

I have dementia and I feel pain



Pain is a common symptom that is poorly recognised and often untreated in older people.

It is even more difficult for the person living with dementia to communicate pain because of the barriers created by cognitive or speech impairment, society and culture.

Words are not always recognised or understood by the person with dementia. When communicating, do not rush. Check that the person can see and hear you. Try using different words such as; sore, ache or hurt.

Talk to families or carers, who can give an understanding of the person's normal behaviour and pointers on recognising early changes in expression or behaviour that might be caused by pain and distress.

Recommended observational pain assessment tools are:

- **Abbey Pain Score**
- **DisDAT**

For a FACTSHEET and more information visit:
www.gloucestershire.gov.uk/dementiatraining

Types of pain

Psychological Pain

- Quiet, apathetic, withdrawn or depressed appearance
- Distressed and crying
- Irritable
- Disrupted sleep
- Increased confused

Physical Pain

- Pacing or walking
- Sighing or chanting
- Repeatedly asking or calling for help or family member
- Closed or tightened eyes
- Distorted facial expression
- Rubbing affected area
- Rocking or holding self

Emotional pain

- Anxious or fearful appearance
- Crying, screaming or shouting
- Aggressive or angry

Causes of pain

- Loss of familiar surroundings
- Noisy, distressing environment
- Feeling isolated or separated
- Neurological change
- Musculoskeletal disease
- Cancer
- Constipation
- Infection or delirium
- Ear or toothache

Based on *Responding to pain experiences of people living with learning disabilities and dementia*. D. Kerr, C. Cunningham, H Wilkinson. www.jrf.org.uk

Working together in partnership: