

## **Palliative Care Chat – Episode 20**

### **Palliative Care Has Gone to the Dogs!**

- Dr. McPherson: Hello, this is Dr. Lynn McPherson and welcome to Palliative Care Chat, the podcast brought to you by the online Master of Science and Graduate Certificate Program at the University of Maryland.
- Dr. McPherson: I am so excited about our guest today, Dr. Beth Marchitelli, who received her degree from Cornell University's College of Veterinary Medicine in 2001. Shortly after graduating from veterinary school, she practiced small animal medicine in Huntington, New York for 10 years. She currently practices small animal medicine with a focus in veterinary hospice and palliative care in Asheville, North Carolina and has done so for the past six years. She is currently pursuing a Master of Science in palliative care in human medicine, in a really awesome program, might I add, to advance her knowledge and training in the areas of veterinary hospice, palliative care, and euthanasia. She is especially interested in providing high-quality, compassionate care for pets during the end of their lives, as well as the families who care for them. When she's not caring for the pets or their families, she enjoys yoga and mountain biking with her husband and two dogs in beautiful western North Carolina. Dr. Marchitelli, welcome. We're so excited you're here.
- Dr. Marchitelli: Hey, Dr. McPherson. Thank you so much for having me. It's a pleasure.
- Dr. McPherson: Oh my gosh, super excited. I know I've read your formal bio, but why don't you tell us a little bit about your background, maybe how you and I met, how we came to be colleagues.
- Dr. Marchitelli: Yeah, absolutely. So I believe we met at one of the AHPM annual meetings. I'm not sure which one, because I have been for the last several years trying to glean some knowledge from human medicine in ways that I can apply to veterinary medicine by seeing what you folks are doing in human hospice and palliative care and I went to the AHPM's annual assembly and I heard one of your amazing lectures, and I'm sure I had questions, and then you-
- Dr. McPherson: Well, thank you.
- Dr. Marchitelli: -told me about the Master's Program and I was immediately intrigued and excited to look into that.
- Dr. McPherson: Now, I thought you and I met online when you were searching for a better medication to use for euthanasia-
- Dr. Marchitelli: Oh.

Dr. McPherson: Because Midazolam causes people to jump when they get it and dogs and cats, too.

Dr. Marchitelli: I forgot. Yeah, so-

Dr. McPherson: Yeah, but we did that ... they're both true, I think, right?

Dr. Marchitelli: I think so. I think [crosstalk 00:02:21] when I first met you-

Dr. McPherson: Yeah.

Dr. Marchitelli: -but I had asked you online because a colleague had suggested I ask you and that you were great and, of course-

Dr. McPherson: Oh, it's a small world, huh?

Dr. Marchitelli: Yes, it really is.

Dr. McPherson: Goodness.

Dr. Marchitelli: [inaudible 00:02:33] hospice doc here who kept telling me to ask you.

Dr. McPherson: Oh, there you go. So small world regardless. So how did you end up doing what you do for pets in palliative care? Tell me about that. How did you even get into that?

Dr. Marchitelli: I'm sure it's the same for many people, maybe how they end up in the niche that they end up in but it was by accident. I had been practicing for ten years and enjoyed what I was doing but a colleague of mine suggested, why don't we start a home euthanasia practice? I thought, "oh, that'd be great", to help animals be able to be at home and have their peaceful, loving surroundings of their family for their final moments.

Dr. Marchitelli: And we went to a couple veterinary meetings at the International Association For Veterinary Hospice And Palliative Care and they started talking more and more about hospice and palliative care. And I thought, "Oh, we should add those services as well." And it just kind of grew from there and initially, it was more, we used the term "hospice" a lot more and now, since things have kind of expanded and changed, we're more focused on hospice and palliative care.

Dr. McPherson: That makes sense. So do you refer to hospice as likely within the last six months, the same as you do with humans?

Dr. Marchitelli: Well, I'm sure it kind of depends on who you talk to and I think the terminology is ever-changing in veterinary medicine for sure. I sort of use them interchangeably to some extent because it's very difficult sometimes to have a definitive diagnosis. Sometimes you don't even have a definitive diagnosis but

we know the pet doesn't have long so it's hard to say if it's gonna be six months to say these pets are hospice and these pets are, on hospice or not.

