

## PAIN

### WHAT QUESTIONS SHOULD I AND MY FAMILY BE ASKING?

- Do I feel pain whatsoever?
  - Where is the pain?
  - How bad is the pain?
  - Do I have any emotional pain such as sadness or anxiety?
  - Have I been unable to do what I would like to do because of pain?
  - Has it stopped me from doing my hobbies or being social?
  - How often has pain interfered with my ability to take care of myself? For example with bathing, eating, dressing, and toileting
  - How often do I exercise? Has pain stopped me from doing so?
  - Does pain interfere with my ability to think clearly?
  - Does pain interfere with my appetite? Have I lost weight?
  - Does pain interfere with my sleep?
  - Have I talked to my doctor about my pain?
  - Did any pain medications work?
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### WHAT ACTIONS CAN I TAKE FOR THIS AGENDA?

- Identify the type and source of the pain you have
- Try non-medication means first such as physical therapy
- Be aware of medication side effects for your pain
- Always talk to your doctor before taking any pain medications even for ones you can buy over the counter
- Be cautious when taking NSAIDs as older adults are more vulnerable
- If you're taking opioids, you may need to take laxatives to help as opioids commonly cause constipation
- Recognize that in older adults some forms of pain may not be completely curable. It is important to try and control them at least so you can function and do the things you want to do

- Continue to see your family doctor for ways to help with your pain. It is highly recommended you have a family doctor if you do not have one
  - Create a pain diary to write down when you have pain, how severe it is, and how it impacted your day
  - Know that pain is complex and that you should express how it is affecting your life. Pain is very subjective and difficult to objectively measure
  - Express your pain and how it makes you feel in detail to your doctor and loved ones. This way they can better help address it
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### WHAT IS PAIN?

- Pain is a broad term that means suffering
  - Pain on this agenda page will discuss pain related to illness, its types, and potential treatments
  - Pain can be physical, but it can also be emotional
  - As we age, older adults can get pain from different diseases and illnesses
  - Common physical sources of pain for older adults are bone, joint, and muscle pain
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### ARE THERE DIFFERENT TYPES OF PAIN?

- Physical pain can be from different sites in your body
  - It can be from the nerves in your skin, joints, and muscles caused by injury (nociceptive)
  - Or it can be from the organs in your body due to disease (visceral)
  - Pain can also be from the nerves themselves (neuropathic)
  - Emotional pain from mental health diseases can also cause pain (psychological)
  - Pain can be complex and involve one or more of these types combined
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**PAIN IS A COMPLEX SUBJECTIVE FEELING THAT CAN BE PHYSICAL OR EMOTIONAL**

## DIFFERENT TYPES OF PAIN SOURCES COULD OVERLAP

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### ARE THERE DIFFERENT WAYS OF DESCRIBING PAIN?

- Yes, when asked about your pain, think about the following:
  - Depending on how it feels: Sharp, dull, pressure, or burning
  - Depending on duration: Short-term (acute) or long-term (chronic)
  - Depending on where it is in the body: Head, chest, belly, arms, or legs
  - Depending on how it affects your function: Keeping you from sleeping, eating, or doing the things you want to do
  - Depending on how much it hurts: Severe, moderate, or mild. You can also rate it on a score from 1 to 10 where 1 is almost no pain and 10 is severe pain
  - Depending on where it moves in your body: Located in one site or if it moves (radiates) somewhere else
  - Depending on what makes it better or worse: Moving or staying still. Medications that help or not help
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### HOW CAN PAIN BE DIFFERENT IN OLDER ADULTS?

- Since the body changes as we age, pain can present differently
- Some diseases present differently (atypically) compared to younger adults
- Diseases that cause pain can also present in more subtle ways. For example, an older adult with a heart attack may not feel the typical chest pain that a younger person might have
- Older adults may under-report their pain. Meaning they do not mention the pain or how bad it is to their family or doctor
- The pain can even confuse older adults. The brain can be vulnerable to the body stress. If the pain is great or lasts a long time, it can cause delirium. Refer to the “confusion” agenda for more details
- Older adults living with thinking (cognitive) impairment, like dementia, may not be able to communicate clearly that they have pain
- Their doctor or caregiver has to note any behavioral changes that might point towards pain

**THERE ARE MANY WAYS TO DESCRIBE YOUR PAIN TO YOUR DOCTOR DEPENDING ON LOCATION, SEVERITY, DURATION, AND HOW IT AFFECTS YOUR DAILY TASKS**

**OLDER ADULTS CAN HAVE PAIN PRESENT DIFFERENTLY THAN YOUNGER ADULTS**

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**WHY IS PAIN A BURDEN? WHAT DOES HAVING LONG-TERM (CHRONIC) PAIN PUT ME AT RISK OF?**

