



Second Edition

Pain Management for Veterinary Technicians and Nurses

Edited by
Stephen Niño Cital
Tasha McNerney
Darci Palmer



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Technicians and Nurses**

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Edited by

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Foreword

One of the truly great things about getting old is having a long history and, with a little luck, remembering most of it. I began my journey into the world of animal pain management in 1991, long before there was a discipline in veterinary medicine, even before there was much organized thought on the topic. Not a surprise, really, when you consider that there was little understanding of the process or significance of painfulness, not just in animals but also in human medicine where it concerned non- or preverbal patients. It seemed our ability to recognize, much less treat, pain even as recently as the end of the twentieth century was limited to the patient's ability to express it in a language common to caretakers. OUCH! Of course, even when expressed, there were few options and a high incentive to disbelieve the bearer of the pain.

In 1991, I was already 10 years into a 13-year stretch working at the University of Pennsylvania Veterinary Hospital. As head of the ICU, I saw endless "painful" patients and commensurately stressed-out veterinary support staff. We were certain our patients were suffering but felt up against a wall of resistance to treatment. Perhaps some of you still experience this today. I came to believe that the resistance we met came from a lack of understanding of the importance of treating pain as a disease and the shortage of options at that time. In addition to those barriers, we were never trained to recognize the signs of pain in animal species, especially in those who were evolutionarily determined to hide weakness

from would-be predators (including veterinary staff armed with medical supplies of all sorts). It was also commonplace to hear mythical comments like "I won't be able to assess the patient if I drug him," "I don't think it's pain, it's just her personality," and perhaps most insidious, "Pain is good because it keeps them from moving around after surgery" (a myth brilliantly debunked by one of my heroes, Dr. Bernie Hanson, DVM, DACVECC, DACVIM, and his team at the University of North Carolina in 1993).

As my frustration grew, so did my search for answers. I spent many long hours at the medical library focusing on pain management (or the lack thereof) in neonates and young children, hoping to find answers but finding instead a surprising lack of treatment in those populations as well. Interestingly, whatever information did exist was largely the work of nurses working with parents lobbying for attention to painfulness in their kids. Of course, we do not have the benefit of parents; pet owners are typically not with their pets in the hospital, and at home they do not readily recognize the signs of animal pain.

Big "Aha!" moment: This is a nursing issue! I became convinced that this was our fight and began to mobilize. To begin, I conducted a rather simple survey in 1992, sending it to the faculty veterinarians, interns, residents, and students at 10 veterinary schools. I received over 800 responses to the single question on the survey, "How do you know if your patient is in pain?" The results were overwhelmingly

similar, although as we would later learn, often erroneous: “vocalization, not moving around, not eating” were among the top responses. The single most consistent response, however, was the one that would determine the course of the rest of my career in veterinary medicine. “How do you know if your patient is in pain?” “Because my technician tells me.”

I wrote and delivered my first pain management lecture at the International Veterinary Emergency and Critical Care Symposium (IVECCS) in 1994 using an overhead projector and a wax crayon. It was titled “Do Animals Feel Pain?” I was not sure how the topic would be received. Imagine my excitement when the room was packed to standing room only with veterinarians and technicians, all of whom were more than eager to discuss the question. I felt energized by the overwhelming response, and my pain management odyssey was underway.

I will fast forward through the next 25 years because you already know the outcome of the story: more formal studies, organizations tasked with looking into the issue, science unraveling the mysteries of pain processing and pharmaceutical companies developing analgesics specifically for animals. For me personally, it meant thousands of worldwide lectures, dozens of publications, many committee

seats and board positions. All of the work was geared toward relentlessly delivering the message to practice the highest standard of animal pain management whether in a premier veterinary academic institution or in the most remote locations in developing countries. Today, animal pain management is a standard of care, and thousands of veterinary professionals are devoted to ensuring their patients are as pain free as possible. The illustrious authors and editors of this work are among them. You are among them. After all, you bought the book!

I am now joyfully retired, secure in the knowledge that this vital work continues every day. I have complete faith in the authors and editors of this incredibly comprehensive collection of information. They are among the top experts in the field. The book you are holding will guide you through the recognition and treatment of pain in a huge variety of animal species. It will help you further the mission to provide your patients with the care they deserve.

It is a great honor to have contributed to the advancement of animal pain management. Now it is “over to you”!

*Wishing you and your patients all the best,
Nancy Shaffran CVT, VTS(ECC-ret)*