

## Pain: You Can Get Help

*Phyllis loves playing with her grandchildren, working in the garden, and going to twice-weekly Bingo games. But, at age 76, the constant pain she feels in her knees from osteoarthritis (joint disease) is starting to take a toll. It is also starting to keep her awake at night, leaving her feeling groggy and tired the next day. Sometimes, the pain stops her from doing the things she likes. As time goes by, Phyllis feels more and more miserable and depressed, but doesn't know what she can do about it.*

You've probably been in pain at one time or another. Maybe you've had a bad headache or toothache—pain that doesn't last too long. But, a number of older people have pain due to age-related illnesses like arthritis, cancer, diabetes, or shingles. These illnesses can cause ongoing pain. Some older people have many different kinds of pain.

Sometimes pain can serve a useful purpose. It can be your body's way of warning you that something is wrong. That's why you should always tell the doctor where you're hurting and how it feels.

### Describing Pain

Many people have a hard time describing pain. Here are some questions to think about when trying to explain your pain:

- Where does it hurt?
- When did it start? Does the pain come and go?
- What does it feel like? Is the pain sharp, dull, or burning? Would you use some other word to describe it?
- When do you feel the pain? In the morning? In the evening? After eating? Or when?
- Is there anything you do that makes the pain feel better or worse? For example, if you use a heating pad or ice pack, does that help? Does changing your position from lying down to sitting up make it better? Have you tried any over-the-counter medications for it?
- Do you have other symptoms?

Your doctor or nurse may ask you to rate your pain on a scale of 0–10 with 0 being no pain and 10 being the worst pain you can imagine. Or, your doctor may ask you to describe the pain using words like mild, moderate, or severe. Some doctors or nurses have pictures of faces that show different expressions of pain. You point to the face that shows how you feel.

### Acute And Chronic Pain

There are two kinds of pain. Acute pain begins suddenly, lasts for a short time, and goes away as your body heals. You might feel acute pain after surgery or if you have a broken bone, infected tooth, or kidney stone.

Pain that lasts for several months or years is called chronic (or persistent) pain. Chronic pain may last long after the body has healed. This pain often affects older people. In some cases, chronic pain may last long after the original injury or other cause has gone away. Some examples of chronic pain include spinal stenosis, postherpetic neuralgia following shingles, and some cancer pain.

Living with any type of pain can be very hard. It can cause many other problems such as:

- Getting in the way of your daily activities
- Disturbing your sleeping and eating habits
- Making it difficult to continue working
- Causing you to feel depressed or anxious

### Attitudes About Pain

Everyone reacts to pain differently. Many older people were told not to talk about their aches and pains. Some people feel they should be brave and not complain when they hurt. Other people are quick to report pain and ask for help.

Worrying about pain is also a common problem. This worry can make you afraid to keep active; it can separate you from your friends and family. Try not to withdraw from physical or social activities because you're afraid of being in pain.

Some people put off going to the doctor because they think pain is just part of aging and nothing can help. This is not true! It is best to see a doctor if you have a new pain. Finding a way to reduce your pain is often easier if it is assessed and treated early.

## Treating Pain

Treating chronic pain is important. The good news is that there are a variety of ways to treat pain. Some treatments involve medications, and some do not. Your doctor may make a one-of-a-kind treatment plan for you. Talk with your doctor about how long it may take before you feel better. Pain doesn't always go away overnight. Often you have to stick with a treatment or exercise plan before you get relief. It is important to stay on this schedule. Sometimes this is called "staying ahead" or "keeping on top" of your pain. As your pain lessens, you will be more active and will see your mood lift and sleep improve.

## Medicines To Treat Pain

Your doctor may prescribe one or more of the following pain medications.

