

PAIN TERMINOLOGY FOR CAREGIVERS		
Term	Definition	Comment/Importance to Caregiving
Pain	An unpleasant physical and emotional experience associated with or described in terms of actual or potential tissue damage	<ul style="list-style-type: none"> • Understanding the pain helps you share important information with your loved one's healthcare providers that can help to guide the treatment plan • "Pain is whatever the older adult says it is, occurring whenever he/she says it does"
TYPES OF PAIN		
Term	Definition	Comment/Importance to Caregiving
Acute Pain	Pain that is usually temporary and results from something specific, such as a surgery, an injury, or an infection	<ul style="list-style-type: none"> • Understanding the type of pain helps you share important information that can help to guide the treatment plan • Ineffectively treated acute pain can turn into chronic pain
Chronic Pain	A painful experience that continues for a prolonged period that may or may not be associated with a disease	<ul style="list-style-type: none"> • Also called persistent pain • It is estimated up to 80% of individuals living in nursing homes have chronic pain • A variety of diagnoses contribute to chronic pain in this population, including: osteoarthritis, cancer, post-stroke pain, diabetic peripheral neuropathy, and others
Musculoskeletal Pain	Pain of the muscles, joints, connective tissues and bones	<ul style="list-style-type: none"> • This pain is relatively well localized and is typically worse on movement • This type of pain is often described as a dull, or 'background' aching pain, although the area may be tender to pressure
Breakthrough Pain	Pain that increases above the level of pain addressed by ongoing analgesics	<ul style="list-style-type: none"> • Associated with cancer pain • Reported in 2 out of 3 people with continuous persistent cancer pain • This pain may be sudden or gradual, brief or prolonged and spontaneous

<p>Nociceptive Pain</p>	<p>Pain caused by tissue injury in the joints, bones, muscles, and various internal organs. The patient's nervous system is functioning normally, picks up the injury and sends the information to the brain.</p>	<ul style="list-style-type: none"> • Nociceptive pain is typically a localized, constant pain and often described as aching or throbbing • This type of pain is usually time limited: when the tissue damage heals, the pain typically resolves • This type of pain tends to respond well to treatment with nonopioids and opioids
<p>Neuropathic Pain</p>	<p>Pain initiated or caused by a primary lesion or dysfunction in the nervous system</p>	<ul style="list-style-type: none"> • Common words used to describe this pain include: burning, tingling, numb, squeezing & itching. There may be electric shooting sensations, often radiating down a nerve path and sensitivity over the area of skin. • Pain may persist for months or years beyond healing of damaged tissues • Neuropathic pain is frequently chronic & tends to respond less well to treatment with opioids but may respond to other drugs like anti-seizure and antidepressant medications
<p>TERMS USED TO DESCRIBE PAIN</p>		
<p>Term</p>	<p>Definition</p>	<p>Comment/Importance to Caregiving</p>
<p>Onset</p>	<p>Description of the experience of the beginning of the pain.</p>	<ul style="list-style-type: none"> • Understanding the onset of pain helps you share important information with your loved one's healthcare provider that can help to guide the treatment plan • Your loved one may describe a sudden or gradual development of the pain, associated with a known injury or illness • Asking about onset can also help identify pain triggered by specific movement or activity
<p>Duration</p>	<p>How long the pain has been experienced and continues to be present (lasting minutes or hours)</p>	<ul style="list-style-type: none"> • Understanding the duration of pain helps you share important information with your loved one's healthcare provider that can help to guide the treatment plan • As the person that knows your loved one best you may be the one

		<p>to provide the most accurate information to the healthcare team, especially if your loved one is unable to self-report. This information is vital in helping to support treatment plan decisions</p> <ul style="list-style-type: none"> • Information is critical for evaluating the effectiveness of the treatment plan
Frequency	The number of occurrences in a specified period of time; how often the pain is experienced in a given time period.	<ul style="list-style-type: none"> • Understanding the frequency of pain helps you share important information with your loved one's healthcare provider that can help to guide the treatment plan • Knowing the frequency of pain is useful in developing treatment strategies and for individualized scheduling of care activities
Location	Site(s) of pain	<ul style="list-style-type: none"> • Understanding the location of pain helps you share important information with your loved one's healthcare provider that can help to guide the treatment plan • Most older adults have pain in more than one location • Document-intensity & quality for all pain locations • Pain maps (drawing of a body so you can indicate where the pain is located) are very useful in documenting all pain locations, guiding therapy, etc.
Intensity	The older adult's descriptive rating (such as a number, "5" or a word, like "moderate") that describes the intensity or severity of the pain.	<ul style="list-style-type: none"> • Understanding the intensity of pain helps you share important information with your loved one's healthcare provider that can help to guide the treatment plan • Also called Severity • Usually helpful to identify intensity for the 'worst pain' over a specified period as well as 'the best the pain gets' • Assessing the older adult's present pain rating and an identified pain rating acceptable to the older adult is also important