Dr. Marchitelli: So I sort of use them interchangeably but you could say that those pets that we think have less time would be hospice and then those who we really have no idea what their prognosis is could be palliative care but I use them interchangeably for better or for worse.

Dr. McPherson: Okay. So why don't you tell our listeners a little bit about exactly what do you do? Certainly, I think we all know what euthanasia is but what do you do as a palliative care veterinarian and just tell us a little bit about what you do and what special skills you bring to the table. Maybe perhaps versus a general veterinarian.

Dr. Marchitelli: Sure, sure. And I think that the masters program has really helped me hone these skills tremendously and it has really benefited me. So just to put a plug in there for that.

Dr. McPherson: Well thank you.

Dr. Marchitelli: Yeah, absolutely. But you know, basically we provide, for our first time clients, and they're either a dog or a cat and we've also have palliative care or hospice assessments, what kind of distinguishes us from general practitioners is our service and the services that we provide at 4 Paws Farewell which is my practice, everything's done at home so that's the first difference, that everything's done at home. And the palliative care assessment is at least an hour so we have a little bit more time than you would in a general, in an office, and in the end, we really try to be as comprehensive as possible.

Dr. Marchitelli: Very similar, I'm sure, to [inaudible 00:05:59] and human hospice, we're treating the pets and the family for sure. And so for our palliative care assessment, we would do much of the same things that you all would do, would be to get a medical history and what medications the pet is on and we do talk about goals of care because obviously that's very important for pets as well as for people, to make sure everyone's on the page. What is the most important thing for this family and this pet for these final days, their months or weeks, that we have together?

Dr. Marchitelli: And then from there, really where our specialty lies, one would be palliative care, meaning comfort care. So whether that be in the form of multilevel pain medication and environmental management, emotional or cognitive management for the pet, making sure that they're not excessively anxious with the disease that they are struggling with or increased age. So we try and be as global as possible in our assessments for the pets and also the family because if the family is a required mama who's there 24 hours a day, all the time with the pet, or someone who's working and has some limitations and that, obviously, we take that in consideration.

Dr. Marchitelli: So I think our expertise lies in pain management for obvious reasons and comfort care and what things can we do in the environment to make this pet as comfortable as possible and then what things to watch for. What does the family need to be on the lookout, what might be a decrease in quality of overall quality of life as the pet progresses with this particular illness.

Dr. McPherson: Sure.

Dr. Marchitelli: We do do a quality of life assessment at that visit so we kind of have a baseline. And then we provide them with resources, both community resources as well as some online resources on making sure they get that close support that they'll need. There's some interest now in, I don't know if I mentioned this to you earlier, but for caregiver burden for actually people, pet owners, dealing with critically ill pets. So there's some studies out now which is really fascinating. So we provide that website to people as well just so they can know that it's a real thing.

Dr. McPherson: It is a real thing.

Dr. Marchitelli: [crosstalk 00:08:32].

Dr. McPherson: Non pet owners don't get that though, a lot of time, I think.

Dr. Marchitelli: No, no, no.

Dr. McPherson: And they're wrong, aren't they? There you go. Well I know that you and I have spoken at length about my little poodle, Gucci, who is 17 years old and blind and deaf and got diabetes and probably dementia and I know the biggest, Dr, Marchitelli and I don't live near each other. She would be my vet. I'm always asking our veterinarian, "do you think he's suffering?" And that's got to be one of the biggest questions that you must answer for families.

Dr. Marchitelli: Absolutely. Absolutely. Absolutely. And I think-

Dr. McPherson: It's so hard.

Dr. Marchitelli: It is so hard and I think something that I actually learned from human medicine, whether it was one of the videos that we watched or I picked up somewhere else, is really trying to put the focus on the pet's perspective, to say to the family, "if Gucci could talk to us right now, what would you say about his life and how he's experiencing this moment?"

Dr. McPherson: That's a good one. Yeah.

