

# ASSESSMENT OF ONCOLOGICAL PAIN IN CANINE SPECIES



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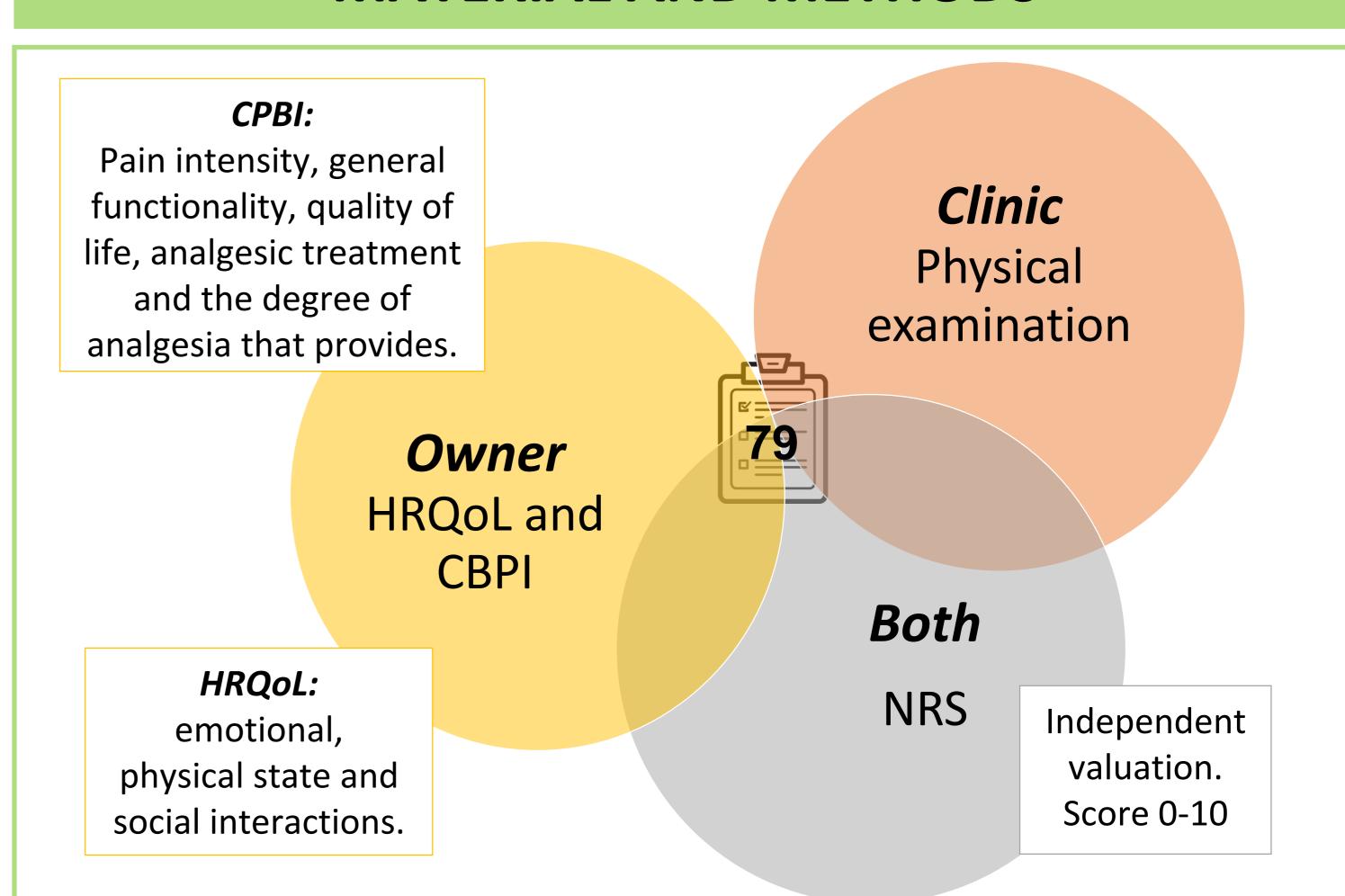
### INTRODUCTION

Previous trials prove the great negative influence of pain on health and patients' quality of life. Some authors believe in the existence of similarities between human and animal oncological pain. However, there is a lack of knowledge about incidence and features of cancer-related pain in animals, as well as a non-evaluation of oncologic pain and probably a consequent insufficient treatment.

