Highlighting the challenges and opportunities in the assessment and management of pain in older adults

Pain is probably one of the most well-known but least well understood medical conditions. Pain is subjectively experienced by different individuals based on their values, genetics, experiences and culture. The subjective sensation of pain may be described as achy, burning, stabbing, piercing, cramping, throbbing, or shooting, and may be acute, chronic, or intermittent in nature.

The effective management of painful chronic conditions such as osteoarthritis, rheumatoid arthritis, and lower back pain often requires input from a multidisciplinary team; depending on the condition and the service, this team could include specialist nurses, pharmacists, pain specialists, physiotherapists, psychologists, and general practitioners. Effective communication is needed not only between healthcare professionals and the patient, but also between members of the multidisciplinary team.

Effective assessment of pain in older adults is often challenging, particularly in people with dementia. Dementia patients suffering from pain are often not able to communicate clearly to their caregivers the location and intensity of their pain or even whether they are in pain; in turn, this translates into a lower use of pain medication in dementia patients compared with their cognitively intact peers. Additionally, general frailty, a high degree of polypharmacy, and reduced metabolic function constitute additional barriers to effective pharmacological management of chronic pain in older adults.

Guidelines play an important role in setting evidence-based management standards and in educating healthcare professionals on how to best treat pain in older adults. In addition to the information provided by guidelines, improved pain education is needed on all levels, from undergraduate healthcare programmes to the training of seasoned specialists, and across all members of the multidisciplinary team, including secondary care doctors, nurses, pharmacists, and primary care physicians.

Pain may be one of the oldest medical problems in the world, but it no longer has to be one of the most misunderstood. Through more effective communication, assessment, and treatment, the management of pain in older people can be improved, to the benefit not only of individual patients and their families and carers, but also of society as a whole.

This special issue of Managing Pain in Practice highlights challenges and opportunities in the assessment and management of pain in older adults, with special emphasis on communication, the role of multidisciplinary teams and the need for a wide range of effective treatment options.

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