Dr. Marchitelli: It's really brilliant and it's been really helpful to use but, obviously, they can't talk so that does make things challenging, for sure.

Dr. McPherson: Yeah. But you do worry about that. I mean, I certainly think he's happy as a clam even though it's hard for me to watch him walk into walls and stuff. But he's a happy boy. But I'm very attentive to that and thank you for your guidance with Gucci.

Dr. Marchitelli: Absolutely. Absolutely.

Dr. McPherson: So how has the community reacted to what you offer? How do people even know you're out there?

Dr. Marchitelli: Well, I've probably mentioned this to you before but in the last ten years, there's really been exponential growth in the area of mobile home euthanasia and hospice and palliative care services. Not so much in the clinic setting but there's one more, so the word is getting out there slowly and then for us, we've been here for almost seven years so a lot of it's word of mouth but initially, I kind of reached out to the regular veterinary hospitals in the community and I did a couple lectures.

Dr. Marchitelli: And then as I would see patients and send them reports, obviously, [inaudible 00:10:38] familiar with our service so we did a little bit of advertising but not much and if you've ever been here, it's very, very pet friendly. It's probably one of the most pet crazy places I've ever lived. There's a dog bowl outside every store, anywhere you walk in town. So there's local regional shared chat groups. There's websites that have passed on that information. But a lot of it is word of mouth through the veterinary clinics, through some of the specialty hospitals, so it kind of just works like that in a community.

Dr. McPherson: That's great. That's good news, right?

Dr. Marchitelli: Yeah. Yeah. It's been really, really great and I've done a couple of interviews with some local papers and that sort of thing but mainly, I think it's been word of mouth.

Dr. McPherson: That's wonderful. I think I've shared with you that we had gone to see our vet recently with Guc and it is a huge practice. It was a vet we had never met before and I asked my famous, "do you think he's suffering" question and the first thing she said, my husband and I had to laugh to spite the seriousness of the tone, she said, "have you ever heard of something called palliative care?"

Dr. McPherson: I was like, "Why, yes I have." [crosstalk 00:11:58] And so my personal impression is I think veterinarians are more in tune to this than a lot of human practitioners.

Dr. Marchitelli: Yeah.

Dr. McPherson: Why is that, do you think? That's shameful, don't you think?

Dr. Marchitelli: Yeah. Well, I-

Dr. McPherson: For the humans.

Dr. Marchitelli: You know. Oh, yeah. Yeah. Sure. I do think that we're, in veterinary medicine, we're kind of informally practicing palliative care even though it's not named. All along, to a certain event could be called that but there's usually that critical point where you enter into a relationship with a veterinarian where you're not actually calling it palliative care but there's going to be some critical point where either you don't want to put your pet through anymore tests and so then you're kind of either entering into a palliative care relationship at that point but it's not really named as such so I think that we practice although not everyone's philosophy is in alignment with that.

Dr. Marchitelli: Some people are all about either everything or they don't really offer you much in terms of comfort care but I think it's just kind of unspoken and kind of interwoven into much of veterinary practice because we're not necessarily going to have a definitive diagnosis for everything, for example.

Dr. Marchitelli: There's some limitations that are gonna come into play whether that be financial, emotional, physical, or for the pet.

Dr. McPherson: Sure. Absolutely.

Dr. Marchitelli: And then it just kind of called it so you have to make sure you can provide something at that point.

Dr. McPherson: And I think that it has evolved over the past decade or so and really gained some momentum.

Dr. Marchitelli: Absolutely.

Dr. McPherson: I remember about ten years ago, we had a West Highland White Terrier and she was about 12 and all of a sudden, she started showing some neurologic deficits, pretty significant deficits so we took her to the emergency vet place, you know, the one where you walk in and they say, "which credit card do you want to put a thousand on as a deposit?" Yeah, that one.

Dr. McPherson: And they kept her overnight and the vet called me in the morning and said, "I think she has a brain tumor and I think we should get an MRI. It would be about two thousand dollars." And I said, "well, what are you gonna do if it does show a brain tumor? She's 12 years old. That's about the lifespan of a Westie. Are you really gonna crack her skull and do surgery?" And he kind of mocked me and said, "of course not, what's wrong with you?"

