

# Pain

**This help sheet discusses some of the causes and ways to recognise if a person with dementia is in pain and how to treat pain quickly and effectively.**

People with dementia can and do experience pain. However they may not be able to communicate their pain clearly, or they may not be able to accurately interpret pain signals and may convey their discomfort through other behaviour. As a result the pain often goes unnoticed and untreated.

As far as we know, dementia does not actually cause pain. However, people with dementia will be affected by the same range of ailments as people without dementia, and some of these may be painful.

Research suggests that when a person has dementia and pain is present, they can be at risk of not being treated because of two misinformed beliefs – firstly, that a person with dementia does not experience pain, and secondly, that nothing can be done for people with dementia.

## Causes of pain

It is important to be aware of potentially painful medical conditions. In older adults these include:

- Osteoarthritis (degenerative joint disease)
- Osteoporosis
- Rheumatoid and other inflammatory arthritis
- History of hip and other types of fractures
- Back disorders and back pain
- Cancer
- Angina
- Neuropathic pain (damage to nerves)
- Post-stroke pain syndromes

**Other causes of pain include:**

- Constipation
- Dental problems
- Infections
- Migraines or headaches
- Mood disorders
- Pressure sores

**Recognising pain**

Recognising that someone with dementia is in pain is not always easy. Pain is a highly personal experience, and assessment is usually based on our perception of the pain and reporting its type, severity and location.

But for someone with dementia who has difficulty communicating, pain will need to be recognised in other ways. Some behaviours and symptoms may indicate that a person has some level of pain or discomfort, or is unwell.

**These may include:**

- Changes in behaviour. The person may appear withdrawn, lethargic, frustrated or even angry
- Sleeping more than usual
- Crying
- Facial or verbal expressions may indicate soreness of a particular part of the body
- Reluctance to move

**Asking about pain**

When asking a person with dementia about their health, try to use a range of words that might help the person describe their feelings. Words like discomfort, uncomfortable, hurting, aching or sore may be helpful. Ask at regular intervals, rather than just once.

## Treating pain

Pain medications are prescribed to both prevent and relieve pain over 24 hours. It is very important that medication is given 'by the clock'. Your doctor can advise you about this.

There may be other things that you can do to reduce the pain. Consider whether a soothing bath or massage would help.

## If the person is in residential care

It is possible for pain to sometimes go unrecognised and untreated in residential facilities. Talk with the doctor and nursing staff if you are concerned that a resident may be in pain. Your knowledge of the behavioural signs of pain is important to help staff recognise that pain is present. Make sure that staff are regularly assessing for pain, and that it is being managed effectively. Good residential care practices aim to improve the management of pain in people with dementia.

## Remember

People with dementia can, and should, have any pain treated quickly and effectively.

### Further Information

Dementia Australia offers support, information, education and counselling. Contact the National Dementia Helpline on **1800 100 500**, or visit our website at [\*\*dementia.org.au\*\*](http://dementia.org.au)



For language assistance phone the Translating and Interpreting Service on **131 450**