

Public release date: 30-Nov-2005

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New pain research: Routine Tylenol for nursing home residents with dementia increases activity

Saint Louis University research is published in Journal for the American Geriatrics Society

ST. LOUIS -- Nursing homes should consider the potential benefits of routinely giving over-the-counter painkillers to residents who have dementia and are likely to have from chronic pain, Saint Louis University research suggests.

The study, published in the November issue of the Journal of the American Geriatrics Society, finds that nursing home residents with moderate to severe dementia who were given acetaminophen were more socially active than those who received a placebo.

"Nursing homes may want to consider the potential benefits of some kind of safe, routine, prophylactic analgesic for people with dementia who are at high risk for pain," said John T. Chibnall, Ph.D., professor of psychiatry at Saint Louis University School of Medicine and lead study author.

"The assumption is that people with dementia don't feel pain because they're demented. Actually, they do feel it; they just can't tell you about it. Standard pain assessment requires levels of communication and language comprehension that people with advanced dementia, by definition, do not have."

The Saint Louis University research team included Raymond C. Tait, Ph.D., professor of psychiatry, and Bonnie Harman, Ph.D., assistant clinical professor of nursing. The team observed 25 patients who had moderate to severe dementia at two nursing homes over an eight-week period. In addition to receiving their usual psychotropic medications, they routinely were given acetaminophen for four weeks, and a placebo for four weeks.

Acetaminophen (Tylenol) was given because it has few side effects, is routinely given for pain control in nursing homes, and is not habit forming or sedating, Chibnall said.

Those who received the acetaminophen were more active than the others. They spent less time alone in their rooms and more time interacting with others, watching television, listening to music, engaging in work-like activities and talking to themselves.

"Treating their pain seems to energize them somewhat, which was manifested in more positive engagement with their environment," Chibnall said.

He said that patients who have a history of conditions where pain is a primary symptom -- including arthritis, fractures, diabetic neuropathy, chronic low back pain or headaches -- are the most likely to benefit from routine analgesics, such as Tylenol.

"The current findings are particularly noteworthy because they were obtained with acetaminophen, a mild analgesic that does not carry the side-effect risks of more potent opioid analgesics. Under certain circumstances, prophylactic treatment of pain in elderly persons with dementia therefore appears safe and effective in increasing active engagement with the environment."

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Established in 1836, Saint Louis University School of Medicine has the distinction of awarding the first M.D. degree west of the Mississippi River. Saint Louis University School of Medicine is a pioneer in geriatric medicine, organ transplantation, chronic disease prevention, cardiovascular disease, neurosciences and vaccine research, among others. The School of Medicine trains physicians and biomedical scientists, conducts medical research, and provides health services on a local, national and international level.
