

Pain is an unpleasant sensory and emotional experience and can be whatever and whenever the person living with dementia says it is. Untreated pain is a contributor to reduced wellbeing and quality of life and can lead to increased behavioural challenges. Pain can establish itself through agitated and distressed behaviours as well as stillness, apathy and withdrawal.

Is Pain a Possibility?

- Ask the person if they are in pain?
- Use different approaches: (e.g. you appear to be in pain, does it hurt, are you sore?)
- Listen to what they say: how they say it and expressions (e.g. groaning, crying, yelling)
- Observe facial expressions (e.g. frowning, twisting, clenching teeth)
- Movement and actions (e.g. reluctance to move, rubbing a body part, resistiveness to showering or dressing, pacing, agitation)
- Investigate whether there have been any changes such as sleep or appetite.
- Environmental changes include new bedding, room temperature or clothing.

How Can I Manage This?

First step is to check in your GP who can determine the best treatment approach.

Non-drug therapies can also be used to help alleviate pain, either alone or in combination with a medication. Remember to check with your health professional.

Non-Pharmacal Therapies

- Heat and cold packs
- Massage
- Physiotherapy
- Gentle stretching and exercise
- Music and singing
- Rocking chairs (under supervision)
- Reminiscence
- Sensory triggers such as sight, smell, touch sound and taste
- Physical adjustments (e.g. appropriate seating, increased change of position)

Things to consider.....

- Have you discussed this with the GP?
- Should I have appropriate referrals e.g. physiotherapist, exercise physiologist
- Is this intervention appropriate?
- Do you understand the use of this intervention?
- Can I afford the cost of external therapy?