

Final Thoughts



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Julie is a compassion fatigue specialist who brings a unique perspective and approach to support the sustained energy and passion of animal workers. Her company, Rekindle LLC, offers on-site compassion fatigue training to veterinary hospitals, animal shelters, and other animal organizations.

Julie has more than 20 years of experience within the veterinary field and with leading organizations. She has developed and executed training, workshops, and 1:1 coaching for major companies in the animal health industry. She obtained her certification as a compassion fatigue specialist through the Green Cross Academy of Traumatology and has also completed training from The Figley Institute and Traumatology Institute. Julie's clients also gain from her experience as a certified health and wellness coach and corporate wellness specialist.

Technician, Heal Thyself

First and foremost, I don't think you are broken and in need of fixing. But I am concerned about something: you and your sustainability as a veterinary technician.

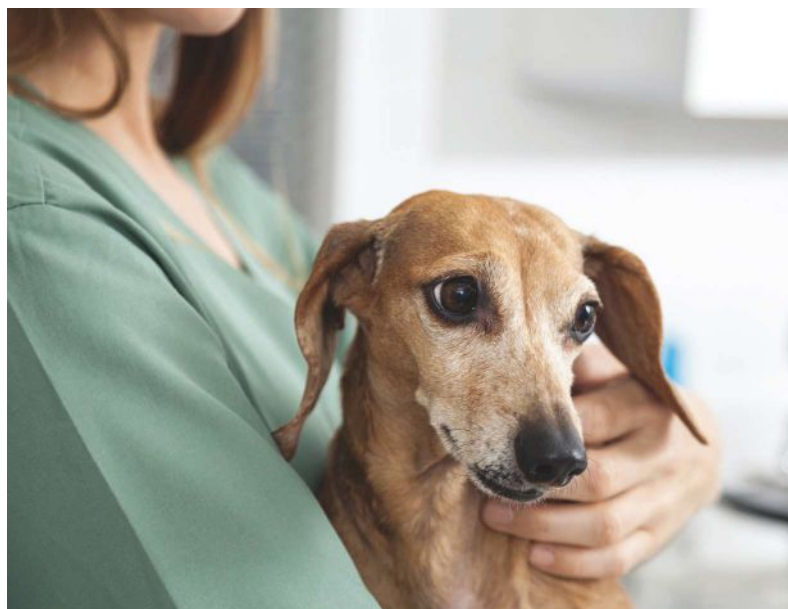
Over the past few weeks, I've been asking my compassion fatigue seminar and workshop participants the question, "How many of you consider yourself a healer?" Less than 10% of my audiences do, and I've noticed that most who do are veterinarians. This got me thinking...a lot.

Merriam-Webster defines *healer* as one who heals. So I dug a little deeper. What is the definition of *heal*? "To become healthy or well again; to make (someone or something) healthy or well again."

Stop me if I'm wrong, but is that not what veterinary medicine is all about? I wondered what I was missing and why veterinary professionals aren't identifying with their work in this way, especially veterinary technicians and nurses.

Healer or Not

This idea of healer goes back to the keynote speech given in August by Dr. Dan Siegel, neuropsychiatrist, at the American Veterinary Medical Association conference in San Antonio, Texas. Dr. Siegel spoke very candidly about the suicide rate plaguing veterinary medicine and said something I'm still thinking about. He said, "The problem is, we have a community of healers that haven't been taught to heal themselves."



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AS A VETERINARY TECHNICIAN, you've been given the rare gift of being able to aid in the healing of others, animals, and people. You've made a difference in more lives than you will ever know.

Is he on to something? I sure thought so. What I wasn't prepared for is that so many people in veterinary medicine don't consider themselves healers.

While it may not be necessary to claim "healer" status, what is necessary is to recognize that to provide care to another being in a sustainable way, we have to take care of ourselves first. This is not intuitive to anyone in a caregiving role.

When we put ourselves last on the list, why are we surprised when we feel stressed, anxious, depressed, depleted, or exhausted? It is our job to meet our needs, no one else's. We can't wait for others in our life to tell us to take a day for ourselves or go for a walk. That responsibility falls in our hands. We need to ask for what we need, unapologetically.

What You Need

Based on psychologist Abraham Maslow's "hierarchy of needs," all human beings need the following:

- Sustenance/Health
- Safety/Security
- Rest
- Autonomy/Authenticity
- Creativity/Play
- Meaning/Contribution
- Love/Caring
- Empathy/Understanding
- Community/Belonging

Can you identify needs that are not being met in your life? Most of us can, and that is okay. The question is, what can you do to fulfill those needs?