Dr. McPherson: I said, "well then, why would we put her through the MRI?" And he said, "you just don't want to pay the money." I was like, "oh dude, you do not wanna know what I have spent on my dogs" so I said, "No, it's not that."

Dr. McPherson: So I could actually hear his hands on his hips when he said, "well, what do you suggest we do?" I said, "I suggest you're gonna give me a prescription for Decadron for my dog so my daughter can get through her exams and say goodbye to her dog and if you won't do it, I'll call one of 50 doctors I have on speed dial" so he did it grudgingly and that's exactly what happened. But I was kind of surprised by that response.

Dr. Marchitelli: Yeah. Yeah.

Dr. McPherson: Thankfully, I think that's kind of fading out a little bit.

Dr. Marchitelli: I think it is. I think it is too. I think things have changed and some folks need an answer but, at least, a lot of times, in terms of diagnostics, more along the [inaudible 00:15:10] this isn't gonna change what we're gonna do but if you want to do it, fine.

Dr. McPherson: We need more of that conversation in taking care of people, don't we?

Dr. Marchitelli: Yeah, I was thinking too, I don't know if human docs are hesitant to bring things up like that because they don't want to offend people or they're afraid of people's emotional reaction that they're suggesting something that isn't, you know, a cure for their particular disease. I don't know if they tread lightly on that.

Dr. McPherson: I think a lot of our hospice and palliative care doctors get pushed back from tending to the community who are not hospice and palliative care people. Where they may want to order more and more tests and one of our hospice or palliative care doctors would say, "what is that really gonna do to change the situation? Are we really gonna alter what we're doing based on this \$2,000 test?" So they have that gentle, kind conversation frequently, I think.

Dr. Marchitelli: Yeah, yeah. Yeah.

Dr. McPherson: So do you still have a regular vet practice or are you 100% now on this palliative care practice?

Dr. Marchitelli: We've only, the whole practice for the last seven years, it's just been hospice and palliative care.

Dr. McPherson: Wow. That's wonderful.

Dr. Marchitelli: Yeah.

Dr. McPherson: So do you ever have people in the community say, "are you serious? You're going through all this for a cat or a dog?" Has anybody ever questioned it, like, "really?"

Dr. Marchitelli: I think. I'm not gonna give a very representative answer because Asheville is pet crazy.

Dr. McPherson: Good!

Dr. Marchitelli: And all the folks who come to us are on board so honestly, no. People are saying, "we didn't know this service, so happy that this is available for us." And, you know, a big factor is even for dogs or for cats, it's really hard for them to travel because they're older so for them not to have to take their pets in the car is really, really helpful but no, I haven't. I'm sure I will.

Dr. McPherson: Then poke them in the eye for me if you do find one, okay?

Dr. Marchitelli: Yeah.

Dr. McPherson: 'Cause that's just crazy pants. Those are our babies. Our little babies.

Dr. Marchitelli: I know. I know. They are.

Dr. McPherson: So you mentioned there's an international association of palliative care veterinarians. We have a U.S. one also.

Dr. Marchitelli: No, I think. I think it's based in the U.S. I think they just wanted to call it international so it would be [crosstalk 00:17:33]

Dr. McPherson: Get more membership. That's great. Wonderful.

Dr. Marchitelli: [crosstalk 00:17:38] also offer a certificate program for veterinarians to become certified. Yeah.

Dr. McPherson: That's great.

Dr. Marchitelli: [crosstalk 00:17:45] hospice and palliative care.

Dr. McPherson: We have, I've seen many times, an offer for pharmacists to get a certificate in veterinary pharmacy so that's a growing field. So I know from watching you in our master's program over the past two years that the whole class has learned so much from you. Like, you have been very open in sharing instruments on how do you assess pain in a cat or a dog. So what have you gotten from this? I know that we have certainly been very open in you applying each assignment or discussion question to a pet instead of a human so has this helped your practice and informed it in any way?

