

Pain in older people

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**IASP GLOBAL YEAR
AGAINST PAIN
IN OLDER PERSONS**

October 2006 – October 2007

Resources: www.iasp-pain.org

Pain in Residential Aged Care Facilities

Management Strategies

August 2005

The Australian Pain Society

An interdisciplinary expert consensus statement on assessment of pain in older persons

Hadjistavropoulos T et al. Clin J Pain 2007;
23: S1-S43



THE FORGOTTEN MAJORITY: Pain in the Older Person

**Summary from the Patient Liaison Committee of the British Pain Society
Seminar: *The Forgotten Majority: Pain in the Older Person* held on
Monday 16th October 2006 at Churchill House, London WC1R 4SG**

Discussions

- Older people in community
- Older people living in community with a carer
- Older people in residential care/rest homes
- Older people in nursing homes
- Older people in hospitals

Action points:

- Introduce pain as 5th vital sign in hospitals, residential care, nursing homes and community
- Make pain measurement part of QOF for GPs.
- Improve assessment and re-assessment of pain by use of toolkit. Teach all carers how to use it

Action points:

- Write simple guidelines on pain and its management for nursing homes & rest homes, and for patients and carers
- Insist that pain assessment and management becomes part of the National Minimum Standards for Nursing Homes

Actions points:

- Educate doctors, nurses, other health care professionals, carer and patients in the understanding of pain and its management
- Care for the carers
- Treat patients and individuals
- Improve communication between primary and secondary care
- Encourage all older people to keep basic medical information in written form (medication in Green bags)



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PAIN IN OLDER PEOPLE
- The Carer's Perspective

SUMMARY REPORT
SEPTEMBER 2006



Fieldwork: 17/07/2006 to 24/07/2006

Commissioned by The Patients Association and supported
by a research grant from Napp Pharmaceuticals Limited.