We need to realize that the extent to which our work is traumatizing is the same extent to which we need to balance it with self-initiated action aimed at meeting our needs. This is not something we can ignore or hope will go away.

I recently met an LVT who has been a veterinary technician for 30 years. She told me that asking for what she needs from her family is much of what has sustained her in her career. She asks for "alone time" routinely and time to transition when she comes home from work. Her family knows that she needs 20 minutes or so to decompress after work. This is how she meets her need for rest.

If you live with others, what do you need to ask for to take care of yourself?

If you live alone, what is one thing you can start doing daily for yourself?

It doesn't have to be very time consuming. Finding 10 to 20 minutes a day to gift yourself is often enough.

What Gets in the Way

The most common reason I hear for not attending to ourselves

is that it is selfish. *Au contraire, mon frère*. Being selfish is when we care only for and about ourselves. That is not at all what I'm suggesting, and if you are reading this, I am absolutely certain that you are incapable of it. As a veterinary technician, you are called to serve others. It's part of who you are. That is beyond commendable, and I am grateful that you are in this world, serving animals in the way that you do.

But. It is unreasonable and unrealistic to think that we can serve others, give the best of ourselves and our hearts, and not have to do anything to maintain that beautiful well within. How long will your car run if you never refill the tank?

What are you telling yourself about why your needs don't matter? Remember, our thoughts determine our feelings.^a Our feelings dictate our actions, and our actions determine our results. Said another way, what you choose to think determines your outcome in life.

So if your thoughts are along the lines of, *I don't deserve to take time for myself*, why is that what you are choosing to think? Could you consider a thought like, *I'm good at what I do, I care deeply for my patients/animals, and I know I'm better when I take time for me*.

How You Start Your Day Matters

I study under many of the personal development thought leaders of our time, and I've found that they all follow their own very intentional morning routine to set their day up for success. I do too.

My routine involves excellent coffee, real food, meditation, and exercise. Sometimes my exercise becomes my meditation, but the routine is non-negotiable. I. Do. It. Every. Morning. Sustenance and health are enormous needs of mine that I honor every day.

Sometimes this means I have to get up earlier depending on my travel schedule or the day's activities. I do it anyway, because I know that following my routine will dramatically improve the quality of my mind, body, and soul for that day. I'll be better able to serve those I care for and feel better about myself.

When the start of your day is consistently filled with chaos, and then you go to work in the often unpredictable world of veterinary medicine, it is too easy to set yourself up for failure in your well-being and emotional state.

Be a Rebel

I'm asking you to break out of the traditional box of caregivers and practice giving to yourself. Be rebellious and stare down martyrdom. Don't be surprised when your mind chatters back, because it inevitably will. There will always be something else you should be doing other than gifting to yourself. Do it anyway.

NexGard® (afoxolaner) Chewables

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

Description:

NexGard® (afoxolaner) is available in four sizes of beef-flavored, soft chewables for oral administration to dogs and puppies according to their weight. Each chewable is formulated to provide a minimum afoxolaner dosage of 1.14 mg/lb (2.5 mg/kg). Afoxolaner has the chemical composition 1-Naphthalenecarboxamide, 4-[5-[3-chloro-5-(trifluoromethyl)-phenyl]-4,5-dihydro-5-(trifluoromethyl)-3-isoxazolyl]-N-[2-oxo-2-[4,2,2-trifluoroethylamino]ethyl].

Indications:

NexGard kills adult fleas and is indicated for the treatment and prevention of flea infestations (*Ctenocephalides felis*), and the treatment and control of Black-legged tick (*Ixodes scapularis*), American Dog tick (*Dermacentor variabilis*), Lone Star tick (*Amblyomma americanum*), and Brown dog tick (*Rhipicephalus sanguineus*) infestations in dogs and puppies 8 weeks of age and older, weighing 4 pounds of body weight or greater, for one month.

Dosage and Administration:

NexGard is given orally once a month, at the minimum dosage of 1.14 mg/lb (2.5 mg/kg).

