Certain, the pandemic has inspired new ways to think about veterinary medicine, new ways for clients to communicate and even for veterinary professionals to communicate with one another. One case study is our own cat, a 17 ½-year old bow-legged and arthritic cat named Roxy.

Roxy is in pretty decent health, or at least her issues are controlled. She receives Leukeran (chlorambucil) twice weekly for presumed intestinal lymphoma, presumed because that’s what the lab said after reading the biopsy. In any case, it has dramatically reduced her GI signs for several years now. How do we manage her osteoarthritis? At first, our primary care veterinarian placed her on a reasonable dose of Gabapentin.

As her arthritis appeared to worsen, the Gabapentin was increased but that caused her to take extended catnaps. “Let me hold Roxy’s paw and we’ll slowly increase the dosage,” said Robin Downing, DVM, MS, DAAAPM, DACVSMR, CVPP, CCRP, who is in Denver, CO.

An expert in pain management, my friend Dr. Downing consulted with my Chicago, IL-based primary care practitioner Natalie Marks, DVM. Some veterinarians might somehow be offended by the input, but Dr. Marks welcomed her contribution.

Aside from going ahead with Leukeran, Dr. Marks had already suggested Purina FortiFlora for GI support and Roxy is also on Amlodipine Besylate (for hypertension) as well as Adequan for her OA. Meanwhile, Dr. Downing gradually upped the dose the gabapentin to 100 mg. (twice daily), although Roxy is only 6.5lbs. Dr. Downing was totally correct increasing the dosage, titrated so slowly, and hasn't made Roxy any drowsier.

“Multi-modal is the best approach for osteo-arthritis for nearly all cats,” Downing added. To that end, we began to employ the Assisi Loop which provides targeted pulsed electromagnetic field technology to treat pain and inflammation benefiting not only her osteoarthritis, but potentially also her GI issues.

Clearly, Roxy benefited as a result of the 2018 collaboration between Dr. Downing and Dr. Marks. However, this March I noted Roxy appeared to be struggling a tad more and asked Dr. Marks for advice.

“The struggle we have as small animal practitioners is that we only have certain pain medications that are safe and approved for cats as they age, and many are contraindicated for cats with other conditions,” said Dr. Marks. “Our goal (for our patients) is to have the best quality of life and to be as pain free as possible every day. The beauty of veterinary medicine today is that we have a variety of integrative therapies which are readily available, and I thought about medical massage therapy. Technology can deliver a way to demonstrate options as never before.”

Dr. Marks suggested I contact Rosemary LoGiudace, DVM, Diplomate ACVSMR, CCRT, CVA, CVSMT, FCoAC, who is Hanover Park, IL. She is at least an hour from my home not to mention that was all happening at the height of the pandemic.

Dr. Marks said “I think this may be the perfect use of telehealth.”

It turned out that Dr. Marks was absolutely right. While Dr. LoGiudace noted that ideally she would want to get her hands on Roxy to feel her flexibility and for heat in the joints, she was able to communicate with Dr. Marks who has known Roxy most of her life, and had very recently examined her.

Using my phone, I simply took video of Roxy moving in her own element from different angles as directed by Dr. LoGiudace, who said, “When I can see the dog, cat or horse moving in a natural way I can, of course, get a good feel for stride and how the joints are moving. Very few dogs and cats are going to show me in the exam how they move at home.”

Dr. LoGiudace and I participated in a Zoom show ‘n tell call. Dr. LoGiudace held a plush dog in her lap. She showed me exactly what to do, where to do it, and how much pressure to exert. Old-school written directions could never replicate Dr. LoGiudace demonstrating, and then watching me and directing me, “move your hand slightly lower.”

I gradually spent more time massaging Roxy almost every night. Roxy not only didn’t fend off the nightly spa treatment, she began to request it; when I stop she paws at my face demanding more.
“Right now, we do need to be creative. I hope this specific type of partnership, and using technology in the way we did with Roxy, becomes a model sticking around long after the pandemic.”

“Are you kidding?” said Dr. Downing. “If this was causing Roxy pain or discomfort, or Roxy didn’t enjoy it—she still moves well enough to walk away.”

Watching video of Roxy two weeks post the start of the Dale Spa treatment, Dr. LoGiudace wasn’t surprised about the impact of medical massage to slightly but noticeably increase Roxy’s mobility and interest in exploring or moving to whatever room my wife and I are in. Also Dr. LoGiudace is now inspired about the idea of using video and virtual technology to support clients in a way she hadn’t thought about.

Dr. Marks agreed, “I absolutely saw a difference in Roxy, and I have perspective knowing her over half her life. What I really loved about this collaboration isn’t only about considering integrative care, it’s about how veterinarians are being creative to help all involved, especially at this time. Right now, we do need to be creative. I hope this specific type of partnership, and using technology in the way we did with Roxy, becomes a model sticking around long after the pandemic.”

Dr. Downing agreed, “Make no mistake, there’s no substitute for being hands on with our patients, and for office visits, but you can certainly observe more remotely than what is possible in an exam room. To schedule time for a virtual lesson in medical massage therapy, acupressure techniques or teaching animals how to stretch are only a few examples.”

Dr. Downing added, this is a great niche for technicians and nurses to participate. “Technicians or nurses can be formally trained at the University of Tennessee in their animal rehabilitation program or other programs or internal training within the clinic by a qualified professional who has received training. Delegating a qualified technician and nurse who has an interest, and can take the time to do this and develop a rapport with the client virtually is very valuable at this moment. This enhances the relationship of the client to bond to the practice and the practice team. By allowing a veterinary nurse or technician to grow personally, has increased real life value and job satisfaction.”

Dr. Downing agrees this virtual show and tell service should include a fee. She continued, “All this not only benefits the patient, but the client feels ‘I’m helping my pet,’ and that helps to cement the human/animal bond. What’s more, when positive interactions with the primary care veterinarian occur—and it’s clear that all that matters most is the well-being of the patient, that further bonds the client to that practice. I am absolutely certain, what Roxy has experienced and benefited from will soon be standard of care.”