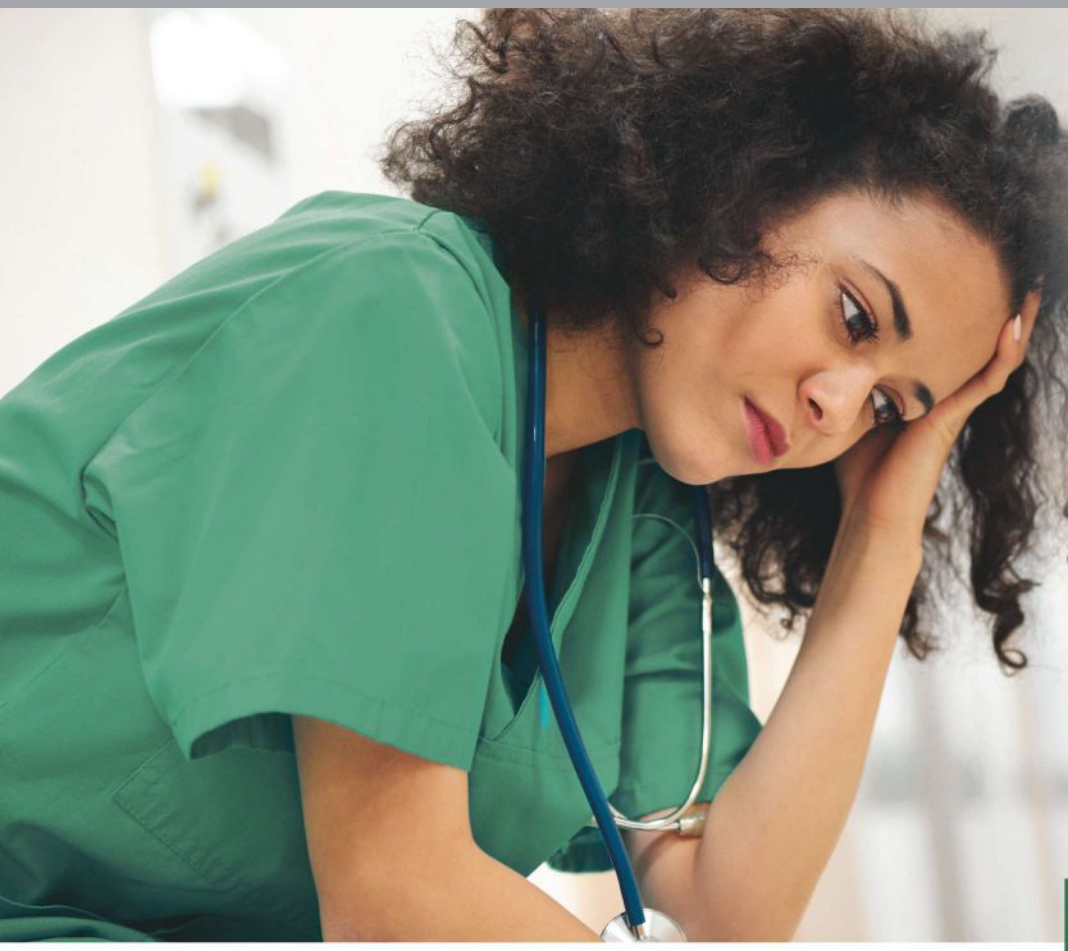

WHAT IS BURNOUT?
It's a state of emotional, physical, and mental exhaustion caused by excessive and prolonged stress—here's how to overcome it.

Burnout in Veterinary Nursing

When I started working as a veterinary nurse in 2008, the hours were not great. In fact, they were horrible. I was working Friday, Saturday, and Sunday overnights, 12 to 13 hours at a time, at a very busy ER private practice. Those hours were rough, even for a 20-year-old. The pay was enough for me to get by, but I always jumped at the chance to get overtime pay. A few months in, I decided to get a second job, working daylight hours at a general practice. I would come home from work, sleep for 2 to 3 hours, and then get up and go to the day practice. I was busy, but I loved what I was doing.

MEET THE AUTHOR

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Emily obtained her associate's degree from Vet Tech Institute in December 2008, leading her to her registered veterinary technician license in January 2009.

She moved to Maryland where she found her place in veterinary medicine—medical oncology. With her passion for helping animals and support from her coworkers, she achieved Veterinary Technician Specialist certification in oncology in 2014.

