

End of Life Ethics

Katherine Goldberg, DVM

Whole Animal Veterinary Geriatrics and Hospice Services
Cornell University College of Veterinary Medicine
Falk College/School of Social Work, Syracuse University

Why is ethics training necessary?

- Veterinarians face a unique set of ethical considerations
- Examples:
 - What is "terminal" in a patient whose life can be legally ended at any time?
 - What is "treatable" in a patient whose care is 100% dependent upon the abilities, motivation, daily schedule, & finances of their caregiver?
 - How does the legal status of animals affect our ability to care for them?
 - Some look to human hospice care as the gold standard for our animal patients - is that appropriate?

© Goldberg 2013

Learning Objectives

- Identify guiding principles for MD and DVM
- Understand biomedical ethical principles
- Briefly explore relevance of Aid in Dying legislation
- Case review & discussion

Human Animal Bond (HAB)

"A relationship that is mutually beneficial and dynamic between people and animals that is influenced by the behaviors that are essential to the health and well being of both."¹



1. Committee on the Human-Animal Bond in JAVMA 1998;212(11):1675; reaffirmed April 2010



Photo: Mary Shannon Johnstone



Hypocrisy of HAB?

- "The only reason pet owners pay veterinary fees is because of the HAB. It is a fact that we profit from that bond, and when we then turn around and essentially deny its existence by opposing emotional damages for pets, we are seen as hypocrites. We profit from the emotional value of pets, but we don't want to pay for that value if we are negligent."

-Society for Veterinary Medical Ethics Listserve DVM, Feb 2015

The Veterinarian's Oath

"Being admitted to the profession of veterinary medicine, I solemnly swear to use my scientific knowledge and skills for the benefit of society through the protection of animal health and welfare, the prevention and relief of animal suffering, the conservation of animal resources, the promotion of public health, and the advancement of medical knowledge."

The Hippocratic Oath

- Classic version: "I will neither give a deadly drug to anybody who asked for it, nor will I make a suggestion to this effect. Similarly I will not give to a woman an abortive remedy."
- Modern version: "I recognize the special value of human life but I also know that the prolongation of human life is not the only aim of healthcare. Where abortion is permitted, I agree that it should take place only within an ethical and legal framework. I will not provide treatments which are pointless or harmful or which an informed and competent patient refuses."
- AMA has a code of ethics, but no specific version of the oath which it promotes
- 100% of oaths pledge a commitment to patients

© Goldberg 2013

Principles of Veterinary Medical Ethics

- Last revised 2015
- "The Principles" = official guiding ethical framework for the veterinary profession
- Broad topics, not specific to particular welfare concerns
- Definition of VCPR



© Goldberg 2013

What do The Principles say about our priorities?

- Veterinarians should first consider the needs of the patient: to prevent and relieve disease, suffering, or disability while minimizing pain or fear.
- The choice of treatments or animal care shall not be influenced by considerations other than the welfare of the patient, the needs of the client, and the safety of the public.

Principles of veterinary medical ethics, AVMA 2008, revised 2015

What do The Principles say about euthanasia?

- Humane euthanasia of animals is an ethical veterinary procedure.

Principles of veterinary medical ethics, AVMA, 2008, revised 2015

What is your level of ethics training?

- 1) You're looking at it
- 2) A course or two in college
- 3) Undergraduate degree with emphasis on ethics/bioethics
- 4) Graduate degree in ethics/bioethics

© Goldberg 2013

Principles of Medical Ethics

- Autonomy: informed consent
- Nonmaleficence: protect patients from harm
- Beneficence: benefit patients
- Justice: fairness

© Goldberg 2013

Autonomy

- Patients (human) are free to choose systems of beliefs that may limit other freedoms. i.e. Jehovah's witness refusal of blood transfusion
- Physician may feel there is clear "medical benefit" of transfusion - i.e. beneficence
- Patient is free to decline even if recommended
- IF patient is a 10 y.o. child, there is legal precedent to override parent autonomy in favor of beneficence to minor (i.e. parents are charged with manslaughter)
- Is an animal a "minor"?
- Do our patients have autonomy? Do their owners? Does that matter?

© Goldberg 2013

In the eyes of the law...