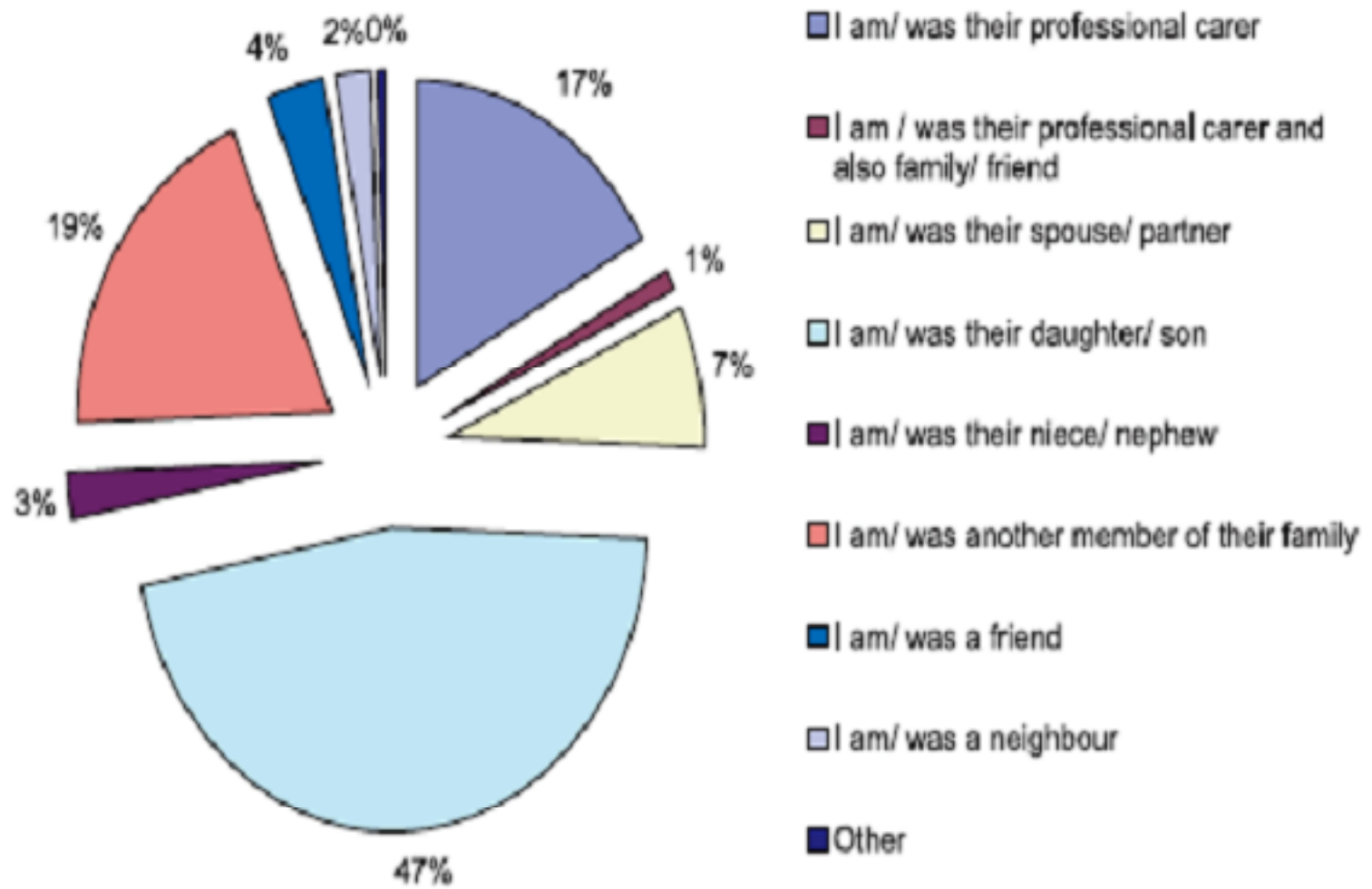
Carers

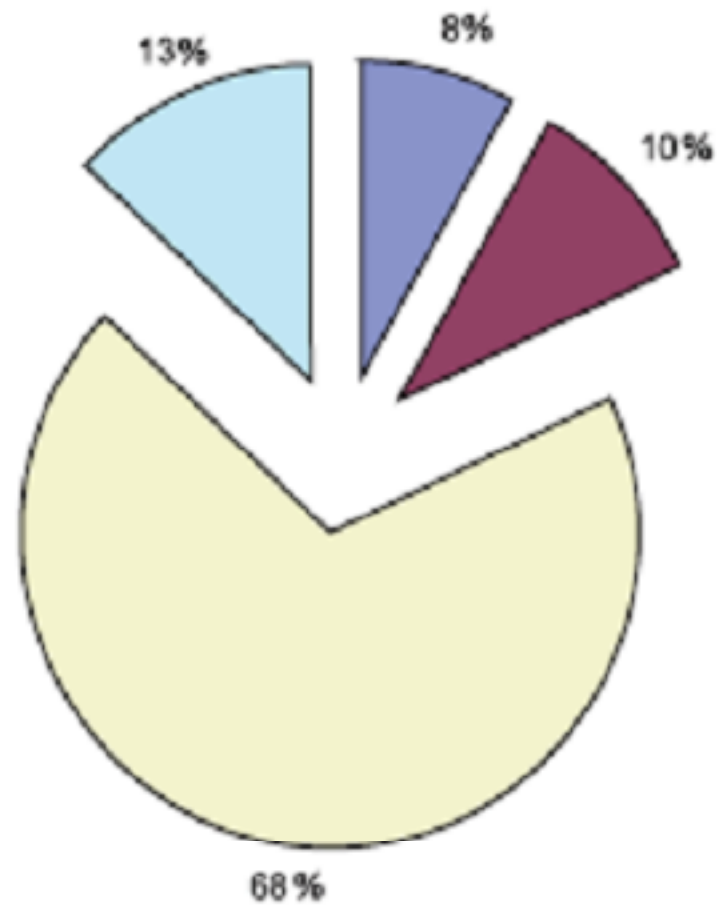
- Currently 10 million people over 65 years
- 1:8 adults are carers i.e. 6 million people
- Over 1 million provide care for > 1 person
- Provide over 50 hours care per week
- Carers save NHS est. £57 billion p.a.

- 17th July- 24th July 2006
- 2,959 respondents
- 533 professional and 2,426 non-professional carers
- 65% female: 35% male
- 53% > 50 years
- Good geographical and social spread

