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When the End Approaches

How having a plan - and an honest conversation - respects our canine friends.

by Paula Piatt

f you've let go of a dog, you know. They all have different personalities, different memories, different circumstances. The one thread running through each story is that it's not easy. It's not easy to say goodbye, it's not easy to know when to say goodbye, and it's not easy to reconcile some of those feelings that may linger years later.

With today's advancements in veterinary medicine, the decision can be even more difficult; there are "what ifs" and "why nots" and "could bes" everywhere. At one of the most important times in his life, your pup is looking straight at you for the answer. It can be crushing.

Lisa Moses, a veterinarian and bioethicist at the Center for Bioethics at Harvard Medical School, gets that. For 30 years as a veterinary clinician, she made these decisions with people every day. She knows how hard it is; she's been through it with her own animals.

"These are maybe the hardest decisions a person will ever face in their life. We make some of them for our human family members, but we don't generally have many choices, and we certainly don't have the readily available option of euthanasia," she says. "It's trite to say that there's a lot of things we can do, but the real question is should we do them. I want people to understand that there's a tremendous emotional burden associated with making decisions about end-of-life care and about euthanasia.

I don't think people realize how much that burden may impact those decisions."

With all the medical advancements available, she says you have to take a hard look – even as you bring home your bouncy eight-week-old pup – on what your goals are for your dog.

"It's helpful to preemptively talk about the things that you know you don't want to have happen, and the things that are really important to you, that they happen," she says, suggesting a blueprint for how to avoid your biggest fears and honor what you think is most important for your dog as he ages — before you are in the crisis mode of decision making. "It will be much, much easier."

While eschewing those "end-of-life" checklists, Dr. Moses instead offers two questions dog owners can ask themselves. First: "What are your biggest fears about your dog's health declines and end of life?"

"People can readily answer that question, but I think they are often surprised by what comes out of their mouth," she says. "The other thing I always ask, which is straight out of my palliative training, is: 'What are your goals? What do you want the end of your dog's life to be like?' Then you can make a plan."

All of this is predicated on a good relationship with your veterinarian. It is invaluable, says Dr. Moses.

"Develop a really good relationship with your primary care veterinarian long before you need to have these conversations. And then try to have some small conversations with your vet over time as your dog is With today's
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getting older," she recommends. "The more your vet knows about what your values and your goals are, the more they can help you make decisions."

Likewise, your primary veterinarian can work with any specialists you've brought on board for care. Dr.

Moses considers the primary care vet a team member as they work to deliver the best care possible – whatever that may look like. Which brings Dr. Moses to the question everyone asks sooner or later: "How far do you go, given today's veterinary advancements?" Your early discussions with your primary vet – and the goals you've set – will help you with questions such as, "Do we do more testing?" or, "Do we do more therapy?" Thinking back to your goals will help you decide just how far to go – whether you want to preserve six months of life in an already 15-year-old dog that has other health problems.

"You need to recognize what those six months of life are going to look like," says Dr. Moses. "For a lot of people in their panic and anticipatory



grief when facing a medical crisis on top of chronic aging, it's really easy to get caught up in the acute crisis, forgetting the whole picture of what life is like for your dog. That's the thing I don't want people to do. I want them to try really, really hard to pay attention to all those other factors when they weigh whether or not they should go forward with invasive kinds of care."

hen you have a good relationship with your primary veterinarian, you can have an open and honest conversation. Many veterinarians, says Dr. Moses, feel their job is to offer all possible therapeutic interventions to a family and let them choose. She has issues with that model and offers some guidance on navigating it.

"Recognize that your vet may feel like it's really important to let you make a decision rather than have them make a decision," she says. But you don't have to leave it there. "The most effective way to make a medical decision is through shared decision making, where you and the medical care provider actually have a conversation – it doesn't have to be long – where you establish what everybody thinks is the best thing to do."

Dr. Moses suggests asking your veterinarian, given all the options, if any of them is a terrible idea that they would never do. Conversely, do they think any are options that are clearly the best thing to do.

"If you open the door for your veterinarian by saying, 'I really want to take advantage of your expertise and your

experience in these situations to help me,' you'll get much further," says Dr. Moses. It's a better way of asking, "What would you do if it was your dog?"

"That is a question that is very difficult for most veterinarians to answer because they're in a different situation. But most of the time, most veterinarians have an idea of what they think is terrible and what they think is better. You just have to give them permission to tell you," she says.

If you're really struggling, Dr. Moses suggests seeking out a veterinary social worker to help you work through those feelings and conversations. More and more specialty hospitals and teaching hospitals have them on staff - or an online visit is just as helpful.

As dog owners, we will all eventually face these decisions; the best we can do is prepare.

"It's really, really hard," admits Dr. Moses. "But I do think, given how hard it is, [you should] think about things in a way that's bigger than yourself. It's so tempting and easy to do what makes you feel better in the moment. But that may not be the best thing for your dog."

As an animal ethicist, this is the ethical crux of the situation for Dr. Moses - recognizing that as much as we deeply love our dogs and as close of a bond as we have with them, they are not human.

"They are a different species. I believe it's disrespectful to them to not recognize their species-specific emotional and physical needs, and I think we do them a disservice by treating them exactly the same as a person," she said. "They need different things than we do as we age; recognizing that and trying to honor those dog-specific needs, to me, is really an important part of being a responsible dog owner." At the end, it goes back to "we can, but should we..." adds Dr. Moses.

Understanding that it is hard, and knowing that you've prepared as much as possible, Dr. Moses says it's important to give yourself some grace, knowing that you've met your goals and the goals that you had for your dog.

"Don't judge yourself, don't beat yourself up," she says. "Don't let other people do that, either. A lot of the conversations I had in the palliative care practice were helping [owners] manage the feelings they had because well-meaning but maybe insensitive people around them had a lot of opinions."

Looking into those eyes as they close for the last time is not easy. When they can no longer outrun the illness, no longer find joy in "just being" with you, one of your best friends - your best canine friend - deserves that final dignity.

And, yes, it is crushing. 🎎

