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Triad of Suffering: Pain, Depression, and Anxiety among Newly Admitted Nursing Homes Residents
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Introduction: Depression and anxiety disorders are prevalent among older adults, as is pain. These conditions are independently associated with reduced functioning and quality of life. Despite the frequent co-occurrence of all three of these disorders, little is known about the epidemiology and treatment of these disorders in nursing homes. The objectives of this study were to: 1) describe the prevalence of depression, anxiety disorders, and pain among newly admitted nursing home residents; and 2) describe the treatment of these disorders.

Methods: We used national Minimum Data Set (MDS) version 3.0 data from 2011-2012. Federally-mandated for all residents living in Medicare/Medicaid-certified nursing facilities, the MDS is a comprehensive clinical assessment including >400 items on sociodemographics, mood and behavior, symptoms, pain, clinical diagnoses, and treatments. We identified residents with MDS assessments performed at admission between 2011-2012 who were 65 years of age or older; were non-comatose; were not admitted to a swing bed provider; did not have mental retardation or developmental delays; & were able to complete a pain assessment (n = 783,826).

Results: At admission, 36% of residents (n = 283,050) had a documented active diagnosis of depression (other than bipolar disorder), anxiety disorder, or both. Having pain in the last 5 days was reported by 53% of residents. Rates of self-reported pain were similar across psychiatric disorders. 60-62% of residents reporting pain received a combination of pain management interventions. More than a third of residents did not receive any psychiatric treatment.

Conclusions: Many nursing home residents experience pain, depression, and anxiety at admission. Pain management is common. An improved understanding of the relationships between pain, mental health, and analgesic use is necessary since older adults, particularly those in nursing homes, are routinely excluded from clinical trials despite being at high risk for adverse effects of analgesics and other treatments.

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