Emily is currently working at Advanced Veterinary Care, a small animal specialty and level 1 trauma center, located in Salt Lake City, Utah. She has a love for food and wine, exploring her new outdoor surroundings in Utah, and spending time with her loved ones and pets.

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Fast forward 10 years, and I am still working as a veterinary nurse, but now in a medical oncology department. I had gone as far as a veterinary nurse can without further schooling, obtaining my VTS in oncology in 2014. I was always the type of worker who gave it my all. I was in before anyone else in the department, and I was usually the last to leave.

In August 2018, I quit my job for a cross-country move and took a month off before joining a new hospital. In that month off, something happened. I realized how detached I had become at my previous job. I had lost sympathy for the animals and empathy for the owners. In fact, I remember one day at my previous job, a coworker was trying to explain that some clients in the lobby were very late for their consult, but still really wanted to be seen. She tried to pull on my heartstrings (as we all do in veterinary medicine) by saying, "They are upset; their cat has cancer!"

My response has stuck with me for years. "They all have cancer!" I shouted.

I should have realized at that time what I had become—a robot. A robot who was very good at her job, but who was missing the warm "fuzzies" that she used to get when she started as a veterinary nurse. Now, at my new job, I find myself being much more compassionate, patient, and even-keeled when dealing with patients and clients. I have found my old self again, the person who got into a veterinary nursing career to help animals and people. The one who has a drive to learn and improve every day. I now know what burnout is like for me. I am not alone.

According to an article published in the *Annual Review of Psychology*, "Burnout is a prolonged response to chronic emotional and interpersonal stressors on the job."[1] Veterinary professionals (doctors, nurses, and administrative staff) are exposed to raw emotions day in and day out. On top of witnessing the suffering of patients and the grief of clients, we have other stressors in our profession that contribute to burnout. A demographic study, conducted by the National Association of Veterinary Technicians in America (NAVTA) in 2016, confirmed that the number 1 reason why veterinary nurses leave the field is insufficient pay. This is followed by "lack of respect from the employer (20%), burnout (14%), lack of benefits, childcare difficulties, lack of respect for the profession and compassion fatigue."[2]

What can we do as members of this profession to decrease the incidence of burnout experienced by licensed veterinary nurses? I think it starts with employers. The NAVTA study showed that the majority of responders (44%) earn a salary of $15 to $20 per hour.[2] Even the best-paid veterinary nurses in this study ($20/hr) are only bringing home about $28,000 annually (40 hours/week, 50 weeks, 30% taxes).[2] To put that number into perspective for you, the national poverty level, for a family of four, is $25,000.[3]

Symptoms of burnout can vary from person to person and can occur throughout multiple stages of a veterinary nurse's career, making it difficult to identify.

The first step for employers is to respect and recognize the value of their licensed veterinary nurses and to pay them accordingly. In addition, employers can help by taking care of their employees' well-being. Veterinary nurses should be encouraged to use their earned vacation time, and should receive regular lunch breaks at appropriate times. And while there are many veterinary nurses who will jump at the chance for overtime hours, employers should limit the amount of overtime hours, so that employees are ensured of maintaining a work-life balance.

Symptoms of burnout can vary from person to person and can occur throughout multiple stages of a veterinary nurse's career, making it difficult to identify. Those who suffer from burnout may experience trouble sleeping, retraction from interaction with loved ones, anger (at work and outside of work), and weight gain.[4] They may also find their work to be frustrating and develop negative attitudes toward the workplace and coworkers.[5] They may develop new or worsening compulsive behaviors, which may include both healthy and unhealthy practices (exercising, dieting, smoking, and alcoholic beverage consumption).[4] Losing patience with our clients and/or patients is one of the red flags of burnout.[4]

The American Veterinary Medical Association (AVMA) Group Health and Life Insurance Trust compared airline preflight safety briefings to burnout in veterinary medicine; in order to help others, we must first help ourselves.[6] Burnout prevention does not only fall on the shoulders of employers. We need to look out for ourselves and our colleagues.

KEEP BURNOUT AT BAY

The AVMA article recommends taking care of yourself as the number 1 thing to avoid burnout. Exercising, eating right, and making yourself a priority are key steps to take. Enjoying your time off and spending it with friends and loved ones will help you reset.

