

Developing a Nonpharmacological Pain Intervention for PLWD: Needs Assessment

Annalisa Na, DPT, PhD, Joke Bradt, MT-BC, PhD, Laura N. Gitlin, PhD | Drexel University

Funding Source: NIA K23AG081547



OBJECTIVE: Synthesize results from three studies to conduct a needs assessment for developing nonpharmacological pain intervention for People Living with Dementia (PLWD) per Step 1 of *Intervention Mapping*



DESIGN AND PARTICIPANTS:

Scoping Review

STUDY 1

Current literature on nonpharmacological pain management for PLWD

STUDY 2

National Health and Aging Trends Study (NHATS)

Secondary analysis to define pain prevalence and variations among older adults with and without dementia

STUDY 3

Qualitative

Semi-structured interviews of Clinicians, PLWD and/or Care Partners (CPs)



MEASURES:

Scoping Review

- Intervention Type
 - Active: Engaged (e.g., exercise)
 - Non-Active: Passive (e.g., massage)
- Setting
 - Community-Based
 - Other (e.g., skilled nursing, unspecified)

NHATS

Pain distribution based on

- Dementia Status (+/-)
- Pain (+) → Pain locations impacting mobility
 - Back
 - Hip
 - Knee
 - Leg

Qualitative

- 60 minutes of semi-structured interventions
- Content analysis by 3 independent coders who achieved consensus via discussion
- Identify standard care for pain in PLWD
- Assess perceptions of evidence-based pain interventions



RESULTS:

Scoping Review

- 14 Interventions
 - Active = 2 Interventions
 - Non-active = 12 Interventions
- 36 Studies
 - Community-based = 9 Studies
 - Other Settings = 26 Studies

NHATS

- 9,974 Medicare Beneficiaries

Table 1. Pain Prevalence (N, %)

	- Dementia	+ Dementia
+Pain	4836 (55.1)	659 (43.1)
<i>Pain Locations</i>		
Back	3432 (71.0)	461 (70.0)
Hip	1824 (37.8)	276 (41.9)
Knee	2756 (57.0)	443 (67.2)
Leg	1001 (20.7)	164 (24.9)

- Prevalence of pain and pain locations = similar for older adults with or without dementia (Table 1)

Qualitative

- 19 Clinicians
 - Exercise = standard pain care, but NOT for PLWD
 - Unsure how to engage PLWD in exercise for pain management
- 9 PLWD and/or CPs
 - Don't recall receiving exercise for pain
 - Perceive exercise may be beneficial



RELEVANCE: Per this assessment, pain intervention needs to prioritize exercise and focus on low back pain and knee pain among community-dwelling PLWD. Our findings underscore the importance of addressing concerns surrounding the engagement of PLWD in exercise. Therefore, determining preferred delivery characteristics and the role of care partners must precede intervention development.