Demographics of older people

- 25% patients: 65 – 74 years
- 41%: 75 – 84 years
- 31% 85 years or older



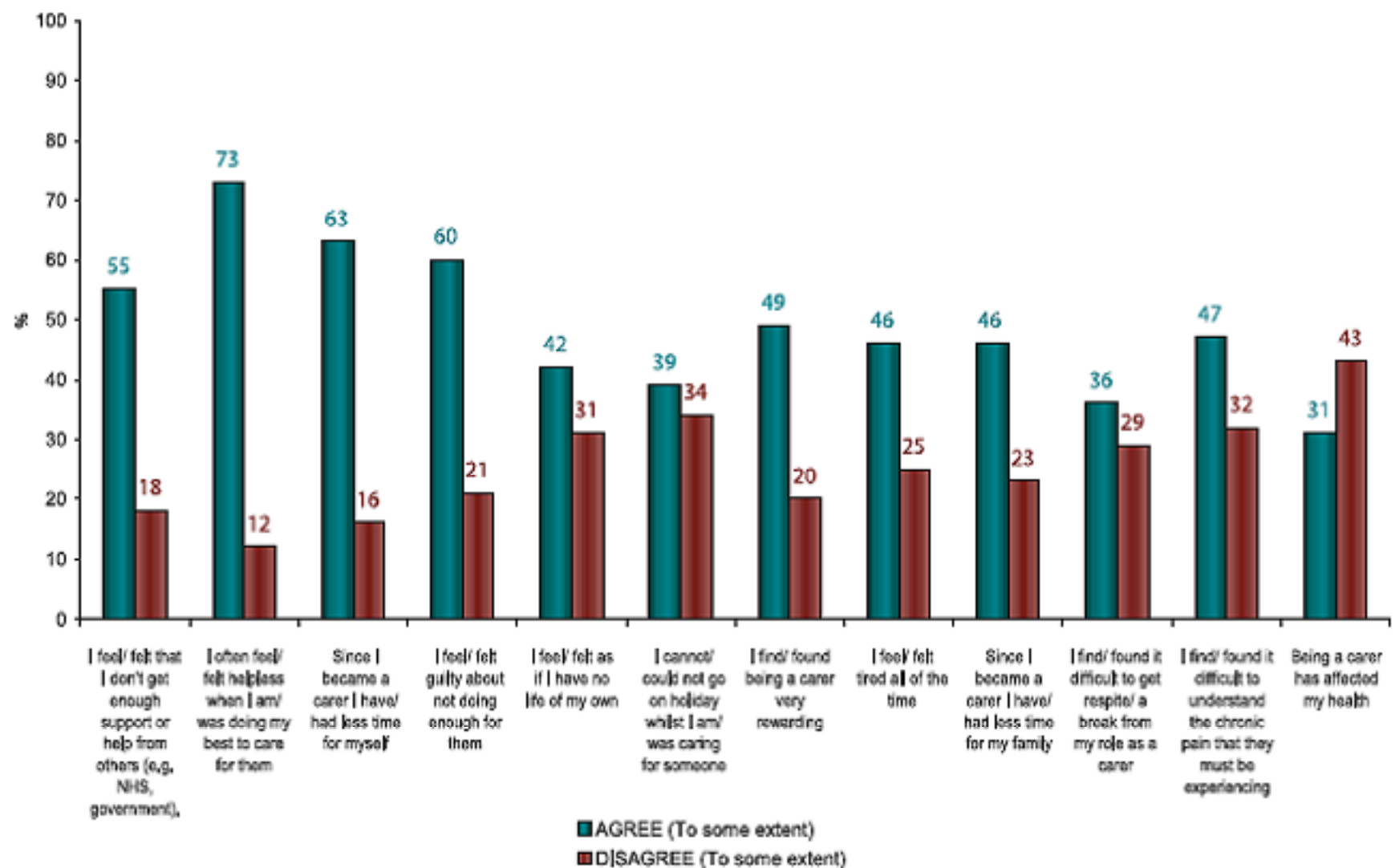


