

## Pain In the Senior Citizen



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Pain can be a distressing and disabling experience for Seniors. Arthritis and other joint pains, and muscular pains can prevent people from shopping, socializing with friends, and visiting with family. Painful nerve disease, often seen in diabetes, but certainly not limited to diabetes, can interfere with balance and with walking. Sleeplessness resulting from chronic pain adds a further dimension to suffering from chronic pain. Pelvic region pain can be associated with loss of control of bowel or bladder, or with pain on having a bowel movement or passing one's water.

The issues that confront us as Seniors are often complicated when we live alone, or when we have multiple other illnesses like heart disease, high blood pressure or diverticulitis. Treating the Senior with pain requires patience and an attentive ear, as it does in anyone with chronic pain. Pressures of limited reimbursement associated with Medicare or with managed care can mean that the time spent with the doctor to identify the cause of the pain and to treat it can seem wholly inadequate.

An unthinking physician tells the Senior Citizen that he or she hurts because of age. The witty Senior with one arthritic knee tells the doctor that the painful knee is the

same age as the non-painful knee. Age is not an acceptable cause of pain, except that as we age we can accumulate infirmities. Nevertheless, where there is pain, there is a reason for it, and that reason should be sought.

Causes of pain in the Senior are similar to those in younger individuals. An underlying arthritis may be painful, or it may not be. The arthritis may be less painful when treated with anti-inflammatory drugs like ibuprofen. However, the arthritis itself will not improve. That is to say, treatment is symptomatic, or addresses the pain that results from a particular disorder, such as polymyalgia rheumatica, or diabetic nerve disease. The arthritic change in the joint will not change unless there is a joint replacement. But the muscles that move an arthritic joint can also contribute to pain. If the joint is difficult to treat, then muscle is much easier to treat. In general, much pain that is related to arthritis comes from muscle. Muscle is relatively easier to treat, and treatment can restore more normal movement about joints.

Arthritic joints also respond to treatment by physical therapy. Limited movement about the shoulder or hip can be increased by treating the muscles associated with the shoulder or the hip, and by treating the joint itself. Despite success in treating many individuals with joint pain, there are some persons who will benefit from joint replacement. Knee and hip replacement have certainly become commonplace and have given independence back to many who had lost it.

Certain conditions, like nerve pain after shingles, can be treated successfully with medication, even when there is no possibility of altering the underlying condition itself. Medications available to treat pain include drugs used to treat depression, epilepsy and opiate medications. Each has its place and each can help liberate the person who is a prisoner of chronic pain.