What is a Good Death?

Ending the use of the gas chamber for homeless animals, one shelter and state at a time

BY CARRIE ALLAN

The affidavit filed by former animal control officer Angel Partain said it all: One cat ran back and forth for minutes on end in the carbon monoxide chamber, jumping and slamming his body against the cage as though trying to escape. A puppy who'd been gassed with other animals was still alive and crying after the rest were dead, so he was gassed again, and then again, until he finally died, too.

"The noise from the howling dogs inside the chamber was so loud and sounded so awful," Partain said, "that shelter workers always tried to get as far away from the chamber as possible once the gas came on."

Partain was testifying in a case filed in Georgia in March 2007 by former state representative Chesley Morton and a pet owner whose dog had been killed in a shelter's new carbon monoxide chamber. The use of the new chamber, they argued, was a flagrant violation of Georgia's 1990 Humane Euthanasia Act, which made injection by sodium pentobarbital the exclusive method of euthanasia for homeless dogs and cats. Under the law, backed by Morton during his tenure in the legislature, a few facilities were allowed to continue operating existing gas chambers, but the construction of new chambers was prohibited.

Though the language of the law is clear, Georgia Department of Agriculture Commissioner Tommy Irvin allowed the use of new gas chambers in several counties anyway. When testifying as a defendant in the case, Irvin was asked if he had told certain shelters they could use gas chambers for euthanasia. His response: "I probably told them we would pose no objections."

Superior Court Judge Cynthia Wright ordered an injunction to force the Department of Agriculture to enforce its own law. In her decision, Wright addressed shelter workers around the state, acknowledging the difficulty of their jobs and noting that she wished she could help them by ordering the spaying and neutering of all animals.

"If I had the authority to order that, I would," she wrote. "But that hasn't been granted to me. But what I can do is to make sure that ... the unwanted animals given up to shelters ... on a daily basis, are, if they can't find a good home, euthanized in accordance with the laws duly passed by the Georgia General Assembly, not last year, not two years ago, but 17 years ago."

In October, a superior court in Georgia found Irvin and the Department of Agriculture in contempt of court for continuing to allow use of the gas chamber some seven months after Wright's injunction. Late that month, the department was seeking to purge the contempt finding by withdrawing its approval of euthanasia procedures at a shelter still using the chamber.

State-of-the-Art? Out of the Question

The case brought attention to a long-simmering controversy. Euthanasia via injection with sodium pentobarbital is universally recommended by animal welfare and veterinary groups—including The Humane Society of the United States, the American Veterinary Medical Association (AVMA), the ASPCA, American Humane, and the National Animal Control Association. The

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The gas chambers still in use at some shelters are often old, and rarely meet the procedural guidelines set by veterinary and animal welfare experts.

HSUS is so committed to its stance on injection euthanasia that the organization's 2002 *Euthanasia Training Manual* devoted eleven chapters to injection euthanasia processes, addressing other methods of euthanasia in a single, largely cautionary chapter at the end of the text.

Yet in spite of the fact that experts universally recommend sodium pentobarbital euthanasia as the most humane, progressive, and safe method, euthanasia by carbon monoxide has proved very difficult to fully eliminate nationwide.

Some shelters continue to use carbon monoxide chambers because managers believe the method is easier for staff or cheaper for the organization. But more often, they do so because the laws in their state prevent shelter personnel from obtaining sodium pentobarbital and other drugs necessary to the procedure.

The euthanasia of pets in animal shelters has long caused much anguish. But most debate tends to address the best ways to end the need for it. Everyone in the animal sheltering field dreams of the day when the euthanasia of healthy, adoptable animals is a thing of the past. But in the meantime, it's vital to consider the procedures involved in euthanasia itself and what those procedures mean—not only for the animals, but to the staff who have to perform them.

People unfamiliar with animal euthanasia may harbor misconceptions about gas chambers. After all, injection euthanasia requires a needle, which can cause an animal a moment of discomfort—so those who haven't witnessed euthanasia procedures may envision the carbon monoxide chamber as a pain-free, peaceful alternative that causes animals to simply drift off to sleep.