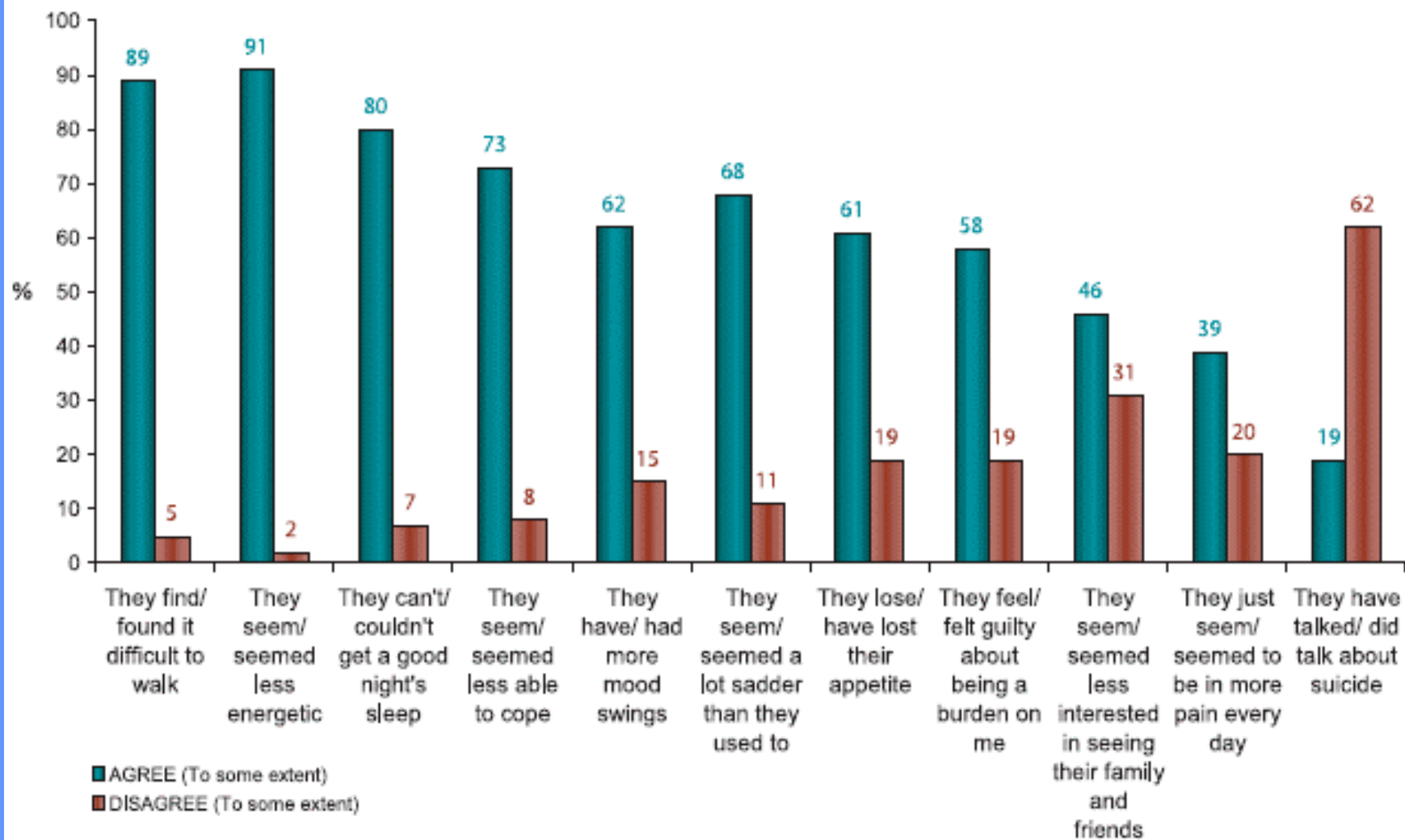
■ Yes, gave up a job

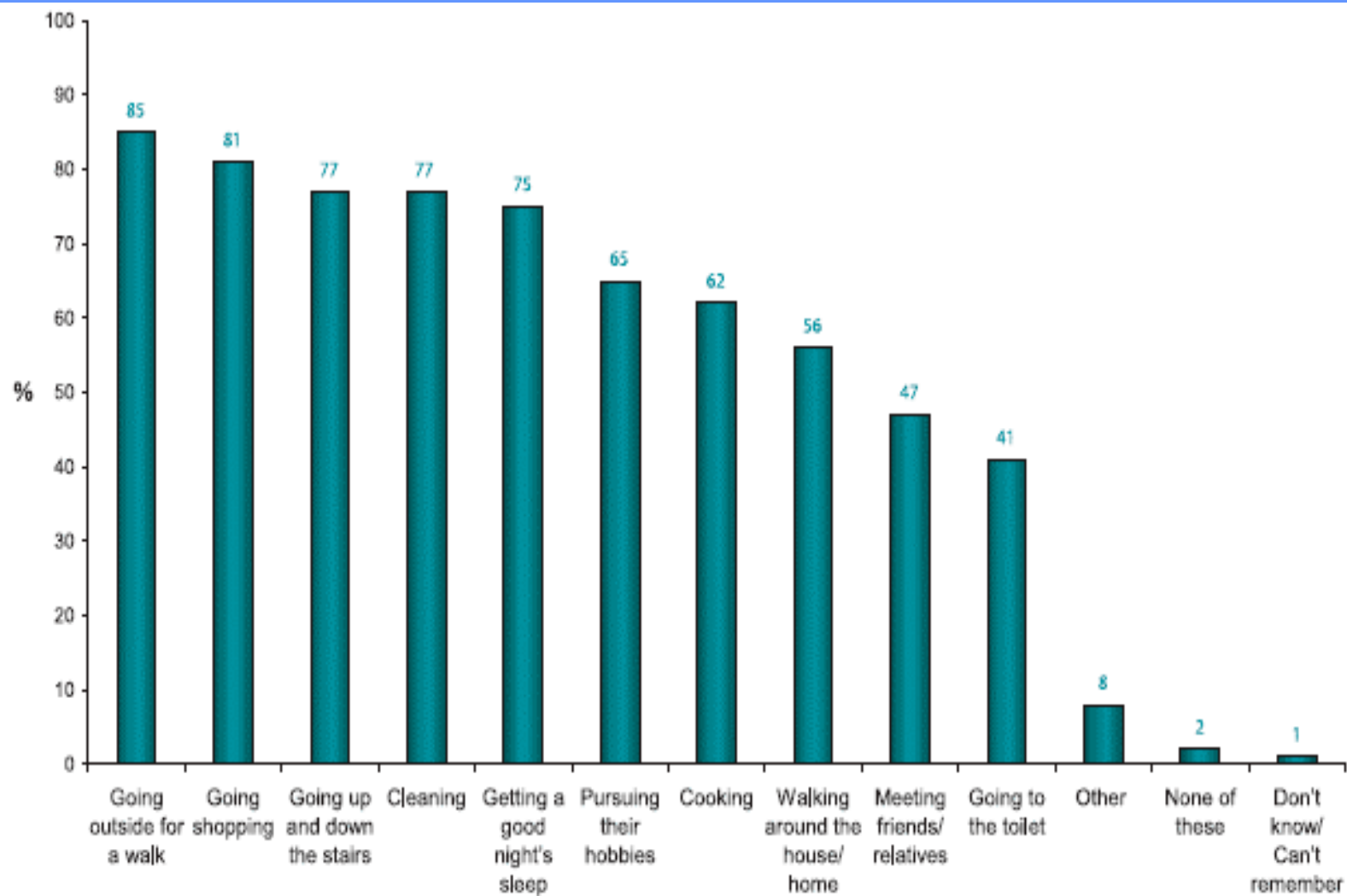
■ Yes, went part time

□ No, have not

