Older patients have a higher pain tolerance after major surgery—or do they?

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New research presented at this year's Euroanaesthesia meeting in Geneva (3-5 June) suggests that age plays a part in the level of pain experienced after major surgery, with older people most likely to better tolerate serious post-operative pain. However, pain-related impact on physical function does not decline, suggesting older patients are in fact
experiencing pain but not admitting to it.

At least half of surgical patients suffer from moderate to severe pain after common operations. However, individual perceptions of pain intensity, impairments caused by pain, and effectiveness of pain relief differ depending on the type of surgery, medication, gender, and age. Previous studies have shown that patient reported maximum pain decreases with increasing age.

In this study, Claudia Weinmann, Dr Marcus Komann and Prof. Winfried Meissner from Jena University Hospital in Germany wanted to determine whether these findings could be confirmed by international registry data, and also whether age influences other outcomes like pain-related functional impairment.

Using data from the PAIN OUT registry—an international acute pain registry and research project that collects patient-reported outcome data on day 1 after surgery—Prof Meissner and his team examined both pain intensity and interference of pain in physical activity (functional impairment) in 2,390 patients who underwent a total knee replacement in 54 hospitals around the world between February 2010 and November 2016. They measured the independent variable of age and the dependent variable of functional impairment. Outcomes were measured using standard rating scales employed in clinical pain studies.

The results showed a clear trend of reported pain scores decreasing with increasing age (see figure in poster below). However, functional impairment scores did not decrease with increasing age.

The authors conclude: "Our study confirms that the older the patients, the lower their reported maximum pain levels. However, elderly patients do not report less functional impairment caused by pain. As functional impairment is a more clinically relevant factor for postoperative
recovery pain intensity, these findings suggest that elderly patients might tend to underreport their pain levels, and that asking about functional impairment might be a better tool for pain assessment."

They add: "Is it more likely that older patients do not report pain for 'social' reasons—for example, they think pain is normal or they have to bear it without complaint - and thus the levels of pain are underreported."

Provided by European Society of Anaesthesiology

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