



Compassion Fatigue: The Cost of Caring



Veterinary medicine is more than a career: It is a *calling* that attracts compassionate individuals who want to help animals stay healthy and to care for those that are ill and injured. The very nature of our profession calls for caring for our clients through their suffering and sorrow, often at our own emotional and physical cost—the “cost of caring,” or compassion fatigue.¹

Compassion fatigue is characterized by a deep physical and emotional exhaustion and a pronounced change in the ability to feel empathy for patients, loved ones, and team members. Marked by increased cynicism at work and a loss of professional enjoyment, it attacks our empathy and compassion for others—likely the very reasons we became veterinary professionals.²

The Effect at Work

Compassion fatigue not only affects us personally, it also affects our work. We may become dispirited and cynical, make errors, lose respect for clients and patients, and contribute to a toxic work environment² as we find it more difficult to care. The practice also pays a price, because team members’ compassion

fatigue may lead to increased absenteeism, turnover, and worker’s compensation claims; inappropriate behavior with clients; and changes in relationships such as the inability to work well with others, unhealthy competition, lack of flexibility, failure to complete tasks, and spreading rumors and gossip.³ Compassion fatigue can ultimately cause professionals to drop out of veterinary medicine altogether.

The Effect at Home

Compassion fatigue does not end at work. We take it home, where it also affects our relationships outside of the practice. We may isolate ourselves and feel a decreased interest in intimacy and increased feelings of mistrust, anger, intolerance, and conflict.¹

Clearly, compassion fatigue affects us on many levels, and it must be fought on many levels.

We must first combat the personal symptoms and make time to take care of ourselves. We must step out of caregiver mode, make ourselves a priority for part of every day, and find or rediscover activities that make us feel good, both at the practice and at home.

Guarding Against Compassion Fatigue

Compassion fatigue originates at work, so our actions there will not only help us as individuals, but also potentially provide relief to the entire team, resulting in a practice that is mentally healthier, more productive, and more profitable. Most importantly, we must acknowledge and recognize the condition, which means we need to talk about it openly with our team members and leaders.

Compassion fatigue and its signs should be discussed at team meetings, and team members can be given regular assessments so that everyone can recognize the problem. Team leaders should inform new members about this emotional possibility upon hire. When a crisis does occur, such as a longtime patient dying, the effect on the team should immediately be recognized and a safe place where members can discuss feelings should be provided. A buddy system that ensures someone is always available to encourage and listen is another important part of any care plan.

Then, we should mindfully map out a transition routine that helps put our work behind us so that we arrive home with a refreshed, positive outlook. Listen to favorite music while driving, stop by a tranquil park for a

Stressors & Satisfiers

It is ironic that our work satisfaction is one of our weapons against compassion fatigue. Our love of what we do helps us return to the practice day after day. A compassion satisfaction and fatigue survey published in *Compassion Fatigue in the Animal-Care Community*¹ listed these top stressors and satisfiers for veterinary technicians; these same stressors and satisfiers are likely to affect all veterinary professionals:


Stressors:

- Difficult or noncompliant clients
- Problems with team members
- Lack of time.

Satisfiers:

- Helping and healing patients
- Working as a team
- Thankful clients.

few moments, or take the dog for a short walk as soon as arriving home—anything that helps the work—home transition.

The top stressors (see **Stressors & Satisfiers**) often do not involve our patients—they are caused by our relationships with our clients and our team. Therefore, if we work as a team, learn to communicate more clearly with team members and clients, minimize conflict, and distribute our work load evenly, we will get more satisfaction from helping and healing our patients, which will lead to more positive relationships with our clients. The entire team will benefit when we minimize compassion fatigue in our profession. 

See Aids & Resources, back page, for references & suggested reading.

TRIFEXIS® (spinosad + milbemycin oxime) Chewable Tablets

Before using TRIFEXIS chewable tablets, please consult the product insert, a summary of which follows:

Caution: Federal (USA) law restricts this drug to use by or on the order of a licensed veterinarian.

Indications: TRIFEXIS is indicated for the prevention of heartworm disease (*Dirofilaria immitis*). TRIFEXIS kills fleas and is indicated for the prevention and treatment of flea infestations (*Ctenocephalides felis*), and the treatment and control of adult hookworm (*Ancylostoma caninum*), adult roundworm (*Toxocara canis* and *Toxascaris leonina*) and adult whipworm (*Trichuris vulpis*) infections in dogs and puppies 8 weeks of age or older and 5 pounds of body weight or greater.

Contraindications: There are no known contraindications to the use of TRIFEXIS Chewable Tablets.

Warnings: Not for human use. Keep this and all drugs out of the reach of children.

Serious adverse reactions have been reported following concomitant extra-label use of ivermectin with spinosad alone, one of the components of TRIFEXIS Chewable Tablets (see **ADVERSE REACTIONS**).

