

The “HHHHMM” Quality of Life Scale

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by
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Veterinarians are often asked to assess the various aspects that determine the overall quality of life in terminally ill pets. Most older companion animals have one or more concurrent disease conditions that worsen with time. One third of our pet population is overweight and or obese. When pets become burdened with illness or cancer and related treatment issues, their pre-existing conditions complicate the prognosis for survival or may limit options for effective treatment.

The attending doctor is frequently asked, “When is the right time to euthanize my beloved pet? How will I know?” You can respond with something like this, “One day it will gel. You will know when it is the right time because your pet will tell you with a look or a gesture, a sign or a series of bad days.” A quality of life scale may help everyone, especially those who are in denial, to look at issues that are difficult to face. Caretakers can use the proposed Quality of Life Scale to ask themselves if they are able to provide enough help to maintain an ailing pet properly.

More and more clients are requesting in home health care help for their ailing pets. We must remaining sensitive to the caregiver’s wishes and provide end of life care such as pet hospice or “Pawspice.” Animal patients have specific needs and desires that should be recognized and respected.

Veterinarians must rise to accept the challenge of meeting these basic needs and desires for terminal patients. If we can create or restore a satisfactory level for our ailing companion animals, then we are justified in preserving the life of the ill pet during its steady decline toward death. The goal in setting up the Quality of Life Scale is to provide an easy guideline for assessment of the pet so that family members can maintain a rewarding relationship and nurture the human animal bond. This Quality of Life scale offers some objectivity while remaining sensitive to the caregiver’s wishes. It will relieve guilt feelings and engender the support of the veterinary team to actively help in the care and decision-making for end of life, Pawspice patients.

The basic needs and desires innate to quality of life for terminal geriatric cancer patients should not and cannot in good consciousness be ignored (McMillan 2005). It is up to the veterinary professionals and to the pet’s individual caretaker to design an end of life program. The program needs to address each factor that deals with quality of life openly and honestly. We can be very proactive in helping pets achieve an improved score on their evaluations. The scale for each factor runs from one to ten. 10 is the best and highest quality rating for each factor. There are 7 basic factors in this proposed scale. A score of 70 would therefore be perfect. (If the terminal geriatric cancer patient scores at least 5 on each issue, the quality of life is considered reasonably good.)

Use this proposed list of basic desires or factors. These factors are presumed to be essential for quality of life. There may be additional factors for individual cases which may impact the decision for the family. Each factor needs to be monitored by both the attending doctor and

caretaker with careful attention. The proposed list can be named “HHHHHMM,” The 5 H’s and the 2 M’s are easy to remember. The list includes the problems that every Pawspice program should strive to satisfy: Hurt, Hunger, Hydration, Hygiene, Happiness, Mobility and More good days than bad days. A score above 5 on most of these Quality of Life Issues is acceptable in maintaining a Pawspice program. Each pet’s situation needs to be customized, and each pet owner needs to be recognized as an individual who needs a kind, supportive coaching approach to come to terms with the decision to end a best friend’s life.

Table 1. Feline Quality of Life Scale

The HHHHMM Quality of Life Scale

Feline caregivers can use this scale to evaluate the success of their Pawspice program. Grading each criterion using a scale of 0 to 10 will help caregivers determine Quality of Life for sick cats.

Score	Criterion
H: 0 – 10	HURT - Adequate pain control, including breathing ability, is the first and foremost consideration. Is the cat's pain successfully managed? Is Oxygen necessary?
H: 0 – 10	HUNGER - Is the cat eating enough? Does hand feeding help? Does the patient require a feeding tube?
H: 0 – 10	HYDRATION - Is the patient dehydrated? For cats not drinking or eating foods containing enough water, use subcutaneous fluids once or twice daily to supplement fluid intake.
H: 0 – 10	HYGIENE - The patient should be kept brushed and cleaned. This is paramount for cats with oral cancer. Check the body for soiling after elimination. Avoid pressure sores and keep all wounds clean.
H: 0 - 10	HAPPINESS - Does the cat express joy and interest? Is the cat responsive to things around him (family, toys, etc)? Does the cat purr when scratched or petted? Is the cat depressed, lonely, anxious, bored, afraid? Can the cat's bed be near the kitchen and moved near family activities so as not to be isolated?
M: 0 - 10	MOBILITY - Can the cat get up without help? Is the cat having seizures or stumbling? Some caregivers feel euthanasia is preferable to a definitive surgery, yet cats are resilient. Cats with limited mobility may still be alert and responsive and can have a good quality of life if the family is committed to providing quality care.
M: 0 - 10	MORE GOOD DAYS THAN BAD – When bad days outnumber good days, quality of life for the dying cat might be too compromised. When a healthy human-animal bond is no longer possible, caregivers must be made aware that their duty is to protect their cat from pain by making the final call for euthanasia. The decision needs to be made if the cat has unresponsive suffering. If death comes peacefully and painlessly at home, that is okay.
*Total=	*A total score >35 is acceptable Quality of Life for maintaining a good Feline Pawspice.

Created by Villalobos and adapted for Feline Internal Medicine with permission from Willey-Blackwell Publishing, *Canine and Feline Geriatric Oncology: Honoring the Human-Animal Bond*, Table 10.1, January 2007 and Quality of Life Scale Helps Make Final Call, *Oncology Outlook*, VPN, 09/2004