Dosing Schedule:

Body Weight	Afoxolaner Per Chewable (mg)	Chewables Administered
4.0 to 10.0 lbs.	11.3	One
10.1 to 24.0 lbs.	28.3	One
24.1 to 60.0 lbs.	68	One
60.1 to 121.0 lbs.	136	One
Over 121.0 lbs.	Administer the appropriate combination of chewables	

NexGard can be administered with or without food. Care should be taken that the dog consumes the complete dose, and treated animals should be observed for a few minutes to ensure that part of the dose is not lost or refused. If it is suspected that any of the dose has been lost or if vomiting occurs within two hours of administration, redose with another full dose. If a dose is missed, administer NexGard and resume a monthly dosing schedule.

Flea Treatment and Prevention:

Treatment with NexGard may begin at any time of the year. In areas where fleas are common year-round, monthly treatment with NexGard should continue the entire year without interruption.

To minimize the likelihood of flea reinfestation, it is important to treat all animals within a household with an approved flea control product.

Tick Treatment and Control:

Treatment with NexGard may begin at any time of the year (see Effectiveness).

Contraindications:

There are no known contraindications for the use of NexGard.

Warnings:

Not for use in humans. Keep this and all drugs out of the reach of children. In case of accidental ingestion, contact a physician immediately.

Precautions:

The safe use of NexGard in breeding, pregnant or lactating dogs has not been evaluated. Use with caution in dogs with a history of seizures (see Adverse Reactions).

Adverse Reactions:

In a well-controlled US field study, which included a total of 333 households and 615 treated dogs (415 administered afoxolaner, 200 administered active control), no serious adverse reactions were observed with NexGard.

Over the 90-day study period, all observations of potential adverse reactions were recorded. The most frequent reactions reported at an incidence of >1% within any of the three months of observations are presented in the following table. The most frequently reported adverse reaction was vomiting. The occurrence of vomiting was generally self-limiting and of short duration and tended to decrease with subsequent doses in both groups. Five treated dogs experienced anorexia during the study, and two of those dogs experienced anorexia with the first dose but not subsequent doses.

Table 1: Dogs With Adverse Reactions.

	Treatment Group			
	Afoxolaner		Oral active control	
	N ^a	% (n=415)	N ^b	% (n=200)
Vomiting (with and without blood)	17	4.1	26	12.5
Dry/Flaky Skin	13	3.1	7	3.5
Diarrhea (with and without blood)	13	3.1	7	3.5
Lethargy	7	1.7	4	2.0
Anorexia	5	1.2	9	4.5

^aNumber of dogs in the afoxolaner treatment group with the identified abnormality.

^bNumber of dogs in the control group with the identified abnormality.

In the US field study, one dog with a history of seizures experienced a seizure on the same day after receiving the first dose and on the same day after receiving the second dose of NexGard. This dog experienced a third seizure one week after receiving the third dose. The dog remained enrolled and completed the study. Another dog with a history of seizures had a seizure 19 days after the third dose of NexGard. The dog remained enrolled and completed the study. A third dog with a history of seizures received NexGard and experienced no seizures throughout the study.

To report suspected adverse events, for technical assistance or to obtain a copy of the MSDS, contact Merial at 1-888-637-4251 or www.merial.com/NexGard. For additional information about adverse drug experience reporting for animal drugs, contact FDA at 1-888-FDA-VETS or online at <http://www.fda.gov/AnimalVeterinary/SafetyHealth>.

Mode of Action:

Afoxolaner is a member of the isoxazoline family, shown to bind at a binding site to inhibit insect and acarine ligand-gated chloride channels, in particular those gated by the neurotransmitter gamma-aminobutyric acid (GABA), thereby blocking pre- and post-synaptic transfer of chloride ions across cell membranes. Prolonged afoxolaner-induced hyperexcitation results in uncontrolled activity of the central nervous system and death of insects and acarines. The selective toxicity of afoxolaner between insects and acarines and mammals may be inferred by the differential sensitivity of the insects and acarines' GABA receptors versus mammalian GABA receptors.

Effectiveness:

In a well-controlled laboratory study, NexGard began to kill fleas four hours after initial administration and demonstrated >99% effectiveness at eight hours. In a separate well-controlled laboratory study, NexGard demonstrated 100% effectiveness against adult fleas 24 hours post-infestation for 35 days, and was >93% effective at 12 hours post-infestation through Day 21, and on Day 35. On Day 28, NexGard was 81.1% effective 12 hours post-infestation. Dogs in both the treated and control groups that were infested with fleas on Day -1 generated flea eggs at 12- and 24-hours post-treatment (0-11 eggs and 1-17 eggs in the NexGard treated dogs, and 4-30 eggs and 0-118 eggs in the control dogs, at 12- and 24-hours, respectively). At subsequent evaluations post-infestation, fleas from dogs in the treated group were essentially unable to produce any eggs (0-1 eggs) while fleas from dogs in the control group continued to produce eggs (1-141 eggs).