Dr. Marchitelli: Oh yeah, absolutely. In many different ways, I would say. Certainly, some of the communication stuff has been. Communication information is really helpful. I don't know if it was-

Dr. Marchitelli: I can't think of the name of it right now, where you draw the boxes for the [inaudible 00:18:40] square.

Dr. McPherson: Right.

Dr. Marchitelli: So types of things have been really directly applicable and then in terms of medicine, medicine portion, it's really-

Dr. Marchitelli: Not only am I able to learn what's happening in human medicine but then it's forced me to search the veterinary literature for things that I would've told you I knew everything about. There's nothing new to learn and I've been surprised every time because there's always a little [inaudible 00:19:10] of something that's changed or some little [inaudible 00:19:16] for comfort.

Dr. McPherson: Sure.

Dr. Marchitelli: So those things have been huge, just having the community support of all of my classmates who have been wonderful and shared their experiences. So it's pushed me with skillsets that I haven't used in a while like [inaudible 00:19:35] if ever which is great. And to really be able to evaluate things critically. It's helped me in my day to day, for educational purposes, it's helped me in my day-to-day practice.

Dr. McPherson: That's wonderful.

Dr. Marchitelli: Yeah, it's really, really been useful for sure.

Dr. McPherson: Yeah. Well I think that whole process of discovery is true of all practitioners. Not just veterinary medicine but human medicine and all kinds of specialty whether it's our master's program or a different kind of continuing professional development. You know I'm a big fan of lifelong learning and always continuing to push yourself because just when you think you know it all, you find out, no, not so much.

Dr. Marchitelli: Absolutely. Yep. And I definitely would not have had that discipline or commitment to do this on my own, obviously, so it's been really good to know that I have these assignments and homework that I have to do and I have to push myself to find out what I can. I've definitely been able to have some medical [inaudible 00:20:38] and environmental [inaudible 00:20:40] in addition to all the other skills that I've been able to use.

Dr. McPherson: That's great.

Dr. Marchitelli: Which is wonderful, yeah.

Dr. McPherson: Yeah. Well I know that you've been busy writing papers and chapters. You want to tell us about that and the book that you're gonna be writing. Tell us a little bit about that.

Dr. Marchitelli: Well. So the, I just finished a chapter. The book that's gonna be coming out, Veterinary Clinics Of North America, and I wrote about [inaudible 00:21:07]. I wrote a chapter about euthanasia, Objective Exploration Of Euthanasia, about our first events and that will be coming out, I think, in March. And then I'm working on, I'm not quite sure of the details, but I'm working on another volume that is gonna be coming out in the following year in veterinary clinics. This volume that's coming out is on veterinary hospice and palliative care and it talks about some of the programs veterinarians have tried at several [inaudible 00:21:39]. Veterinary universities and then the next chapter will be solely focused on euthanasia.

Dr. McPherson: That's wonderful.

Dr. Marchitelli: We do have a lot of euthanasia. [crosstalk 00:21:51].

Dr. McPherson: And I know you worked very hard to understand best practices and best medication combinations to eliminate, certainly, pain or any discomfort and certainly to alleviate the family's concerns as they watch their pet go through that and I applaud you for that. That's amazing. [crosstalk 00:22:10] Quite a science. Thank you for doing that. Anything else you want to share with our listeners? You've got such an interesting background and I'll bet most people didn't even know there are people like you out there.

Dr. Marchitelli: I really can't think of anything else to talk about.

Dr. McPherson: Okay.

Dr. Marchitelli: I think most people, it's good to know that it's not just me but there's, I'm sure, people have favorite veterinarians, like particular practices. But there's lots of them that can provide those types of services and if you think your vet would be offended or wouldn't want to hear that you want to opt for comfort care, I'm sure that they would and they're not gonna judge you. Vets are really kind of open to that sort of thing and there definitely are these services in the community for sure.

Dr. McPherson: That's great.

Dr. Marchitelli: Have to do a little searching and a lot of times, local veterinary hospitals will know about it.

Dr. McPherson: Well that's wonderful. I would very much like to thank our guest, Dr. Beth Marchitelli. Thank you so much for listening to the palliative care chat podcast. Again, this is Dr. Lynn McPherson and this presentation is copyright 2019

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