Along with fun and play, people in caregiving jobs also need a relaxation technique.[3] Relaxation techniques don't have to be the same for everyone. Some individuals might find reading works for them, whereas others enjoy yoga, or a day at the spa.

Try to be positive and encouraging in the workplace, and not negative and demoralizing. The power of positive thinking, along with the ability to perceive and celebrate positive outcomes, are highly correlated with lower levels of compassion fatigue and higher levels of satisfaction.[7]

The last recommendation for combatting burnout is: do not be ashamed to talk about it. Hospital managers and supervisors are busy people; they may not pick up on the signs you are exhibiting. Talk to them about an action plan to get you back to feeling the warm fuzzies again, and less like a robot. TVN

References

1. Maslach CH, Schaufeli WB, Leiter MP. Job burnout. *Ann Rev Psych* 2001;52(1):397-422.
2. National Association of Veterinary Technicians in America. NAVTA 2016 Demographic Survey. NAVTA.net.cdn.ymaws.com/www.navta.net/resource/resmgr/docs/2016_demographic_results.pdf.
3. U.S. Department of Health and Human Services. U.S. Federal Poverty Guidelines Used to Determine Financial Eligibility for Certain Federal Programs. 13 Jan 2018. https://aspe.hhs.gov/poverty-guidelines.
4. DVM 360 Staff. Recognizing the warning signs of burnout. DVM360.com. 1 Oct. 2005. veterinarycalendar.dvm360.com/recognizing-warning-signs-burnout.
5. Scheidegger J. Burnout, compassion fatigue, depression—what's the difference? DVM360.com. 1 May 2015. veterinarynews.dvm360.com/burnout-compassion-fatigue-depression-what-s-difference.
6. AVMA Group Health and Life Insurance Trust. Managing Stress and Avoiding Burnout. Avma.org. 1 Aug. 2004. avma.org/News/JAVMANews/Pages/040815k.aspx.
7. Figley C, Roop R. Compassion Fatigue in the Animal Care Community. Washington, D.C.: *Humane Society Press,* 2006.

Heartgard® Plus
(ivermectin/pyrantel)

CHEWABLES

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

INDICATIONS: For use in dogs to prevent canine heartworm disease by eliminating the tissue stage of heartworm larvae *(Dirofilaria immitis)* for a month (30 days) after infection and for the treatment and control of ascarids *(Toxocara canis, Toxascaris leonina)* and hookworms *(Ancylostoma caninum, Uncinaria stenocephala, Ancylostoma braziliense).*

DOSAGE: HEARTGARD® Plus (ivermectin/pyrantel) should be administered orally at monthly intervals at the recommended minimum dose level of 6 mcg of ivermectin per kilogram (2.72 mcg/lb) and 5 mg of pyrantel (as pamoate salt) per kg (2.27 mg/lb) of body weight. The recommended dosing schedule for prevention of canine heartworm disease and for the treatment and control of ascarids and hookworms is as follows:

Dog Weight	Chewables Per Month	Ivermectin Content	Pyrantel Content	Color Coding On Foil Backing and Carton
Up to 25 lb	1	68 mcg	57 mg	Blue
26 to 50 lb	1	136 mcg	114 mg	Green
51 to 100 lb	1	272 mcg	227 mg	Brown

HEARTGARD Plus is recommended for dogs 6 weeks of age and older.
For dogs over 100 lb use the appropriate combination of these chewables.

ADMINISTRATION: Remove only one chewable at a time from the foil-backed blister card. Return the card with the remaining chewables to its box to protect the product from light. Because most dogs find HEARTGARD Plus palatable, the product can be offered to the dog by hand. Alternatively, it may be added intact to a small amount of dog food. The chewable should be administered in a manner that encourages the dog to chew, rather than to swallow without chewing. Chewables may be broken into pieces and fed to dogs that normally swallow treats whole.

Care should be taken that the dog consumes the complete dose, and treated animals should be observed for a few minutes after administration to ensure that part of the dose is not lost or rejected. If it is suspected that any of the dose has been lost, redosing is recommended.

HEARTGARD Plus should be given at monthly intervals during the period of the year when mosquitoes (vectors), potentially carrying infective heartworm larvae, are active. The initial dose must be given within a month (30 days) after the dog's first exposure to mosquitoes. The final dose must be given within a month (30 days) after the dog's last exposure to mosquitoes.

