Netherlands and in climate change adaptation internationally. She's also an end-of-life doula for companion animals and is passionate about guiding families through the autumn of their pets' lives..