- Pain can cause a wide range of issues in anyone but especially older adults
  - The following are some difficulties and risks that can come from having long-term (chronic) pain:
    - Increase risk of depression and mental health disease
    - Decrease in quality of life
    - Social isolation and not wanting to go out or socialize
    - Decrease in function and not being able to do the things you want to do
    - Decrease in mobility meaning not walking or getting around like before
    - Decrease in sleep quality and duration
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**WHAT ARE COMMON SOURCES OF PAIN?**

- Pain can be complex in older adults and from many sources in the body
- The following are sites in the body that can be a source of pain depending on some diseases:
  - Bone: pain from arthritis causing painful joints especially to the back, shoulders, knees, and legs
  - Muscles: ache from diseases in the muscle and immune systems
  - Nerves: ache from medication side effects, spine pressing on nerves, diabetes, or alcohol causing nerve injury to the limbs
  - Chest: pain from heart or lung diseases such as from heart attacks or broken ribs

- Bladder: pain such as from painful peeing from a bladder infection or kidney stone
  - Bowels: pain such as from constipation
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**PAIN CAN CAUSE CONFUSION, DEPRESSION, ISOLATION, LOWER FUNCTION, AND QUALITY OF LIFE**

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**WHAT SHOULD I KNOW ABOUT PAIN MEDICINES?**

- Many medications can help treat pain
  - It is important to talk to your doctor before starting any medications
  - Always mention if you are taking any to your doctor
  - Pain control is important but knowing when and how to take medications for pain is also important
  - As we age, our body responds differently to medications. Refer to the "[medications](#)" agenda for more details
  - Knowing the common side effects especially in older adults is important
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**ARE THERE SOLUTIONS THAT DO NOT USE MEDICINES TO HELP CONTROL PAIN?**

- Yes, many other treatment methods help relieve pain
- The best results in pain control usually involve a combination of these methods as well as medications
- Treatment examples include:
- Physical therapy has great evidence to help with all kinds of pain
- Social stimulation especially for mental health
- Exercise to improve strength and pain tolerance
- Applying hot or cold packs
- Massage to points of pain
- Distraction and staying active with hobbies

- Meditation and finding preferred ways to relax
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## **PAIN TREATMENT CAN BE DIVIDED INTO MEDICATIONS AND NON-MEDICATION**

**IT IS SUGGESTED TO TRY THE NON-MEDICATION METHODS AS THEY HAVE MUCH FEWER SIDE EFFECTS**

**ALWAYS TALK TO YOUR DOCTOR BEFORE STARTING A NEW MEDICATION**

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## **WHAT KIND OF MEDICATION IS AVAILABLE FOR PAIN?**

- Always talk to your doctor before starting any of these medications. Be aware of their side effects and the reason or benefit of taking them
- The broad term from medications that treat pain is called “Analgesics”
- The following are broad and common examples of pain medicines:
- Tylenol (Acetaminophen):

A very common pain medication and commonly used first. It is well tolerated in older adults too. It is usually underrated but can help depending on your pain. Tylenol can be helpful for bone and arthritis pain especially. If you have liver disease, you should be cautious

- NSAIDS:

Also a very common pain medication. However, they are usually not recommended for long-term use in older adults. That is because they increase the risk of stomach ulcers, high blood pressure, and kidney damage. If you have to use NSAIDS, try to use the lowest doses for the shortest amount of time. Ibuprofen and Naproxen are examples

- Opioids:

These are stronger medications that help control pain. They have a time and a place to take them. It depends on the kind of pain that you have. They also have different strengths. Older adults can be sensitive to opioids too. Common side effects are constipation and feeling sleepy. Other more serious side effects are decreased breathing and confusion. Examples are Morphine, Hydromorphone, Tylenol 3, and Fentanyl. It is very important to talk to your doctor before starting them and while on them

- **SSRI:**  
This class of medication is an antidepressant. Although mainly used for emotional and mental health diseases such as depression, they can also help with other types of pain. They are usually well-tolerated in older adults. Some can even help with nerve pain
- **Gabapentinoids:**  
This class of medication can help with pain in the nerves. Examples are Gabapentin and Pregabalin. Common side effects are feeling sleepy and fluids building up in the lower limbs
- **Topical:**  
There are medications that can be placed directly on the body part that is causing pain. The benefit of these medications is that they have much fewer body side effects. They come in many combinations. A common example is topical Diclofenac

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**PAIN SHOULD BE CONTROLLED AS MUCH AS POSSIBLE. HOWEVER, IT IS IMPORTANT TO KNOW THE LIMITATIONS AND SIDE EFFECTS OF MEDICATIONS. THIS IS ESPECIALLY TRUE FOR OLDER ADULTS**

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