□ Not applicable

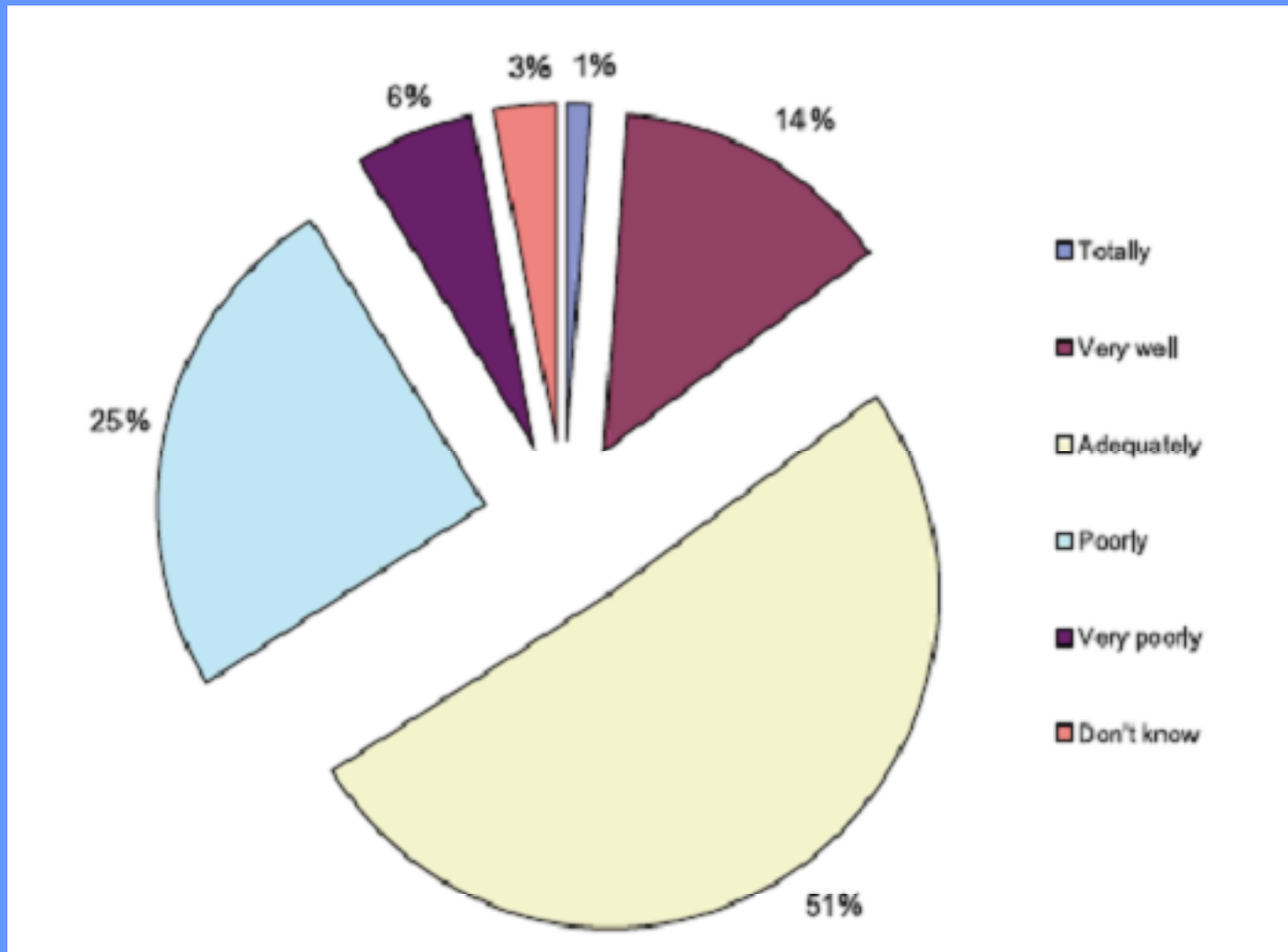




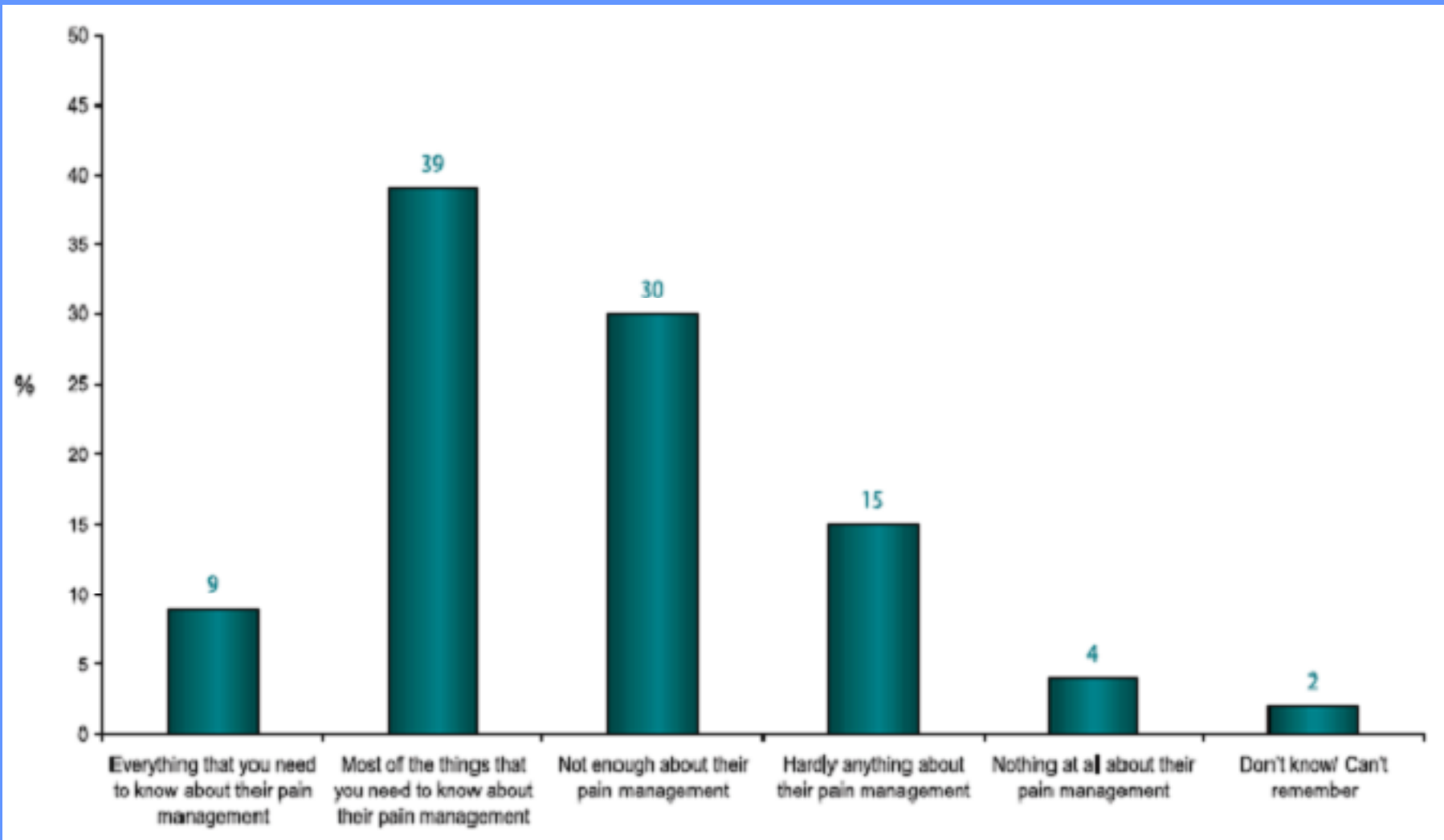


“Chronic pain takes over the mind and sufferers cannot get past it. They want to be involved in living but when they plead ‘please take the pain away’ every day for years what do you do or say...?”