Precautions:

Treatment with fewer than 3 monthly doses after the last exposure to mosquitoes may not provide complete heartworm prevention (see **EFFECTIVENESS**).

Prior to administration of TRIFEXIS, dogs should be tested for existing heartworm infection. At the discretion of the veterinarian, infected dogs should be treated with an adulticide to remove adult heartworms. TRIFEXIS is not effective against adult *Dirofilaria immitis*. While the number of circulating microfilariae may decrease following treatment, TRIFEXIS is not indicated for microfilariae clearance. Mild, transient hypersensitivity reactions manifested as labored respiration, vomiting, salivation and lethargy, have been noted in some dogs treated with milbemycin oxime carrying a high number of circulating microfilariae. These reactions are presumably caused by release of protein from dead or dying microfilariae.

Use with caution in breeding females. The safe use of TRIFEXIS in breeding males has not been evaluated. Use with caution in dogs with pre-existing epilepsy. Puppies less than 14 weeks of age may experience a higher rate of vomiting.

Adverse Reactions:

In a well-controlled US field study, which included a total of 352 dogs (176 treated with TRIFEXIS chewable tablets and 176 treated with an active control), no serious adverse reactions were attributed to administration of TRIFEXIS chewable tablets. All reactions were regarded as mild.

In some cases, dogs vomited after receiving TRIFEXIS. To ensure heartworm prevention, observe your dog for one hour after administration. If vomiting occurs within an hour of administration, redose with another full dose.

Reactions that occurred at an incidence >2% (average monthly rate) within any of the 6 months of observation are presented in the following table:

Average Monthly Rate (%) of Dogs With Adverse Reactions

Adverse Reaction	TRIFEXIS Chewable Tablets*	Active Control Tablets*
Vomiting	6.13	3.08
Pruritus	4.00	4.91
Lethargy	2.63	1.54
Diarrhea	2.25	1.54

*n=176 dogs

In the US field study, one dog administered TRIFEXIS experienced a single mild seizure 2½ hours after receiving the second monthly dose. The dog remained enrolled and received four additional monthly doses after the event and completed the study without further incident.

Following concomitant extra-label use of ivermectin with spinosad alone, a component of TRIFEXIS, some dogs have experienced the following clinical signs: *trembling/twitching, salivation/drooling, seizures, ataxia, mydriasis, blindness and disorientation*. Spinosad alone has been shown to be safe when administered concurrently with heartworm preventatives at label directions.

In US and European field studies, no dogs experienced seizures when dosed with spinosad alone at the therapeutic dose range of 13.5-27.3 mg/lb (30-60 mg/kg), including 4 dogs with pre-existing epilepsy. Four epileptic dogs that received higher than the maximum recommended dose of 27.3 mg/lb (60 mg/kg) experienced at least one seizure within the week following the second dose of spinosad, but no seizures following the first and third doses. The cause of the seizures observed in the field studies could not be determined.

For technical assistance or to report an adverse drug reaction, call 1-888-545-5973. Additional information can be found at www.TRIFEXIS.com.

Post-Approval Experience (March 2012):

The following adverse reactions are based on post-approval adverse drug event reporting. The adverse reactions are listed in decreasing order of frequency: vomiting, depression/lethargy, pruritus, anorexia, diarrhea, trembling/shaking, ataxia, seizures, hypersalivation, and skin reddening.

Effectiveness:

Heartworm Prevention:

In a well-controlled laboratory study, TRIFEXIS was 100% effective against induced heartworm infections when administered for 3 consecutive monthly doses. Two consecutive monthly doses did not provide 100% effectiveness against heartworm infection. In another well-controlled laboratory study, a single dose of TRIFEXIS was 100% effective against induced heartworm infections. In a well-controlled six-month US field study conducted with TRIFEXIS, no dogs were positive for heartworm infection as determined by heartworm antigen testing performed at the end of the study and again three months later.

Flea Treatment and Prevention:

In a well-controlled laboratory study, TRIFEXIS demonstrated 100% effectiveness on the first day following treatment and 100% effectiveness on Day 30. In a well-controlled laboratory study, spinosad, a component of TRIFEXIS, began to kill fleas 30 minutes after administration and demonstrated 100% effectiveness within 4 hours. In field studies conducted in households with existing flea infestations of varying severity, flea reductions of 98.0% to 99.8% were observed over the course of 3 monthly treatments with spinosad alone. Dogs with signs of flea allergy dermatitis showed improvement in erythema, papules, scaling, alopecia, dermatitis/pyodermitis and pruritus as a direct result of eliminating the fleas.

Treatment and Control of Intestinal Nematode Infections:

In well-controlled laboratory studies, TRIFEXIS was ≥ 90% effective in removing naturally and experimentally induced adult roundworm, whipworm and hookworm infections.

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