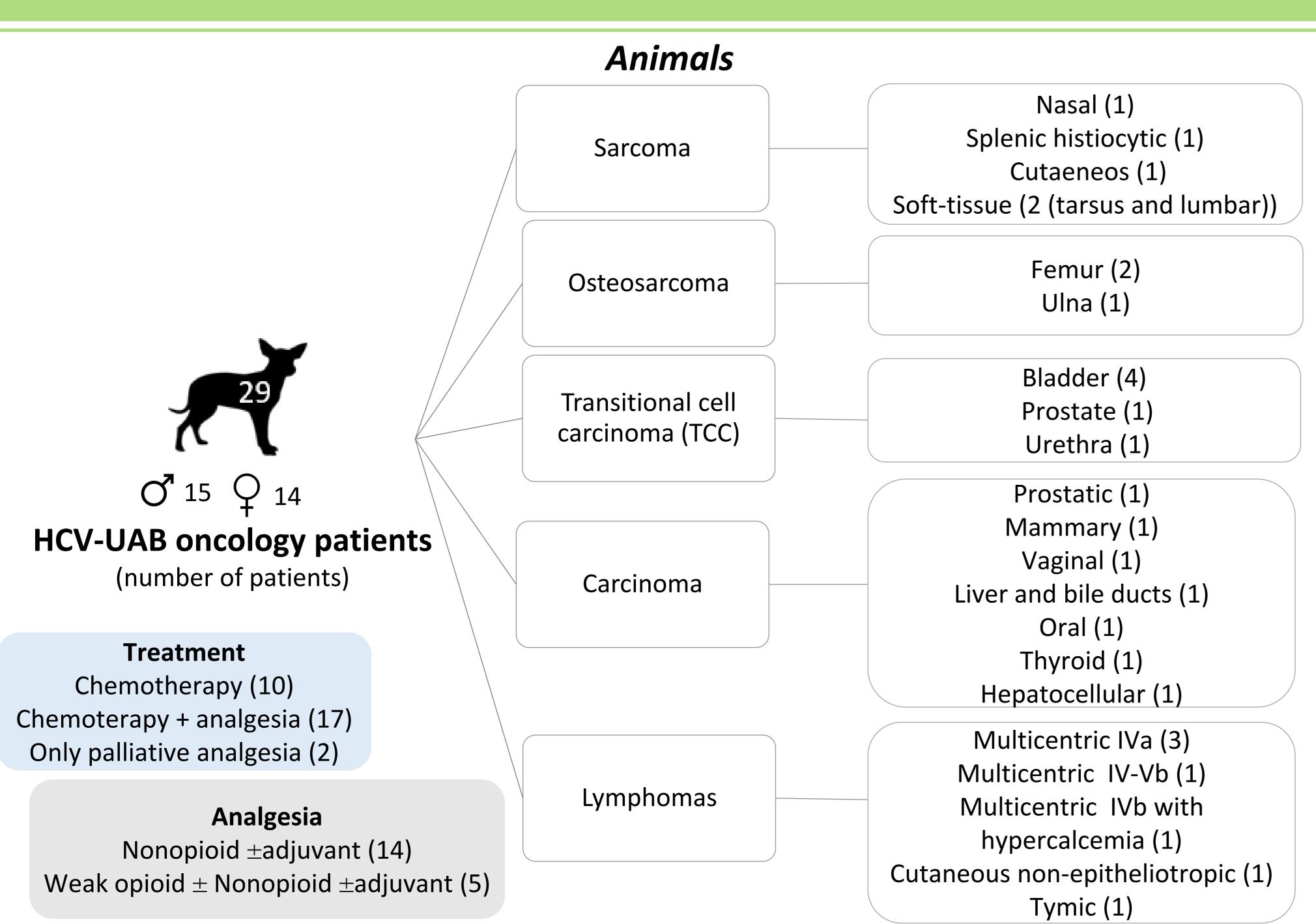
#### **OBJECTIVES**

- 1. Evaluate pain's severity, functional impact and quality of life in canine cancer patients of the UAB Veterinary Clinical Hospital (HCV-UAB).
- 2. Analyze the evolution of the studied parameters throughout the treatment and assess if the analgesia received was effective.
- B. Evaluate the usefulness of Health-Related Quality-of-Life Questionnaire (HRQoL), Canine Brief Pain Index (CPBI) and Numeric pain Rating Scale (NRS). Improve the method using previous human medicine studies.