When replacing another heartworm preventive product in a heartworm disease preventive program, the first dose of HEARTGARD Plus must be given within a month (30 days) of the last dose of the former medication.

If the interval between doses exceeds a month (30 days), the efficacy of ivermectin can be reduced. Therefore, for optimal performance, the chewable must be given once a month on or about the same day of the month. If treatment is delayed, whether by a few days or many, immediate treatment with HEARTGARD Plus and resumption of the recommended dosing regimen will minimize the opportunity for the development of adult heartworms.

Monthly treatment with HEARTGARD Plus also provides effective treatment and control of ascarids *(T. canis, T. leonina)* and hookworms *(A. caninum, U. stenocephala, A. braziliense).* Clients should be advised of measures to be taken to prevent reinfection with intestinal parasites.

EFFICACY: HEARTGARD Plus Chewables, given orally using the recommended dose and regimen, are effective against the tissue larval stage of *D.immitis* for a month (30 days) after infection and, as a result, prevent the development of the adult stage. HEARTGARD Plus Chewables are also effective against canine ascarids (*T. canis, T. leonina*) and hookworms (*A. caninum, U. stenocephala, A. braziliense*).

ACCEPTABILITY: In acceptability and field trials, HEARTGARD Plus was shown to be an acceptable oral dosage form that was consumed at first offering by the majority of dogs.

PRECAUTIONS: All dogs should be tested for existing heartworm infection before starting treatment with HEARTGARD Plus which is not effective against adult *D. immitis.* Infected dogs must be treated to remove adult heartworms and microfilariae before initiating a program with HEARTGARD Plus.

While some microfilariae may be killed by the ivermectin in HEARTGARD Plus at the recommended dose level, HEARTGARD Plus is not effective for microfilariae clearance. A mild hypersensitivity-type reaction, presumably due to dead or dying microfilariae and particularly involving a transient diarrhea, has been observed in clinical trials with ivermectin alone after treatment of some dogs that have circulating microfilariae.

Keep this and all drugs out of the reach of children.
In case of ingestion by humans, clients should be advised to contact a physician immediately. Physicians may contact a Poison Control Center for advice concerning cases of ingestion by humans.

Store between 68°F - 77°F (20°C - 25°C). Excursions between 59°F - 86°F (15°C - 30°C) are permitted. Protect product from light.

ADVERSE REACTIONS: In clinical field trials with HEARTGARD Plus, vomiting or diarrhea within 24 hours of dosing was rarely observed (1.1% of administered doses). The following adverse reactions have been reported following the use of HEARTGARD: Depression/lethargy, vomiting, anorexia, diarrhea, mydriasis, ataxia, staggering, convulsions and hypersalivation.

SAFETY: HEARTGARD Plus has been shown to be bioequivalent to HEARTGARD, with respect to the bioavailability of ivermectin. The dose regimens of HEARTGARD Plus and HEARTGARD are the same with regard to ivermectin (6 mcg/kg). Studies with ivermectin indicate that certain dogs of the Collie breed are more sensitive to the effects of ivermectin administered at elevated dose levels (more than 16 times the target use level) than dogs of other breeds. At elevated doses, sensitive dogs showed adverse reactions which included mydriasis, depression, ataxia, tremors, drooling, paresis, recumbency, excitability, stupor, coma and death. HEARTGARD demonstrated no signs of toxicity at 10 times the recommended dose (60 mcg/kg) in sensitive Collies. Results of these trials and bioequivalency studies, support the safety of HEARTGARD products in dogs, including Collies, when used as recommended.

HEARTGARD Plus has shown a wide margin of safety at the recommended dose level in dogs, including pregnant or breeding bitches, stud dogs and puppies aged 6 or more weeks. In clinical trials, many commonly used flea collars, dips, shampoos, anthelmintics, antibiotics, vaccines and steroid preparations have been administered with HEARTGARD Plus in a heartworm disease prevention program.

In one trial, where some pups had parvovirus, there was a marginal reduction in efficacy against intestinal nematodes, possibly due to a change in intestinal transit time.

HOW SUPPLIED: HEARTGARD Plus is available in three dosage strengths (See DOSAGE section) for dogs of different weights. Each strength comes in convenient cartons of 6 and 12 chewables.

For customer service, please contact Merial at 1-888-637-4251.

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