BASIC PRINCIPLES OF PAIN TREATMENT

Although treatment regimens range from the relatively simple, short-term management to complex, long-term therapy required for many chronic pain syndromes, all pain treatment is guided by the same underlying principles.

1. **Every older adult deserves adequate pain management.** Certain populations, including racial minorities, people with limited ability to communicate, older adults, and people with past or current substance abuse, are at higher risk for inadequate pain management.

2. **Base the treatment plan on the older adult’s goals.** Encourage older adults to set functional goals (e.g., performing certain daily activities, including socializing and hobbies). Older adults should determine treatment goals for themselves with input from health providers.

3. **Follow the principles of pain assessment.** Pain is a subjective experience; the resident is the best judge of his or her own pain, and the expert on each pain treatment’s effectiveness on him/herself.

4. **Use both drug and non-drug therapies.** To achieve overall effectiveness of treatment, allow for reduction of drug dosages, and minimize adverse drug effects, always incorporate non-drug therapies into the pain management plan.

5. **Prevent and/or manage medication side effects.** Bothersome side effects are a major reason for treatment failure and non-adherence, and should be prevented when possible or managed aggressively.

6. **Evaluate the effectiveness of all therapies to ensure that they are meeting the resident’s goals.** Achievement of an effective treatment plan requires therapy to be individualized for each older adult, often requiring adjustments in drug, dosage, or route. Consistent reassessment is critical to good outcomes.

7. **Incorporate older adult and family teaching throughout assessment and treatment.** Content should include information about the cause(s) of the pain, pain assessment methods, treatment goals and options, side-effect management, and non-drug and self-help pain relief measures. Teaching should be documented and evaluated for both older adult and family comprehension.

8. **Address pain using an inter-disciplinary approach.** The multi-dimensional nature of the pain experience often requires the involvement of many disciplines. These can include psychology, physical and occupational therapy, pharmacy services, spiritual care, and multiple medical specialties, as well as complementary therapy practitioners, such as massage therapists, acupuncturists, and art therapists.

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