# MATERIAL AND METHODS



### RESULTS



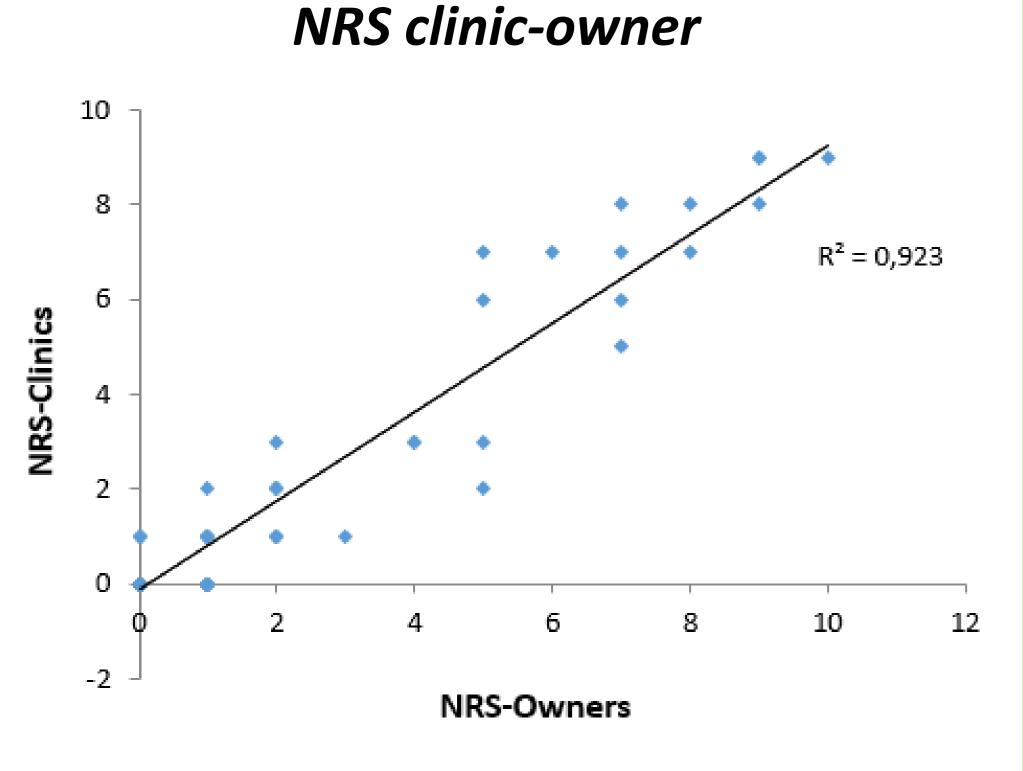
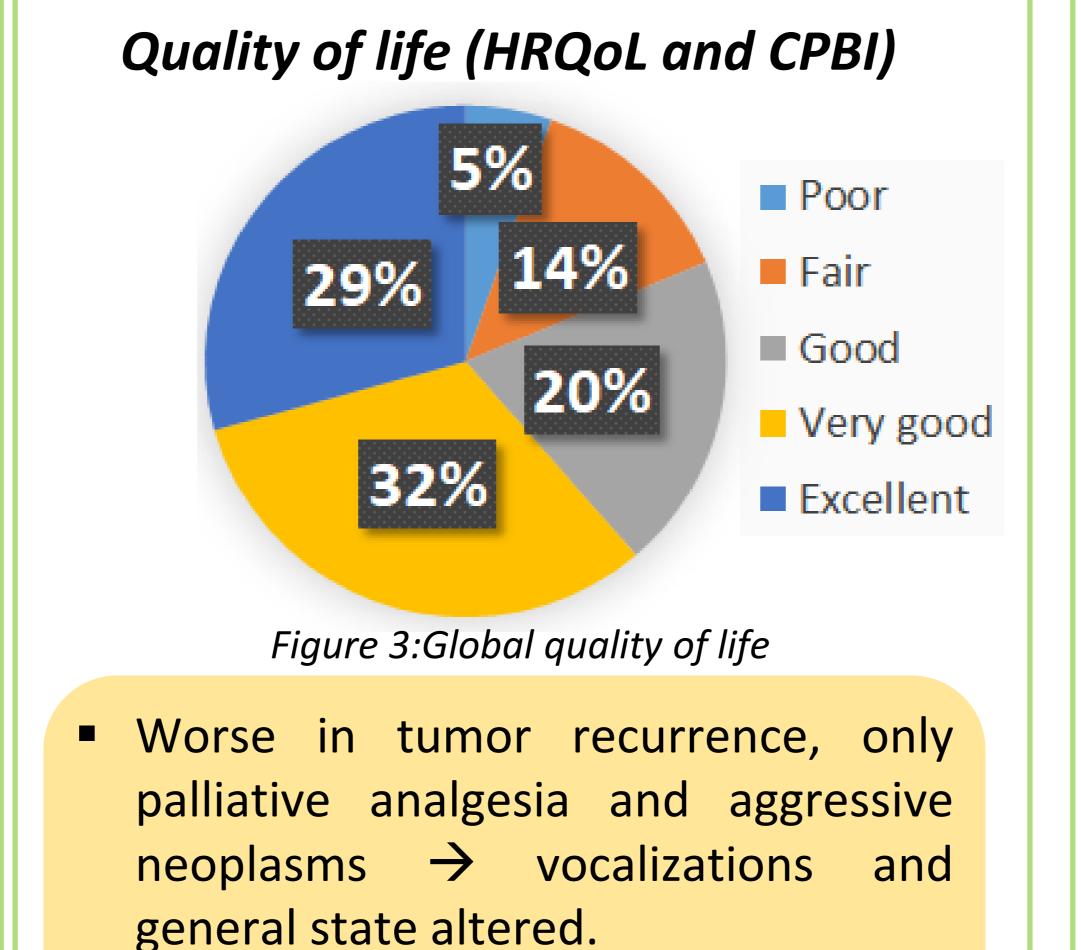


