### Pain-Types Terminology and Clinical Use

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| Pain                        | An unpleasant sensory and emotional experience associated with or described in terms of actual or potential tissue damage.                                                                                     | • Pain is always subjective. It is unquestionably a sensation in a part or parts of the body, but it is also always unpleasant and therefore also an emotional experience.  
  • Understanding this, it is often helpful to keep in mind that ‘pain is whatever the older adult says it is, occurring wherever he/she says it does’. Pain is not observable or visible.                                                                                                                                                                                                                                                                                                                                                           |
| Persistent (Chronic or Constant) Pain | A painful experience that continues for a prolonged period of time that may or may not be associated with a recognizable disease process.                                                                   | • It is estimated that up to 80% of people living in nursing homes live with persistent pain.  
  • More than one clinical diagnosis typically contributes to persistent pain in the nursing home population, e.g., osteoarthritis, postherpatic neuralgia, spinal canal stenosis, cancer, post-stroke pain, diabetic peripheral neuropathy, and others.                                                                                                                                                                                                                                                                                                                                                                               |
| Refractory Pain             | Resistant to ordinary treatment                                                                                                                                                                               | Older adults with refractory pain may need a referral to an outpatient pain clinic for a comprehensive, interdisciplinary evaluation and development of a treatment plan.                                                                                                                                                                                                                                                                                                                                                                                   |
| Incident-related Pain       | Pain triggered by specific movements or activities.                                                                                                                                                         | Incident-related episodic pain is best treated by pre-medicating with a dose of short-acting opioid prior to the pain-inducing event, usually a PRN of a medication that is already prescribed.                                                                                                                                                                                                                                                                                                                                                         |
| Breakthrough Pain           | Pain that increases above the level of pain addressed by the ongoing analgesics; this would include incident pain and end-of-dose failure.                                                                 | This term is appropriate only in the Cancer Pain and Palliative Care setting. Patients with non-cancer pain experience paroxysmal pain (see definition below).  
  • Breakthrough pain is reported by 2 out of 3 people with continuous persistent pain.  
  • The pain may be sudden or gradual, brief or prolonged, spontaneous or predictable.  
  • Patients with non-cancer pain experience paroxysmal pain episodes (i.e. trigeminal neuralgia) or fluctuation of pain as part the natural course of the disease (i.e. patients with central pain syndromes), or pain flare-ups (pain that is provoked by activity, i.e. patient with low back pain who plays golf or tennis). |
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| Analgesia           | The process of relieving or reducing pain; a state in which painful stimuli are so moderated that, although still perceptible they are no longer painful. | • Analgesia denotes the process of relieving pain  
• Patient remains fully conscious with the use of analgesia. |
| Adjuvant Analgesic  | A drug that has a primary purpose other than pain relief but can also serve as an analgesic for some painful conditions. | • Some examples include tricyclic antidepressants or anticonvulsants. |
| Visceral Pain       | Pain of the body’s internal organs                                           | • This pain is often poorly localized and usually constant  
• It is often described as deep and aching and is often referred to other sites. |
| Musculoskeletal Pain (or Somatic Pain) | Pain of the muscles, joints, connective tissues and bones | • This pain is relatively well localized, and is typically worse on movement.  
• It is often described as a dull, or ‘background’ aching pain, although the area may be tender to pressure. |
| Neuropathic Pain    | Pain initiated or cause by a primary lesion or dysfunction in the nervous system | • Neuropathic pain may have a burning, deeply aching quality accompanied by some sudden sharp lancing pain and often radiates down a nerve path.  
• Older adults may have numbness, tingling, or skin sensitivity over the area of skin. |
| Allodynia           | A non-painful stimulus felt as painful in spite of normal-appearing tissues | • Common in many neuropathic pain conditions.  
• An example of an older adult experiencing allodynia is one who is uncomfortable with the bed sheets resting on their feet or legs. |
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References