		<ul style="list-style-type: none"> Use the most appropriate pain assessment scale individualized to the older adult’s cognitive and sensory abilities to determine their pain intensity level (see the FAST FACT- Caregivers: When to use Pain Assessment Tools)
Pattern	The progress of the pain over time including changes, often influenced by times of day (e.g., certain hours of the day, night or day, monthly patterns), periods of rest, or specific or general activity/movement.	<ul style="list-style-type: none"> Understanding the pattern of pain helps you share important information with your loved one’s healthcare provider that can help to guide the treatment plan Helps to determine if there are influences that impact the pain Older adults can experience constant and/or episodic pain Analgesic treatment should be tailored to these patterns
Quality	Description of the characteristics of the pain, preferably in the words used by the older adult to describe the pain.	<ul style="list-style-type: none"> Understanding the quality of pain helps you share important information with your loved one’s healthcare provider that can help to guide the treatment plan Also called “Character” of pain Helpful in determining the type of pain to select the most appropriate treatments, including analgesics and nondrug therapies If the older adult has difficulty describing the pain, it may be helpful to offer examples of descriptions including: aching, sore, cramping, pounding, sharp, throbbing, dull, nagging, shooting, numb, tingling, spasm, burning, gnawing, pressure-like, radiating, stabbing, tingling, tender, knife-like, etc.
PAIN ASSESSMENT & MANAGEMENT TERMINOLOGY		
Term	Definition	Comment/Importance to Caregiving
Pain Assessment	The process of gathering information on the pain including the onset, duration, frequency, location, intensity, pattern, and quality of the pain.	<ul style="list-style-type: none"> The caregiver is often in the best position to provide the most accurate information for a Pain Assessment to guide the healthcare team in the

		development and ongoing updating of the treatment plan
Pain Diary	A communication tool used to share information about the daily pain experience with the healthcare team	<ul style="list-style-type: none"> The caregiver can use a Pain Dairy to document the daily pain experience of their loved one to monitor the effectiveness of the current pain treatment plan to share with the healthcare team
Pain Scale	A tool used to evaluate an individual's pain intensity or behavior.	<ul style="list-style-type: none"> For individuals who are able to self-report a pain scale that uses a numeric rating scale (such as 1-10) or a verbal descriptor scale (such as mild, moderate or severe) may be appropriate (see FAST FACTS-When to use Pain Assessment Tools). For Individuals who are NOT able to self-report there are specific Pain Scales that look at behaviors that may indicate pain (If your loved one does not have the ability to self-report, ask your healthcare provider about the appropriate tool to use).
Pain Specialist	A clinician who has received advanced training in pain management.	<ul style="list-style-type: none"> If you find that your loved ones' regular provider can't help, ask him or her for the name of a pain medicine specialist. A pain specialist may be a doctor, nurse, or anesthesiologist.
TREATMENT RELATED TERMINOLOGY		
Term	Definition	Comment/Importance to Caregiving
Analgesic	Drugs that relieve pain without altering consciousness.	<ul style="list-style-type: none"> Analgesics are often part of the treatment plan, especially when pain is moderate or severe
Non-Drug Pain Management Treatments	Nondrug Treatments include activities or experiences that help provide relief of physical and psychological symptoms of pain either with or without the use of medications, or in addition to, the use of medication.	<ul style="list-style-type: none"> There are two categories of nondrug treatment techniques: 1. Physical and 2. Psychological Examples of physical nondrug techniques: 1. Massage; 2. Cold; 3. Heat; 4. Positioning; 5. TENS; 6. Acupuncture; 7. Tai Chi; 8. Yoga; 9. Walking; 10. Qigong Examples of Psychological nondrug techniques: 1. Distraction; 2. Relaxation; 3. Music; 4.

		<p>Controlled breathing & guided imagery; 5. Mindfulness-based Mediation; 6. Cognitive-Behavioral Therapy</p> <ul style="list-style-type: none"> • Mild-to-moderate pain may be relieved by nondrug techniques alone • Moderate-to-severe pain may require medication in addition to nondrug treatment techniques • Some nondrug techniques may require professional oversight to perform
Opioid Therapy	A class of drugs used to reduce pain, generally prescribed to treat moderate to severe pain, that works by interfering with the perception of pain in the brain	<ul style="list-style-type: none"> • Understanding the pain your loved one is experiencing helps you share important information with your loved one's healthcare provider that can help to guide the treatment plan • Helping your loved one to Maintain a Daily Pain Dairy is an excellent way to share information with the healthcare team about your loved ones' pain experience (see the FAST FACTS- Caregivers: Using a Pain Diary)
Opioid Use Disorder	A problematic pattern of opioid use that causes significant impairment or distress.	<ul style="list-style-type: none"> • Used to be called addiction, but now diagnosed as Opioid Use Disorder • Opioid Use Disorder is uncommon among people living in nursing homes being treated for pain • Tolerance and physical dependence are normal physiologic responses to chronic medication administration, whereas Opioid Use Disorder is a disease that is not a normal response to opioid use • Opioid Use Disorder is more likely to occur in older adults with multiple risk factors, such as a genetic predisposition, a history of addictive behavior, or a history of abuse and/or neglect • It is recommended that pain be adequately controlled before reaching conclusions about concerns

		<p>related to Opioid Use Disorder behaviors</p> <ul style="list-style-type: none"> • An individual's behaviors that may suggest Opioid Use Disorder (OUD) sometimes reflect unrelieved pain or other problems unrelated to OUD, you should report all behaviors to your loved ones' healthcare team for evaluation
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