



Paradigm Shift on Euthanasia: Needed to Reduce Angst, Guilt & Suicide

Alice Villalobos*

President, Society for Veterinary Medical Ethics (SVME), USA

***Corresponding author:** Alice Villalobos, President, Society for Veterinary Medical Ethics (SVME), USA, Tel: 310-261-1015; Email: dralicev@aol.com

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Introduction

We can alleviate our moral stress, personal torment and anxiety if we view ourselves as “Mother Nature’s Helping Hand” while performing our role during euthanasia. Society has accepted a very sad paradigm with fixed ideas about euthanasia. However, if we can “re-wire” those fixed ideas in society, with a paradigm shift, we will lift a heart-wrenching social burden off our shoulders, and replace it with a much-needed consoling comfort. This new thinking would help ease the emotional upset of end of life decision making for pet lovers, our staff and our professional colleagues.

We must strive to change the paradigm of society’s deep seated sad viewpoint about euthanasia. We can view euthanasia as being more of a natural sequence or consequence of living vs. a culturally and inherently sad event. This paradigm shift would definitely improve the mental well-being of our profession by reducing angst, stress, sadness, depression, and ultimately help reduce the suicide rate of our profession.

The fixed connotation that society holds about euthanasia is anguished and sadly negative. This paradigm of euthanasia involves the negative concept of “taking life” instead of the compassionate action of “granting mercy.” This philosophically accepted paradigm of conventional negative thinking influences pet lovers and veterinarians to automatically feel badly overall, even after they have worked diligently to provide excellent palliative care and good quality euthanasia. This distressful feeling is magnified if the veterinary practice is requested to perform euthanasia on several beloved pets on the same day or more often than usual during the same week.

The very nature of our patients, being generally smaller and short-lived, dictates that we must bear witness to more trauma, illness, aging, decline, and death than any other profession. Veterinarians will benefit if we all make the conscious effort to re-wire our unconscious yet habitually dreadful negative, deep seated thinking of being the “executioner” who “takes life” at euthanasia. If we adopt a congenial paradigm, which defines a more sympathetic, commiserating role for ourselves at euthanasia, as “Mother Nature’s Helping Hand,” we would all derive emotional benefit. So let’s see why we need to turn to Mother Nature.

Mother Nature’s Quick Hand at End of Life for Animals

It is natural for aging and frail animals that live in the wild to slow down. They often fall behind and get separated from their pack. Frail animals will often stop and lay under a bush. This leaves them unprotected and exposes their vulnerabilities. Mother Nature’s brisk hand, with her harsh elements and her laws of instinctive predation, asserts the destiny for sick, frail animals, so they die quickly in the wild. There is rarely a prolonged, lingering phase at the end of life for frail or sick animals that live in natural habitats.

By keeping domesticated pets in the home or ranch environment, we shelter them from exposure to Mother Nature’s laws of instinctive predation and her expeditious harsh elements. When humans domesticated animals, we adopted the ancient contract of the “good shepherd.” As the good shepherd, it became our responsibility to separate our terminal pets from the home pack when it is their time to die. This responsibility is difficult to carry out but we owe it to our pets, to help them avoid unnecessary suffering

and an unnatural, lingering death. This obligation, to be the good shepherd, is especially important when our pets' quality of life declines to a low point or if they began to suffer relentlessly. By using the Quality of Life Scale, which can be downloaded at www.pawspice.com, we can evaluate 7 important criteria and apply a 0-10 score for each, to make better end of life care decisions [1]. When our pets' lives are no longer worth living for them, it is our responsibility, as the good shepherd, to employ euthanasia as a form of Mother Nature's Helping Hand. We can be Mother Nature's Helper and bestow a peaceful and painless transition for our beloved pets by providing a compassionate euthanasia for them when they need this merciful help.

Let's re-wire and re-word the current paradigm and overcome society's accepted powerful negativity associated with euthanasia. If we overcome and outsmart our negative thoughts, we can replace that self-destructive thinking with more positive meanings, especially by using an optimistic, positive dialogue for our clients and ourselves. This would result in less personal torment and an evolution of thought about what euthanasia actually is and how it actually serves pets and society.