Figure 4: Correlation between clinic and owner NRS score

- Very good correlation.
- Owners' overall scores slightly higher



Chemotherapy

gastrointestinal disorders

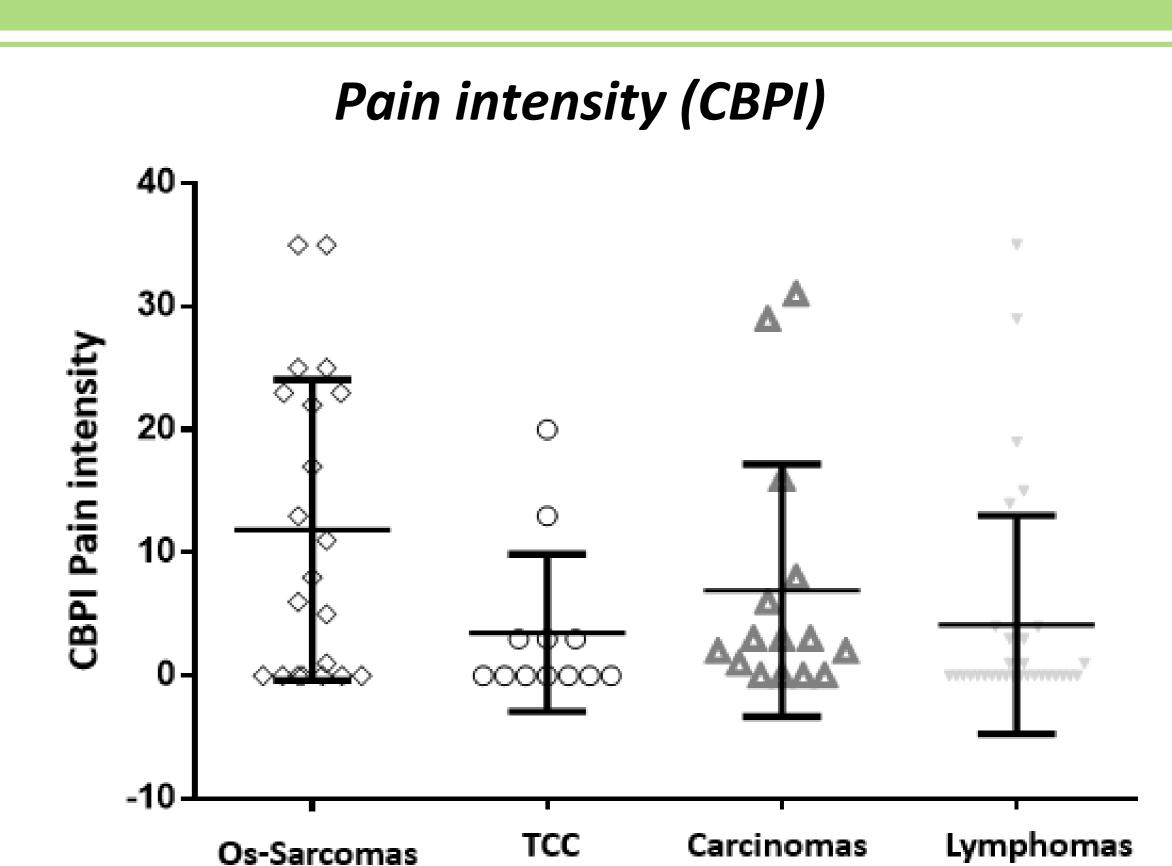


Figure 1: Pain intensity in function of tumor histopathology (mean ±SD). Range: 0=no pain, 40=extreme pain

- 31% of patients with scores above 10 points → Insufficient analgesia.
- Statistically significant differences between os-sarcomas and lymphomas.