Nonmaleficence

- Situations in which some harm is inevitable
- Choosing “lesser of two evils” between 2 treatments
- “Double effect” – a single action has both a positive & negative outcome
 - Dog gets aspiration pneumonia post lar par surgery
 - Cat exhibits severe serotonin syndrome post mirtazapine
 - Patient dies under anesthesia during dentistry

© Goldberg 2013

Beneficence

- Incapacitated person is presumed to want life-saving intervention in ER (beneficence > autonomy)
 - Good samaritan brings in HBC dog, we “stabilize”
- If physician acts in the perceived “best interests” of the patient without consulting patient, or by overriding patient wishes, this is “paternalistic” – “I know what’s best for you”
- Example of justified paternalism = suicide intervention

© Goldberg 2013

Ethical obligation in emergency?

- “In emergencies, veterinarians have an ethical responsibility to provide essential services for animals when necessary to save life or relieve suffering, subsequent to client agreement (or until such agreement can be obtained when no client is present). Such emergency care may be limited to euthanasia to relieve suffering, or to stabilization of the patient for transport to another source of animal care.”



AVMA Principles of Veterinary Medical Ethics 2008, revised 2015

Tiny Tim...

- https://www.youtube.com/watch?feature=player_embedded&v=7_kNqcdx6gc

Justice

- Aristotle - "giving to each which is his due"
- Allocating scarce resources
- "Distributive justice"
- Application in veterinary medicine? Clear issues of inequity of care based on finances; however, this is not generally considered "unjust"
- Unequal access to health care for people is generally considered "unjust"

© Goldberg 2013

Human End of Life Ethics

- Human end of life ethics - focus on "trying to die well", being "allowed" to die, upholding the rights to withdraw/withhold life-sustaining treatment (WD/WH LST)
- VERY MUCH against the grain of the traditional medical system for people (remember the classic oath)
- (With few exceptions) system does not embrace the right of people to end their own lives - either assisted or not, by physicians

© Goldberg 2013

Veterinary End of Life Ethics

- What is the dominant paradigm?
 - "pre-emptive strike"
- Focus is arguably opposite of human medicine
- Some say that animals have a "right to live" rather than be euthanized (Do they?)
- Life-ending v. life-extending
- Right to die v. right to live
- Can you think of the "myths" to debunk about both human & veterinary hospice?



© Goldberg 2013

Tough But Important

- Death With Dignity/Physician-Assisted Death/Aid in Dying
 - Terminally ill patients who are decisionally capable and mentally competent may request a prescription to hasten their death. Patients must be able to self-administer the medication. Doctors are not held responsible for the death of their patients.
- Is this euthanasia?
- Why is the term "physician assisted suicide" not preferred by patients and their doctors?



“Experts” on euthanasia

Veterinary surgeons' attitudes towards physician-assisted suicide: An empirical study of Swedish experts on euthanasia. *Journal of Medical Ethics: Journal of the Institute of Medical Ethics*, Vol 37(5), May, 2011. pp. 295-298

- Hypothesis: knowledge of euthanasia → more restrictive view of physician aid in dying
- Looked at: veterinary surgeons, physicians, general public
- Veterinary surgeons similar to general public
- Physicians more restrictive than general public

<http://www.howtodieinoregon.com/trailer.html>

Death With Dignity

- Relevance to veterinary practice?
- How do you think popular news coverage of this legislation impacts your clients?
- How can you communicate the distinction between euthanasia for companion animals & death with dignity legislation?

Amber

- 10 y. o FS Labrador
- Down x 1 week
- R>L hemiplegia
- Urinating/defecating on own but in place
- Bottles of tramadol, prednisone, gabapentin from RDVM



Amber

- Client goal: “for her to get better”
- Additional goal: alertness
- What are the components of our care plan for Amber?
 - Pain management/analgesia
 - PO (tramadol, prednisone, trazodone, valium, morphine), SQ (buprenorphine), IM (buprenorphine/acepromazine/xylazine), Transdermal (fentanyl)
 - Bladder/bowel care
 - Down dog care, education re. pressure sores
 - Bladder expression, bathing, wound care, Calmoseptine, turning
 - Cognitive stimulation
 - Client care, retraining. Mental health support.



Amber



- What are the primary ethical issues/questions here?
- What strengths do you see in Amber's caregiver?
- What role does the legal status of animals have?
- What impact would reporting this case as neglect/abuse have on the human-animal bond?
- What is your role?
- Who can help you?



The team

- Family DVM
- Specialist DVM(s)
- Hospice/palliative medicine DVM
- Integrative medicine DVM
- Therapist
- Nursing aid/home care provider
- (Animal Control)

Summary

- This is rich material, often with more questions than answers
- Go back to the basics – medical ethics principles, legal status of animals, The Principles – provide a helpful framework/foundation
- Working through ethics cases in groups is helpful, consider joining/forming ethics committees at your institutions

Questions?