Pain management

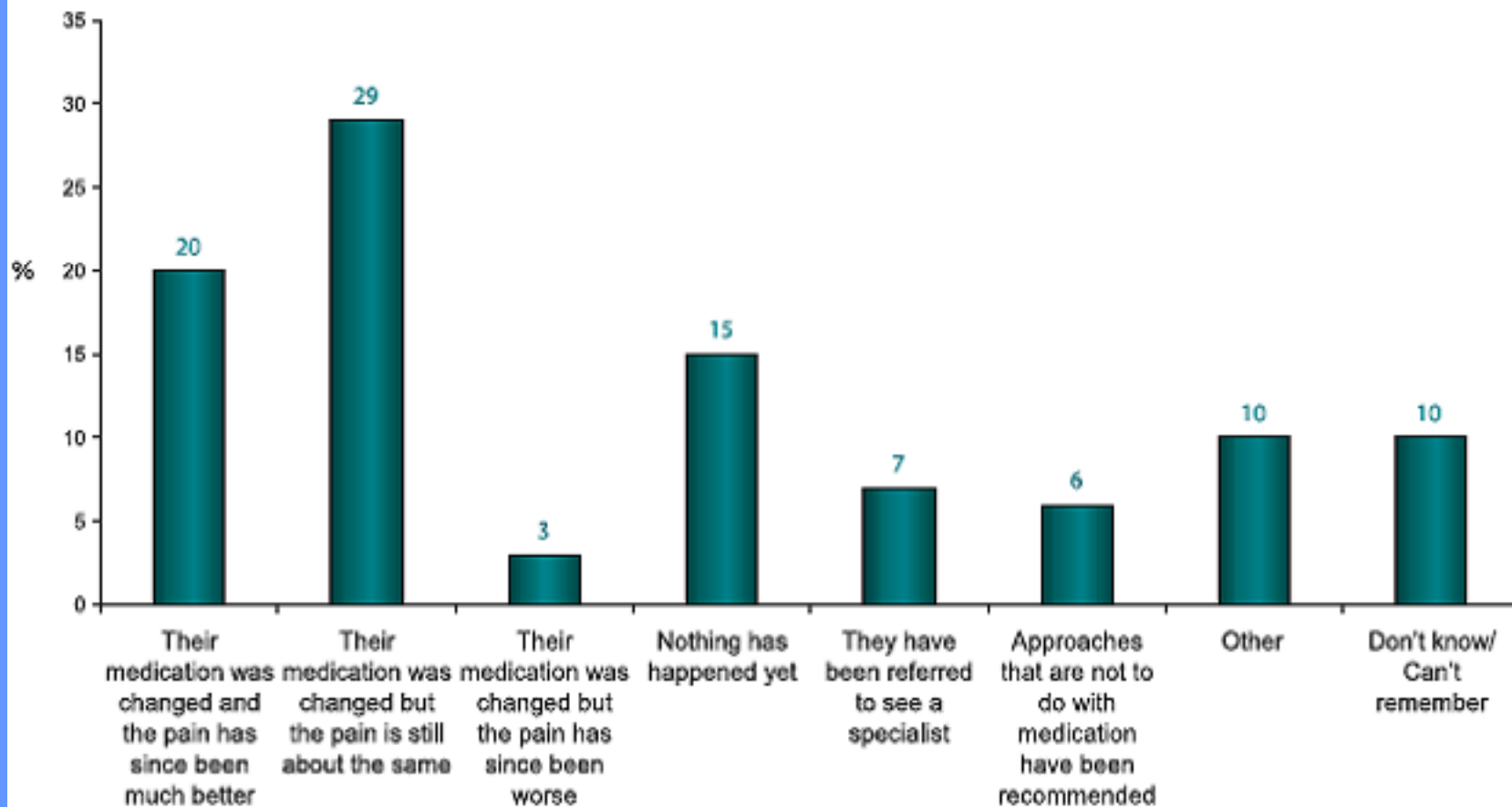


Knowledge

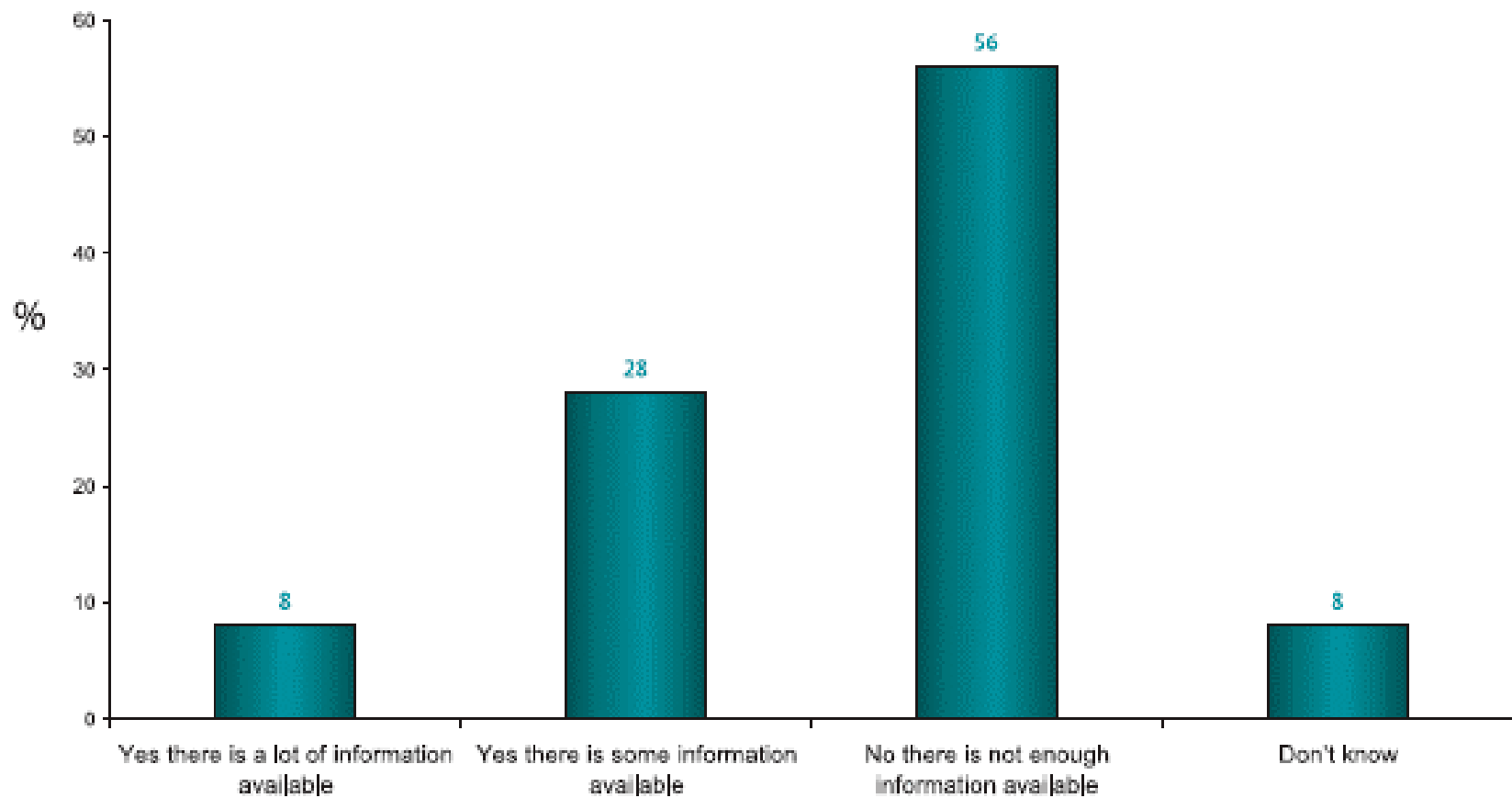


"After banging my head against a brick wall for a few weeks I finally got someone to understand how bad this person's pain was..."

Outcome



Information





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PAIN IN OLDER PEOPLE
- A Hidden Problem

A QUALITATIVE STUDY
MARCH 2007



Fieldwork: September – December 2006

**Commissioned by The Patients Association and supported
by a research grant from Napp Pharmaceuticals Limited.**

Pain in older people-a hidden problem

- Resident's assessment of their pain
- Usual management
- Their own role in its management
- What can be done to improve the management

Pain in Older People- a hidden problem

- 77 interviews in 24 nursing homes
- Larger and smaller homes
- Urban, suburban and rural settings
- English speaking
- Exclusion: severe cognitive impairment, depression, psychosis, serious physical illness

Pain in Older People-a hidden problem

- 77% women
- Average age 82.5years
- 66% widowed
- 74% had children
- Frail elderly with functional impairment
- 62% said health was good

Pain in older people-a hidden problem

- 90% aches and pains
- 85% often troubled
- Most common areas: legs and back, arms and shoulders
- 74% had pain over a year
- 38% pain severe
- 33% pain moderate

Causes of pain

- Arthritis (36%)
- Osteoporosis
- Parkinson's disease
- Stroke
- MS
- Diabetes

Consequences of pain

- 38% miserable or depressed
- 25% tired and irritable
- 59% sleep problems due to pain
- 74% lack of mobility
- 46% affect sociability

Pain management

- Medication –all but one!
- General reluctance but 41% said effective
- Exercise
- Bath/shower
- Distraction
- Rest
- Heat

Professional staff

- 15% said they had spoken to doctor or nurse re treatment for pain
- 43% were asked by care home staff about pain

Conclusion

- Chronic pain widespread amongst residents of care homes
- Reduced quality of life, mobility, sociability
- Causes tiredness, irritability, depression
- Management reliant on routine medication
- Residents view medication with suspicion
- GPs rarely seen
- High level of stoicism
- Failure to explore alternative methods
- Some appliances exacerbate discomfort
- Activities which can alleviate pain dependent on staff time