The curse of perfectionism one contributing factor to our profession's high rate of personal torment is that veterinary medicine attracts high achievers who are often considered perfectionists. Perfectionism is a personality trait. It is most often manifested by the rejection of personal achievements as "not good enough" because they fall short of perfection. Perfectionism is a characteristic that makes life a continuous self-assessment of accomplishments or appearances. When a person has healthy perfectionism, it can be self-motivating to increase one's determination to overcome adversity and to attain goals. When perfectionism is unhealthy, it can be a steadfast and enduring path to negative feelings of not being satisfied, overall sadness, and depression. Many veterinarians feel badly as they view euthanasia of their patients as their failure to help the animal. This type of negative thinking often leads to personal distress and self-condemnation. This negative thinking is associated with depression, eating disorders, migraines, obsessive-compulsive disorders, panic attacks, underachievement, failure, and suicide [2]. These factors carry over into veterinary medicine. If we add these factors to the pervasive omnipresence of social media and the potential damage that social media critiques and comparisons can inflict via yelp, Facebook, etc., it is easy to see why some practitioners become distressed.

Overcoming perfectionism: One of the best ways to overcome perfectionism is to avoid thinking with a comparison mindset. Another way is by practicing mindfulness and being present in the moment. Mindfulness is a state of active, open attention to the present. We must

use compassionate self-talk, and challenge our negative self-judgments. The key is to realize that our endeavors to achieve goals are worthwhile even if those attempts are not always going to be perfect.

Avoid negative self-talk terms associated with euthanasia

It helps to avoid using negative words and self-talk such as: "kill, take a life, put down, put to sleep, playing God," etc. Using negative words contributes to ethics fatigue, compassion fatigue, sadness, and depression. We should always guide our staff and clients and ourselves to use positive words and phrases such as: "help, transition, escort, lift, give back, helping them earn their wings, crossing over, the gift of a peaceful and painless passing, being Mother Nature's Helping Hand," etc.

If you take this positive verbal approach, you can permeate positivity for the rest of the clinic, your colleagues and staff. Creating a more accepting, positive attitude can help others reduce their negative self-talk surrounding euthanasia or any other situation. Even if you aren't the clinic owner, this is an opportunity to take on personal leadership by improving morale for all. Thank goodness there is an online "safe space" or "brave space" for veterinarians and staff to confide their feelings and anxieties during a crisis. I am referring to the Facebook group chat, Not One More Vet (NOMV), which was started in 2014 by Dr. Nicole McArthur after Dr. Sophia Yin's heartbreaking suicide. Many veterinarians find support and understanding as they share their feelings with colleagues with this helpful Facebook community [3].

Recommendations for Bond-Centered Euthanasia

To avoid potential struggles, and to ensure a gentle transition, I personally recommend providing a thoughtful bond-centered euthanasia as per my chapter in *Canine and Feline Geriatric Oncology: Honoring the Human-Animal Bond* [4]. First of all, NEVER separate the pet from the family if at all possible. Unfortunately, COVID-19 restrictions have forced the veterinary team to be imaginative at this profoundly distressful time.

Provide kind emotional support for the family, soft lighting (if indoors), candles, flowers and poetry. Use this two-step procedure: #1) Administer a deep subcutaneous or intramuscular heavy pre-sedation injection. Advise the family that their pet will lose consciousness over the next five-10 minutes, and instruct them to bid their private farewell wishes. #2) Place a towel over the patient's body. Completely bypass IV catheter placement, and deliver the final injection as an intra-cardiac, intra-hepatic, intra-renal,

and/or IP injection.

Bypassing IV catheter placement will spare the staff, the patient and the family from potential procedural issues that often result in dysthanasia (faulty euthanasia procedure). This term was introduced to veterinarians by Dr. Kathleen Cooney in an article in DVM360: dvm360 June 2020, Volume 51, Issue 6 [5].

Many veterinarians are referring their euthanasia patients to house call veterinarians who have gained expertise in bond-centered end of life care. Most of them have acquired skills in "The Art of Euthanasia" as per a paper presented at the North American Veterinary Conference in 2012 by Dr. Dani McVety [6].

Conclusion

We should, as a profession, re-wire our previously accepted paradigms and negative thinking about euthanasia.

We can reinterpret our valuable role at euthanasia as a meaningful and spiritual privilege by assuming the role as Mother Nature's Helping Hand, instead of negatively ruminating and viewing ourselves as the "executioner." As we sympathetically oversee and minister compassionate euthanasia services for our beloved pet patients, we can re-wire and redefine our old fixed negative feelings related to perfectionism and masochistic victimization.

We can intentionally declare to ourselves and our staff that we are doing a "good merciful deed" as we kindly help our failing patients to peacefully and painlessly reach their natural destiny with compassionate euthanasia. We can spare a lot of heartbreak for ourselves, our staff and society if we promote our more positive role at euthanasia as Mother Nature's Helping Hand.

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