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J Am Med Dir Assoc. 2017 Jun 1;18(6):522-527. doi: 10.1016/j.jamda.2016.12.078. Epub 2017 Feb 22.



Prevalence of Pain in Nursing Home Residents: The Role of Dementia Stage and Dementia Subtypes.

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Abstract

OBJECTIVES: To study pain prevalence, pain type, and its pharmacological treatment in Dutch nursing home residents in relation to dementia subtype and dementia severity.

DESIGN: Data were collected as part of the PAINdemiA study, an observational cross-sectional study conducted between May 2014 and December 2015.

SETTING: Ten nursing homes in the Netherlands.

PARTICIPANTS: A total of 199 nursing home residents in various stages of dementia.

MEASUREMENTS: We collected data on pain (by observation: MOBID-2 Pain Scale and by self-report scales), pain type, pain medication, dementia subtype, dementia severity (GDS), and demographic features.

RESULTS: In the whole sample, the prevalence of pain was 43% (95% confidence interval 36%-50%) using the MOBID-2 Pain Scale. Regardless of regularly scheduled analgesics, approximately one-third of the residents with pain suffered from moderate to severe pain. Pain assessment with the MOBID-2 Pain Scale showed no difference in pain between dementia subtypes, but residents with more severe dementia experienced pain more often than those with less severe dementia (27% vs 15%). The prevalence of self-reported pain was significantly higher in residents with vascular dementia (VaD) (54%) compared with those with Alzheimer disease (18%) and other dementia subtypes (14%). Nociceptive pain was the predominant type of pain (72%) followed by mixed pain (25%). Acetaminophen was the most prescribed analgesic (80%).

CONCLUSION: Most of the participating nursing home residents had no pain; however, pain was observed more often in residents with severe dementia, whereas residents in the early stages of VaD self-reported pain more often than those with other dementia subtypes. As one-third of the residents with clinically relevant pain had moderate to severe pain regardless of using pain medication, more focus should be on how pain management could use more tailored approaches and be regularly adjusted to individual needs.

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KEYWORDS: Alzheimer disease; Dementia; Nursing homes; neuropathic pain; pain; vascular dementia

PMID: 28236607 DOI: [10.1016/j.jamda.2016.12.078](https://doi.org/10.1016/j.jamda.2016.12.078)