- Acetaminophen is good for all types of pain, especially mild to moderate pain. It is not habit-forming. Acetaminophen is found in over-the-counter and prescription medicines. Some people who take it may have allergic reactions like hives, trouble breathing, or swelling of tongue, lips, or face. Heavy drinkers or people with liver disease should not take acetaminophen. Often, acetaminophen is found in other pain medicines. It is important that you and your doctor know how much acetaminophen you are taking each day because it can cause liver damage at high doses. Be sure to talk with your doctor or pharmacist about safe dosages.
- Nonsteroidal anti-inflammatory drugs (NSAIDs) include aspirin medications, naproxen, and ibuprofen. NSAIDs may have unwanted side effects like nausea, vomiting, diarrhea, rash, dizziness, headache, or allergic reactions. More serious side effects are kidney or liver failure, ulcers, and prolonged bleeding after an injury or surgery. In some older people who have high blood pressure or heart conditions, or who have had a stroke in the past, NSAIDs can be particularly unsafe. NSAIDs are better when used for a limited time in limited doses.
- Narcotics (also called opioids) are used for severe pain and require a doctor's prescription. They may be habit-forming. Examples of narcotics are codeine, morphine, and oxycodone. Narcotics may have unwanted side effects including constipation, sleepiness, and nausea. These side effects may occur when you begin taking the medicine, but may fade with time. Talk to your doctor about ways to manage the side effects. And, ask if there are other medications that might work better for you.
- Other medications are sometimes used to treat pain. These include antidepressants, anticonvulsive medicine, and local pain killers like nerve blocks or patches.

As people age, they are at risk for developing more serious side effects from medication. It's important to take exactly the amount of pain medicine your doctor prescribes. Mixing any pain medication with alcohol or other drugs such as tranquilizers can be dangerous. Make sure your doctor knows all the medicines you take, including over-the-counter drugs and herbal/alternative supplements, as well as the amount of alcohol you drink.

**Don't forget:** If you think more medication would help you feel better, talk to your doctor or nurse. You might try saying, "I'm still in a lot of pain. My friend, Benny, has the same thing. He takes the same medicine, but his doctor gives him a lot more. He says his pain is almost gone."

### Pain Specialist

Not all doctors have been trained in pain management. If you find that your doctor can't help you, ask him or her for the name of a pain medicine specialist. You also can ask for names from friends and family, a nearby hospital, or your local medical society.

## What Other Treatments Help With Pain?

In addition to drugs, there are a variety of complementary and alternative approaches that may provide relief. Talk to your doctor about these treatments. It may take both medicine and other treatments to feel better.

- **Acupuncture** uses hair-thin needles to stimulate specific points on the body to relieve pain.
- **Biofeedback** helps you learn to control your heart rate, blood pressure, and muscle tension. This may help reduce your pain and stress level.
- **Cognitive behavior therapy** is a form of short-term counseling that may help reduce your reaction to pain.
- **Distraction** can help you cope with pain by learning new skills that may take your mind off your discomfort.
- **Electrical Nerve Stimulation** uses electrical impulses in order to relieve pain.
- **Guided imagery** uses directed thoughts to create mental pictures that may help you relax, manage anxiety, sleep better, and have less pain.
- **Hypnosis** uses focused attention to help manage pain.
- **Massage therapy** can release tension in tight muscles.
- **Physical therapy** uses a variety of techniques to help manage everyday activities with less pain and teaches you ways to improve flexibility and strength.

## Helping Yourself

There are things you can do that might help you feel better. Try to:

- Keep your weight down. It can be easy to gain weight. Extra weight can slow healing and make some pain worse; for example, pain in the back, knees, hips, and feet.
- Exercise. Try to keep moving. Pain may make you inactive which can lead to a cycle of more pain and loss of function. Mild exercise can help.
- Get enough sleep. It will improve healing and your mood.
- Avoid tobacco, caffeine, and alcohol. They can have a negative impact on your treatment and increase your pain.
- Join a pain support group. Sometimes it can help to talk to other people about how they deal with pain. You can share your ideas and thoughts while learning from others in the group.

## Cancer Pain

Some people with cancer are more afraid of the pain than of the cancer. But, most pain from cancer or cancer treatments can be controlled. As with all pain, it's best to start managing pain early. It may take a while to find the best approach to help with your pain. Talk to your doctor so the pain management plan can be adjusted to work for you.

One special concern in managing cancer pain is called "breakthrough pain." This is a pain that comes on quickly and may take you by surprise. It can be very upsetting. After one attack, many people worry it will happen again. This is another reason why it is so important to talk with your doctor about having a pain management plan in place.

## Alzheimer's Disease And Pain

Taking care of someone with Alzheimer's disease (a type of memory loss) can be hard. As the disease progresses, many people lose their ability to tell you when they're in pain. When you're caring for someone with Alzheimer's, watch for clues. A person's face may show signs of being in pain or feeling ill. Also, notice sudden changes in behavior such as increased yelling, striking out, or spending more time in bed. It's important to find out if there is something wrong. If you're not sure what to do, call the doctor for help.

### Caregiving Tips

Caring for someone in pain can be upsetting. It's hard to see a loved one hurting. The care needed by someone in pain may leave the caregiver feeling tired and discouraged. To keep from being overwhelmed, a caregiver can ask other family members and friends for help. Sometimes community services can be found that offer short-term care. A break from caregiving can be good for the caregiver and the person in pain.

## Six True Things About Pain

There are many myths (untrue stories) about pain. No matter what you have heard, here is what's true:

**Most people don't have to live with pain.**

There are pain treatments that work for most people. If your doctor has not been able to help you, ask to see a pain specialist.

**Most people who take narcotic drugs as prescribed by a doctor for pain relief do not become addicted.**

If you take your medicine exactly the way your doctor tells you, then you are not likely to develop an addiction problem.

**The side effects from pain medicine usually are not worse than the pain.**

Side effects from pain medicine like constipation, dry mouth, and drowsiness may be a problem when you first begin taking the medicine. These problems can often be treated and may go away as your body adjusts to the medicine.

**Your doctor will not think you're a whiner or a sissy if you talk about your pain.**

If you are in pain, you should tell your doctor so you can get the help you need.

**If you use pain medicine now, it will still work when you need it later.**

If you use pain medicine at the first sign of pain, it may help control your pain later.

**Pain is not all "in your head."**

Your pain is very real. You aren't making it up. No one but you knows how it feels. If you're in pain, talk to your doctor.

## Pain at the End of Life

Watching someone you love die is hard enough, but thinking that person is also in pain can make it worse. Not everyone who is dying experiences pain, but there are things you can do to help a person who is in pain. Many experts believe that care for someone who is dying should focus on relieving pain without worrying about possible long-term problems of drug dependence or abuse. Ask to speak to a palliative care specialist if you are concerned about pain for yourself or a loved one. Palliative care provides management of pain and other symptoms for people with serious illnesses.

## You Can Get Help

If you're in pain, there is hope. While not all pain can be eliminated, most pain can be managed. Keeping pain under control will allow many older people the chance to enjoy time with family and friends.

## For More Information

Here are some helpful resources:

**American Chronic Pain Association**

P.O. Box 850  
Rocklin, CA 95677  
1-800-533-3231 (toll-free)  
[www.theacpa.org](http://www.theacpa.org)

**American Pain Foundation**

201 North Charles Street, Suite 710  
Baltimore, MD 21201-4111  
1-888-615-7246 (toll-free)  
[www.painfoundation.org](http://www.painfoundation.org)

**Hospice and Palliative Nurses Association**

One Penn Center West, Suite 229  
Pittsburgh, PA 15276  
1-412-787-9301  
[www.hpna.org](http://www.hpna.org)

**National Cancer Institute**

6116 Executive Boulevard, Suite 300  
Bethesda, MD 20892-8322  
1-800-422-6237 (toll-free)  
[www.cancer.gov](http://www.cancer.gov)

**National Library of Medicine**

MedlinePlus  
[www.medlineplus.gov](http://www.medlineplus.gov)

For more information on health and aging, including the brochure *Medicines: Use Them Safely*, contact:

**National Institute on Aging  
Information Center**

P.O. Box 8057  
Gaithersburg, MD 20898-8057  
1-800-222-2225 (toll-free)  
1-800-222-4225 (TTY/toll-free)  
[www.nia.nih.gov](http://www.nia.nih.gov)  
[www.nia.nih.gov/espanol](http://www.nia.nih.gov/espanol)

To sign up for regular email alerts about new publications and other information from the NIA, go to [www.nia.nih.gov/health](http://www.nia.nih.gov/health).

Visit NIHSeniorHealth ([www.nihseniorhealth.gov](http://www.nihseniorhealth.gov)), a senior-friendly website from the National Institute on Aging and the National Library of Medicine. This website has health information for older adults. Special features make it simple to use. For example, you can click on a button to have the text read out loud or to make the type larger.

National Institute on Aging  
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