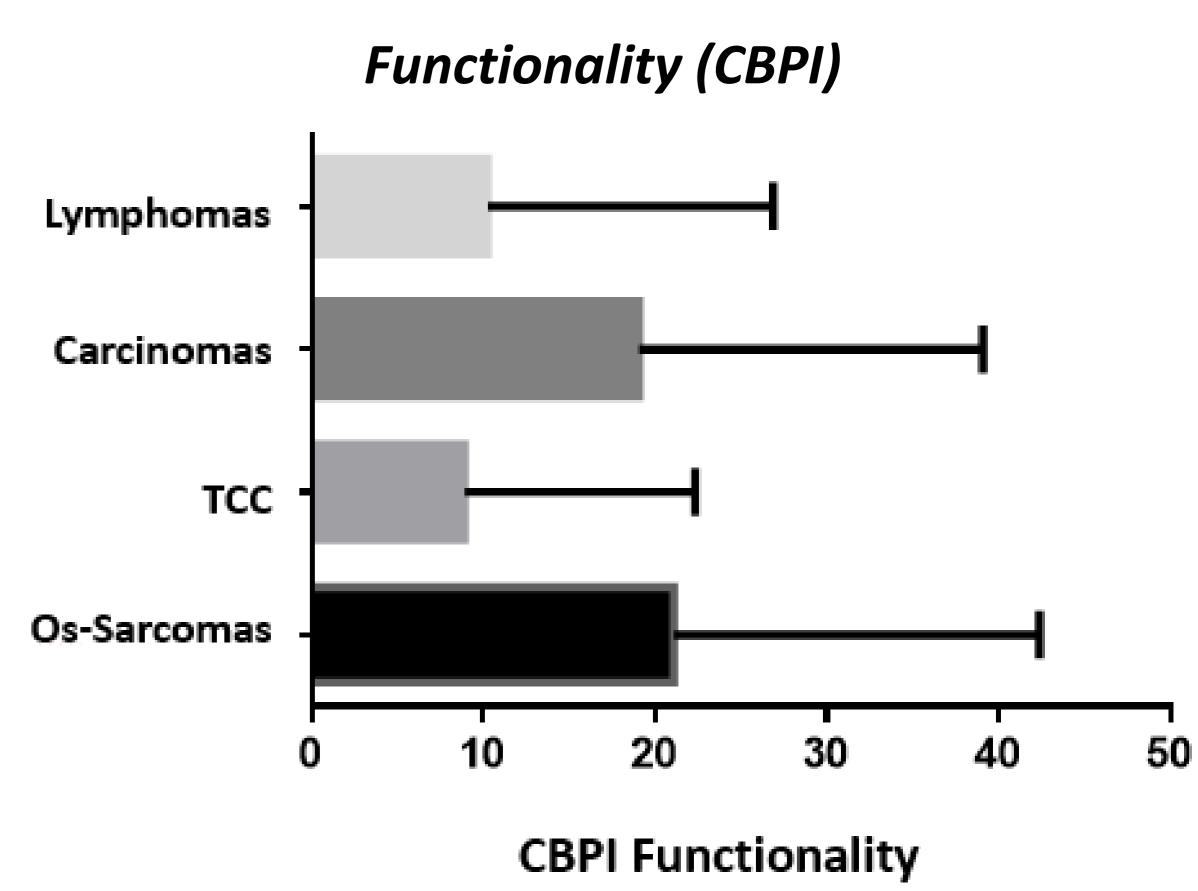


Figure 2: Functionality affect depending on tumor histopathology (mean ±SD). Range: 0=no interference; 60=completely interferes.

 The worst functionality appears in patients with higher pain intensity or osteoarthritis.

## **DISCUSSION AND CONCLUSIONS**

→ Vomits

and

HRQoL and CBPI facilitate communication between owner and veterinarian, increase the possibility of detecting treatment adverse effects and changes in patient's condition. However they are more focused on the assessment of disease and treatment than on pain evaluation. So in the future, adaptations giving more value to pain questions and quantitative sensory test inclusions may improve their precision.

Further research is needed to improve oncological canine pain knowledge. Next studies should include a larger number of patients, discrimination by tumor location and complete follow-up.