In a 90-day US field study conducted in households with existing flea infestations of varying severity, the effectiveness of NexGard against fleas on the Day 30, 60 and 90 visits compared with baseline was 98.0%, 99.7%, and 98.9%, respectively. Collectively, the data from the three studies (two laboratory and one field) demonstrate that NexGard kills fleas before they can lay eggs, thus preventing subsequent flea infestations after the start of treatment of existing flea infestations.

In well-controlled laboratory studies, NexGard demonstrated >87% effectiveness against *Dermacentor variabilis*, >84% effectiveness against *Ixodes scapularis*, and >93% effectiveness against *Rhipicephalus sanguineus*, 48 hours post-infestation for 30 days. At 72 hours post-infestation, NexGard demonstrated >97% effectiveness against *Amblyomma americanum* for 30 days.

Animal Safety:

In a margin of safety study, NexGard was administered orally to 8 to 9-week-old Beagle puppies at 1, 3, and 5 times the maximum exposure dose (6.3 mg/kg) for three treatments every 28 days, followed by three treatments every 14 days, for a total of six treatments. Dogs in the control group were sham-dosed. There were no clinically-relevant effects related to treatment on physical examination, body weight, food consumption, clinical pathology (hematology, clinical chemistry, or coagulation tests), gross pathology, histopathology or organ weights. Vomiting occurred throughout the study, with a similar incidence in the treated and control groups, including one dog in the 5x group that vomited four hours after treatment.

In a well-controlled field study, NexGard was used concomitantly with other medications, such as vaccines, anthelmintics, antibiotics (including topicals), steroids, NSAIDs, anesthetics, and antihistamines. No adverse reactions were observed from the concomitant use of NexGard with other medications.

Storage Information:

Store at or below 30°C (86°F) with excursions permitted up to 40°C (104°F).

How Supplied:

NexGard is available in four sizes of beef-flavored soft chewables: 11.3, 28.3, 68 or 136 mg afoxolaner. Each chewable size is available in color-coded packages of 1, 3 or 6 beef-flavored chewables.

NADA 141-406, Approved by FDA

Marketed by: Frontline Vet Labs™, a Division of Merial, Inc.
Duluth, GA 30096-4640 USA

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A workshop participant recently told me that she had started honoring her need for creativity/play by taking a weekly painting class, something that she once really enjoyed and had decided to give to herself again. She told me how she fights with herself every week about it. Her mind will say things like, *You shouldn't go, you have so much laundry to do.* But instead of giving in to this subtle, "practical" sabotage, she pushes back and decides, *No, this is something I'm doing for myself. I really enjoy it, and it makes me feel good when I do it. The laundry isn't going anywhere.*

We all have this mind chatter. The best thing you can do with it is:

1. Anticipate it

Expect that your mind will try to derail you from your self-care efforts. Prepare for it. Think about what you will tell yourself when your mind tries to talk you out of going for that walk, doing yoga, enjoying a cup of tea outside, or reading a book for pleasure.

2. Acknowledge it

I literally say, *Oh I see you, or Oh you again*, to my mind chatter. I know I am not my mind,^a so when I recognize my mind trying to talk me out of what is in my best interest, I just smile and acknowledge it. I don't dwell on it or believe it, but I let it know I see it.

3. Answer it in a way that best serves you

This is where we can decide to think differently. Many people believe their mind chatter and never dream of answering it from their heart, *No. I need to and deserve to have some time to myself.* This will become much easier the more you do it, so don't give in to your old way of thinking.

As a veterinary technician, you've been given the rare gift of being able to aid in the healing of others—animals—and people. You've made a difference in more lives than you will ever know. If you also believe you have this gift, then please honor, cherish, nurture, and feed it.

The only thing holding you back from being the best version of yourself is your own thoughts. Thankfully, you can choose different thoughts any time you want. Why not start now? ■

^aFor more tips on how to learn to recognize and change negative thought patterns, read "The Golden Ticket to Feeling Better" on todaysveterinarytechnician.com.