PAIN IN OLDER PEOPLE

- A Hidden Problem

Call to Action

The Government must take immediate action so that

- Healthcare and nursing home staff must take a much more proactive approach to the management and treatment of pain for all residents
- GPs must ensure that they conduct regular medication reviews involving residents of nursing homes
- GPs and other healthcare professionals must have access to more education on communicating with older people
- Nursing homes have a duty to ensure adequate staffing levels in order to protect and monitor the wellbeing and health of their residents
- Residents must be supported by healthcare and nursing home staff in making their own efforts to relieve pain
- Residents must be offered more alternatives to their current medication by healthcare and nursing home staff
- The Government must ensure that standards of pain management in nursing homes comply with best practice and are regularly audited

British Geriatric Society / British Pain Society

Guidance on:
The assessment of pain in older people

Working Group

- Professor J Closs
 - Dr Beverly Collett
 - Dr Jean Gaffin
 - Mrs Joanna Gough
 - Dr Danielle Harari
 - Mr Lester Jones
 - Dr Sinead O'Mahony
 - Dr Jonathan Potter
 - Dr Pat Schofield
- Nursing
 - Pain medicine
 - Patient representative
 - Administrative Support
 - Geriatric medicine
 - Physiotherapy
 - Geriatric medicine
 - Clinical Effectiveness
 - Nursing
- **With acknowledgement to** Dr Amanda Williams

Questions asked

- What methods to assess presence of pain
- What methods to assess the experience of pain

CONCISE GUIDANCE TO GOOD PRACTICE

A series of evidence-based guidelines for clinical management

NUMBER 6

The prevention, diagnosis and management of delirium in older people

NATIONAL GUIDELINES

June 2006

CLINICAL
EFFECTIVENESS &
EVALUATION UNIT



Royal College
of Physicians
Setting higher medical standards



*But every night time I'm very upset,
I'll cry quite a lot in the night where
it's so bad, the pain's awful....I
don't go to sleep before half past
eleven or twelve o'clockI'm
awake by one.*

95 year old female

I don't understand if there's anything that can help me... I wish, I would do if she had time....If she would propose something... but there doesn't seem time to talk

86 year old female