"That's not the reality of chambers," says Leana Stormont, litigation counsel for PETA, which prompted and funded the Georgia lawsuit.

While the AVMA believes euthanasia by injection is the preferable method for animal euthanasia, the association also says that carbon monoxide euthanasia is acceptable when done within a properly equipped and manufactured chamber. A state-of-the-art carbon monoxide chamber, used correctly, should induce unconsciousness in a few minutes; a full cycle usually takes about 25. To ensure this, the machine must be precisely calibrated to emit cooled gas at exact time intervals and in precise quantities. The chamber itself cannot have too many animals inside, animals must be separated from each other in cages, and the chamber must be properly sealed so that gas doesn't leak (leakage can not only prolong the process, but endanger employees).

That's a tall order for the outdated chambers in many shelters, says Kim Intino, director of Animal Sheltering Issues at The HSUS. The AVMA's 2007 Panel on Euthanasia says chambers must "be of the highest quality construction," "allow for separation of individual animals," "be located in a well-ventilated environment, preferably out of doors," and "be well lit and have view ports that allow personnel direct observation of animals."

Intino estimates that 80 percent of the facilities using a carbon monoxide chamber for euthanasia are not meeting the AVMA's guidelines. "The chambers have leaks and cracks, they have light missing from the inside of the chamber so you can't see the animals," Intino says. "They're not properly separating the animals, they're mixing species; they're euthanizing young, old, injured, pregnant, and sick animals, and they're not supposed to do that with carbon monoxide."

The AVMA's guidelines say that certain animals—juveniles and pregnant females, for example—should not be euthanized in chambers at all. But they often are, says Daphna Nachminovitch, director of PETA's domestic animal department. "What happens when you have overstressed workers and overcrowded shelters, they often cram the animals into the chamber, and the chamber doesn't get cleaned properly between uses," says Nachminovitch.

But most shelter workers want to do the right thing. Stormont sympathizes with employees of shelters that still use the chamber; their compassion often leads

them down the path Angel Partain took, becoming the first whistleblowers when shelter gas chambers are used illegally or improperly.

Some policymakers who continue to support the carbon monoxide chamber argue that the mechanized euthanasia process is easier on workers: Loading animals into a machine and flipping a switch is less stressful, less emotional, and less intimate than injection euthanasia, they say.

But Stormont's experience with shelter workers suggests otherwise. Euthanasia by injection requires a gentle touch and technical proficiency, and many euthanasia technicians feel that their ability to calm and comfort animals during the procedure makes all the difference.

"Having read many, many complaints from people—and my background is actually in animal control—the people who work in these facilities absolutely despise not having access to good euthanasia methods," says Stormont. "They always say that no matter how hard euthanasia is, it's worse in a gas chamber. At [one] particular facility, the workers would put the animals in, they would shut the door, and they would turn the radio up so they didn't have to hear them. ... Obviously the animals deserve the best, but so do the employees who are charged with this thankless task."

Studies have shown that euthanasia is one of the biggest stressors for shelter workers, even when it's done well. For Angel Partain, the reinstitution of the gas chamber was the final straw. "My work as an animal control officer was the most rewarding work I have ever done," Partain wrote in the conclusion of her affidavit. "It had its challenges, but I loved my job and was very proud to be involved in animal protection work. I resigned from my job ... in large part due to animal welfare concerns and the continued operation of the carbon monoxide gas chamber."

The Morass of Direct Licensing Laws

National organizations like The HSUS and PETA are committed to reducing euthanasia numbers, but they are also committed to the reduction of animal suffering. It is with that goal in mind that these organizations—and others at both local and national levels—are trying to end the use of carbon monoxide.

Their approach is multifaceted: They try to ensure that existing laws are enforced, as PETA did through its lawsuit in Georgia. They work for direct-licensing laws that would allow shelters access to the drugs necessary to perform injection euthanasia. They talk to decision-makers in jurisdictions considering the switch, and they provide training to shelter staff who want to do their jobs in the most progressive way possible. Given the realities of animal shelters in isolated areas, the status of the laws, and the inadequate funding of many municipal shelters, this incremental approach is the only one likely to work.

