Hospice Care for Pets – Overview – Part 1

Providing hospice care for pets as they approach their end of life is a relatively young discipline within veterinary medicine. Although the foundational principles of veterinary hospice care are derived fairly directly from those of human hospice care, there are some critical differences between providing hospice care to a human family member and providing hospice care to an animal family member. It is appropriate first to have an understanding of how human hospice and end-of-life care began and evolved before turning attention to hospice and end-of-life care for pets.

What were the origins of human hospice and end-of-life care?

“Hospices” were originally charitable places for travelers on long or difficult journeys to find rest and shelter. Typically, such travelers were on pilgrimages to sacred places and shrines. Hospices that focused on care for the incurably ill emerged during the 11th century and were often overseen by religious orders. In the 19th century, hospice care shifted focus specifically to the dying. Dame Cicely Saunders, an activist nurse, is credited with defining and implementing hospice as we know it today, founding St. Christopher’s Hospice in south London in 1967. Currently, more than 100 countries around the world provide formal hospice care for their citizens.

What exactly is hospice care?

Hospice is supportive care provided to individuals in the final phases of terminal disease so that they may live as fully and comfortably as possible. Hospice care, by definition and as practiced, recognizes that death is a part of life and focuses on maximizing the quality of life for the patient during whatever time remains. Typically, hospice care avoids aggressive interventions, although no specific therapies are excluded from consideration.

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The primary emphases for hospice care are pain management and comfort care. These are very general terms that encompass many different approaches to and interactions with the patient in hospice. For humans, the concept of relief from “total pain” encompasses physical, psychological, social, and spiritual aspects of life. Although a physician ultimately oversees the coordination of hospice care, the key to hospice’s success is an interdisciplinary team that includes medical professionals, trained volunteers, the patient’s family, and the patient working together to honor the patient’s wishes. One
aspect of hospice is palliative care, which generally involves more specific medical procedures, medications, and interventions to contribute to patient comfort (see the handouts “Quality of Life at the End of Life for Your Cat” and “Quality of Life at the End of Life for Your Dog”).

**Where does hospice care take place? Is a hospice like a hospital?**

It is important to understand that hospice is a philosophy of caring rather than a place where that care is delivered. Although there are physical hospice facilities, hospice care can be delivered anywhere—including in the home. It is this philosophy of caring that has been applied to pet end-of-life care in developing principles for pet hospice. The goal is to allow the pet to be comfortable in its own home, with its human family by its side, maintaining a mutually interactive relationship for as long as life remains desirable for the pet—either until death comes on its own or until humane euthanasia becomes the most appropriate choice.

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**How does pet hospice care compare to human hospice care?**

In its delivery, pet hospice care actually closely mirrors human hospice care. The veterinarian coordinates and oversees medical procedures, medication prescription and delivery, and comfort care, but the day-to-day hospice care happens in the home. The single biggest difference between human and pet hospice care is the opportunity veterinarians have to provide humane euthanasia when quality of life for the pet becomes unacceptable.

As with dying humans, pets with life-limiting disease (illness that cannot be cured) benefit from having a system that measures their quality of life day by day (see the handouts “Quality of Life at the End of Life for Your Cat” and “Quality of Life at the End of Life for Your Dog”). Once a baseline quality-of-life measurement is in place, it is important for the human family to partner with the veterinary healthcare team to determine the most appropriate interval for re-evaluation and to create a plan for responding to changes in the quality-of-life measurement—specifically how to define declining quality of life (see “Hospice Care for Pets – Overview – Part 2” for additional details).

With planning, forethought, and honest communication, it is possible to provide a dying pet with very reasonable and acceptable quality of life as the end of life approaches.

*This client information sheet is based on material written by: Robin Downing, DVM, CVPP, CCRP, DAAPM
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