

How to Manage Disability-Related Pain as You Age

People with physical disabilities often experience pain related or in addition to their disability condition.

When this pain lasts for more than three months, it is called chronic pain. Chronic pain seems to be most common in middle age (45-65 years). However, as some individuals with physical disabilities age, the frequency and severity of pain may increase. Chronic pain can have negative effects on sleep, mood, fatigue, thinking, work, and daily activities.

With help from health care providers, you can learn to manage your chronic disability-related pain and limit its impact on your life.

Types of Pain

You can have chronic pain in different parts of your body for different reasons. Three common types of chronic pain in people with physical disabilities are:

- **Musculoskeletal** – This pain comes from problems in the muscles, tendons, and joints. It is often described as “aching” or “heavy.” People with physical disabilities are at a greater risk than those without disabilities to develop this kind of pain as they age. For example, people who use a manual wheelchair for many years may experience musculoskeletal pain in their shoulders due to overuse.
- **Neuropathic** – This pain is caused by abnormal signals from damaged nerves. It is often described as “sharp,” “shooting,” “electric,” or “burning.” People with physical disabilities are at a greater risk than those without disabilities to have neuropathic pain, especially if their disability condition involves damage to the nerves. For example, the most common symptom reported by people with multiple sclerosis (MS) is chronic neuropathic pain. Below injury level neuropathic pain is also common in individuals with spinal cord injury (SCI).
- **Visceral** – This is pain in the abdomen or pelvis and can be caused by conditions such as ulcers, constipation, or appendicitis. This pain is often described as “squeezing,” “pressure,” or “aching”. Visceral pain is more common in people with SCI.

Maintaining a Healthy Lifestyle

Maintaining a healthy lifestyle can help you reduce and manage your chronic pain as you age. It may be the most important thing you can do to minimize pain and its impact in the long run. A healthy lifestyle includes:

- **Activity** – Keeping busy and challenging yourself physically and mentally will help you have the energy and focus to manage your pain.
- **Diet** – Eating healthier can help to relieve chronic pain. Diets high in fruits and vegetables, legumes, and whole grains and low in sugar and red meat have been related to lower levels of pain.
- **Weight** – Added weight places more stress on joints and can make pain worse. Maintaining a healthy weight can help you move easier and with less pain.
- **Sleep and Rest** – Adequate sleep and rest can make it easier to manage your pain.

For more information on how to maintain a healthy lifestyle as you age, check out our other factsheets in this series including [How to Stay Physically Active](#), [Tips for Healthy Eating and Healthy Aging](#), and [How to Sleep Better](#).

Seeking Help for Your Pain

- Talk to your health care provider about your chronic pain. Pain is a personal experience, and health care providers often rely on your description of the pain to diagnose and treat it.

- When meeting with your health care provider, be honest about how much (or little) pain is affecting you.
- The best treatment plans for chronic pain are tailored to the person and the type of pain he or she has. Your treatment plan should include input from you, your family, and other members of your health care team.

Pain Management

There are several treatments available to help you effectively manage your pain as you age. Chronic pain is often best managed by using more than one strategy.

Self-management

While it is important to rely on expertise from your health care provider, you play the most important role in managing your day-to-day pain. Self-management techniques for chronic pain include:

- **Tracking your pain** – Keep a record of your pain and take it with you to your medical appointments. You may discover that your pain is unpredictable. Notice what triggers and what relieves your pain, such as changes in your activities, time of day, weather, or other conditions like stress or depression. Track your strengths. What are you doing well to deal with pain and its effects?
- **Setting goals** – Use the information from tracking your pain to set goals for managing your pain. Ask your health care provider to help you create long-

term goals, such as increasing your level of physical activity, learning relaxation techniques for pain, or decreasing the impact pain has on your mood. Break the long-term goals into smaller, more specific short-term goals.

- **Monitoring your progress** – Monitor how different pain management strategies are working or not working. If one strategy does not work, tell your health care provider and discuss trying a different strategy.

Behavioral and Coping Skills Treatments

Behavioral treatments can help you manage pain and reduce the impact of pain on your life. Behavioral treatments for chronic pain include:

- **Cognitive Behavioral Therapy or “CBT”** – Involves learning relaxation skills, goal-setting skills, strategies for becoming more active, and skills for pacing your activities. It can also include examining your thoughts about pain and learning new ways to replace any unhelpful thoughts with more helpful ones. CBT has been shown to reduce pain, improve mood, and improve function.
- **Mindfulness training or meditation** – Involves focusing on your present experience in a manner that is open and non-judgmental. Mindfulness can be helpful in managing the suffering that can occur with pain.

Physical Treatments

It is important to consult with your health care provider about physical treatment options to reduce risk of further pain. Physical treatments for chronic pain include:

- **Regular Exercise** – Exercise is often helpful in managing pain and improving function. Potential goals for exercise include aerobic fitness, improved flexibility, increased strength, and increased skill in performing physical activities. Some people report that movement activities such as yoga, Tai Chi, swimming, or water aerobics are helpful in managing pain. If you have limited mobility due to age or disability, there are modified at-home and group exercise programs available.

Complementary and Alternative Treatments

There is some evidence that complementary medicine approaches may provide additional relief from chronic musculoskeletal and neuropathic pain. These may include things like massage, acupuncture, or self-hypnosis training. Most evidence does not support the use of homeopathic remedies or herbal treatments for chronic pain.

Medications

Pain is often treated with over-the-counter or prescription pain relievers. Categories of medications and the types of pain they are used to treat include:

- **Over-the-counter medications** – These medications are effective for the management of mild to moderate pain. Common ones include:

- ◆ Acetaminophen, such as Tylenol®, is often used to relieve pain associated with mild arthritis and osteoarthritis.
- ◆ Non-steroidal anti-inflammatory drugs (NSAIDs), such as aspirin and ibuprofen, and Aleve®, are often used to relieve pain associated with mild arthritis, osteoarthritis, and rheumatoid arthritis.

- **Prescribed pain medications** – Prescribed medications are sometimes used to treat or reduce the symptoms of chronic pain. Some common ones include:

- ◆ Anticonvulsants (also known as anti-seizure medications) are used to treat neuropathic pain.
- ◆ Several kinds of antidepressants are sometimes used to treat neuropathic pain and depression and to assist with sleep.
- ◆ Opioids are sometimes used to treat neuropathic pain, acute tissue injury, and musculoskeletal pain. Long-term use of opioids can result in tolerance and other health problems. It is important to discuss the risks and potential benefits of opioids with your health care provider.

- ◆ Muscle relaxants and anti-spasticity medications are sometimes used to treat spasm-related and musculoskeletal pain.
- ◆ There is some evidence that medical marijuana reduces central neuropathic pain and spasticity in people with MS, and more research is underway. As of 2018, medical marijuana is legal in 29 US states and Washington DC.

Although it is common to think that pain is “normal” as we age, there are treatments to reduce the impact of chronic pain on your life. Be open to the options your provider suggests for managing your pain but also be active in looking for solutions!

Additional Resources:

Pain with Multiple Sclerosis:

[National Multiple Sclerosis Society](#)

Pain after Spinal Cord Injury:

[The Northwest Regional Spinal Cord Injury System](#)

[Christopher & Dana Reeve Foundation](#)

Pain with Post-Polio Syndrome:

[Post-Polio Health International](#)

Chronic Pain in General:

[The American Chronic Pain Association](#)

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Disclaimer: This information is not meant to replace the advice from a medical professional. Consult with a qualified and licensed health care provider in your state.

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