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MICHELLE RILEY/THE HSUS

The biggest barrier to injection euthanasia in some areas of the country is the lack of a direct-licensing law at the state level, says Intino. Eighteen states still permit only licensed veterinarians to acquire the drugs necessary to euthanize by injection.

The main ingredient in the standard injection euthanasia solution is sodium pentobarbital, a federally regulated substance that only medical doctors and veterinarians are typically allowed to possess and

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administer. A typical direct-licensing law bypasses this regulation, allowing specific mid-level practitioners to acquire and administer the drug without the supervision of—or a prescription from—a veterinarian. (But to complicate matters further, the definition of a "mid-level practitioner" varies from state to state.)

In the absence of such a law, shelters must either have a veterinarian on staff (a luxury for many facilities) or contract with a private veterinarian who can perform euthanasia either on-site or at her own clinic. Even in areas where private veterinarians are plentiful—not usually the case in most rural communities—they aren't likely to line up to help with the task.

A Slow Evolution

Intino and other HSUS staff have been working on the direct licensing issue for years, but the nuances of the problem make it difficult to rally the troops. The debate over euthanasia itself has polarized animal welfare supporters in many communities; battles over reducing euthanasia numbers often supersede discussions of improving euthanasia methods. Animal deaths can be tallied into statistics. Animal suffering is harder to quantify.

The treatment of homeless animals has come a long way from the time when, a century ago, crowds of people gathered to watch the local "pound master" drown dogs. Over time, communities began adopting mechanical means to kill stray animals—gas or decompression chambers, some jury-rigged with an exhaust pipe of a vehicle attached to a sealed box filled with animals. Gradually, laws and attitudes have evolved to allow more shelter workers to perform euthanasia by injection. The mysterious quality of "humaneness" is ever-changing, thanks largely to the work of the advocates within animal shelters.

Animal welfare organizations aim to set the bar high, but the issue of direct licensing complicates their efforts. Shelter staff who want to perform euthanasia in the most humane way frequently need access to drugs other than sodium pentobarbital. "It's not as easy as telling people in a state to fight for a direct-licensing law," Intino explains. "That is the goal, but then you have to go a step further and see what drugs and practitioners the law covers. ... You can't just fight for a direct-licensing law; you have to fight for a direct-licensing law that includes all the necessary drugs and personnel." (Language for a comprehensive direct licensing law can be found at animalsheltering.org/directlicensing.)

A prime example of the problem: Some states allow non-veterinarians access to sodium pentobarbital, but not to Telazol or ketamine (Telazol is a trademarked anesthetic cocktail; ketamine is one component of an anesthetic drug combination). Both drugs are often used in the euthanasia of fractious or aggressive animals. Animals injected with ketamine become unconscious; they cease struggling and, most importantly, feel no pain—making the injection of sodium pentobarbital far easier to perform.

But because ketamine is also used illegally as a recreational club drug—known in street slang as Special K—it's often more strictly regulated at the state level. "It's like the human healthcare catch-22 where insurance companies say, 'We'll pay for your insulin but not your syringes,' " says Intino. "It's the same thing: 'We'll give you the drugs to euthanize animals, but we won't give you the ancillary drugs that you're also going to need.' "

The Limits of the Law

Comprehensive direct licensing can step in where other laws fall short. Though there is no ban on carbon monoxide chambers in Virginia, the last chamber was due to be phased out last year—thanks, in part, to a direct-licensing law that has existed in the state since 1972.

While the direct licensing law was fundamental to Virginia's evolution, the law alone was not enough. A law requiring shelters to euthanize by injection is essentially an unfunded mandate if it doesn't provide for equipment and training. Many Virginia organizations operate in outdated facilities that lack the resources necessary to make the switch to injection euthanasia.

"I think a lot of what happens in tiny shelters that have so few staff is they're basically handed a needle

and told to go for it," Nachminovitch says. And while euthanasia by injection is more humane, it's also more technically difficult than loading animals into a carbon monoxide chamber. It takes training and—sadly—repetition to learn how to do it gently, quickly, and safely.

"In the shelters that still use carbon monoxide in places where the law says they can do differently, sometimes we're talking about an animal control agency that sees 8,000 animals a year and has three people working there," says Intino. "Their cages are falling apart, so sending somebody to a $300 euthanasia training session—plus spending another $1,500 to transfer all the equipment they need—doesn't seem possible. When we get resistance to transitioning, it's usually either the old school 'This is the way we've always done it and it works for us,' or it's lack of resources: 'This is my only ACO and I can't send him to training for two days.' "

Time, funding, and commitment can help shelters overcome these obstacles. By the end of 2007, the remaining Virginia shelters that had been performing euthanasia by carbon monoxide had transitioned to injection euthanasia. The success was largely due to a mentoring push launched in 2000 by Kate Pullen, then director of Animal Sheltering Issues at The HSUS, and Teresa Dockery, then of the Virginia Federation of Humane Societies. Their work was funded by the Bosack & Kruger Foundation and by Sandy Lerner, a Virginia businesswoman and philanthropist supportive of animal causes.

"There were three agencies in particular that would not have been able to convert without the funding," says Dockery, who continues to work on the issue. "It's taken structural changes—one county, for example, is actually building a room. They literally did not have space for a euthanasia table. ... That's been the state General Assembly's reason for not passing legislation on this to force the change—it's happening on its own. And this way we've been able to work with localities through the process."

This year, both PETA and The HSUS plan to focus efforts on North Carolina, where no direct-licensing law exists and out-of-date carbon monoxide chambers are common.

The process is long and difficult: Laws change slowly. Funding is hard to come by. Attitudes are hard to change. Getting overworked staff out of the shelter for training requires a real commitment from shelter management.

But it's the responsibility of everyone in a community to help ensure that shelter euthanasia lives up to the definition of the word, which means "good death." Donors can provide money for staff training. Veterinarians can write letters of support for shelters trying to persuade local governments of the need for the transition. Policymakers can push for comprehensive direct-licensing laws. Shelters can mentor other organizations and help provide training locally. On the way to ending the need for euthanasia in shelters, everyone can help ensure that while it still has to be done, it's done as well as possible.

"It's a long time between victories. It's a long time to get things changed, and you have a lot of upset people wanting to see changes immediately," says Intino. "It's slow going and it's starting off small, but I hope that it makes an impact. Each county that transitions is a victory, for hundreds if not thousands of animals." AS

Resources

The Humane Society of the United States' *Euthanasia Training Manual* is available directly from The HSUS. The manual is a comprehensive guide to humane euthanasia methods; it includes a chart detailing the overall costs of euthanasia by sodium pentobarbital versus carbon monoxide. The chart demonstrates that, when each method is performed correctly, animal euthanasia via the gas chamber is actually more costly. Order the manual at humanesociety.org.

Find The HSUS's **policy statement** on direct licensing and **model language for direct licensing legislation** at animalsheltering.org/directlicensing.

The staff of the **Animal Sheltering Issues section of The HSUS** are also available to help advise and guide shelters and animal control agencies seeking to transition to injection euthanasia. Contact asi@humanesociety.org.

The Domestic Animal Department at PETA helps train, advise, and mentor shelters trying to move away from carbon monoxide chambers. Contact AnimalShelterHelp@peta.org; more information about PETA's work on the issue is available at peta.org.

Animal Care Technologies (ACT) at 4act.com offers training in euthanasia by injection. A six-video program produced in collaboration with The HSUS is available at the website; The HSUS's *Euthanasia Training Manual* is included in the price. Ongoing online training for an entire shelter's staff is also available as a fee-based subscription; see the website for details. (If you're operating in a state where law requires that euthanasia training procedures be approved by a governing body—such as the state's veterinary office or department of agriculture—make sure that any training program you implement meets those standards before purchasing or participating in it.)

American Humane offers ongoing training in euthanasia by injection at locations around the country. Find classes in the Shelter Services section of americanhumane.org.