

Medically unexplained physical symptoms

Factsheet for parents and teachers

About this factsheet

This is one in a series of factsheets for parents, teachers and young people entitled *Mental Health and Growing Up*. The aims of these factsheets are to provide practical, up-to-date information about mental health problems (emotional, behavioural and psychiatric disorders) that can affect children and young people. This factsheet looks at why some young people suffer from problematic physical symptoms when there seems to be no medical cause. It also offers advice about how to recognise and deal with the problem.

Introduction

One in 10 children suffer from physical symptoms for which no medical cause can be found. Common symptoms are headaches, tiredness, sore muscles, sickness, upset stomach, back pains, blurred vision, weakness and food intolerance. In many children, these symptoms can be made worse by worries – most commonly about school, friendships or family.

What are the causes?

Physical illness or injury may be a factor at the beginning, but when no obvious physical explanation can be found, emotional or psychological factors need to be thought about. These problems are more common in children and young people who:

- are feeling stressed, for whatever reason
- are very sensitive to physical symptoms and pains
- are very sensitive to others
- tend to be fussy or perfectionists
- are very anxious and worry more than most
- worry continuously about the symptoms and their effects on everyday activities – this can cause the symptoms to continue, and even get worse
- have a tendency to develop mental health problems, such as anxiety or depressive disorders.

Unexplained physical symptoms may be part of psychiatric disorders, such as depression or anxiety.

What are the effects of unexplained symptoms?

Everyday life can become very uncomfortable and stressful for these children. Unexplained

symptoms can also be very worrying for parents.

Most children learn to cope with these symptoms. But for some, the symptoms may result in:

- missing a lot of school; they may not achieve what they should academically
- seeing less of their friends – this means fewer interests, hobbies and fun
- being less mature and independent than other children because of their dependence on the family.

Who can help?

Your general practitioner or school doctor will be able to assess your child and help decide if any specialist investigation or treatment is required. If necessary, they will refer your child to the local paediatrician or child psychiatrist.

Specialists, such as psychiatrists, can help to distinguish unexplained physical symptoms from mental health problems such as depression or anxiety. Psychiatrists can also help identify psychological factors that may be contributing to the symptoms.

Talking treatments can help the family to cope with these problems. Medication may also play a part, particularly in overcoming anxiety and depression, or in dealing with eating or sleep problems. Relaxation exercises can be very helpful with recurrent headaches.

A planned approach

Psychiatric help can also be helpful in developing a planned approach to the problem. For it to be effective, everyone needs to work together as a team towards the same goals: you, your child, the paediatrician, psychiatrist, general practitioner and school may all need to get involved.

Sources of further information

- ChildLine provides a free and confidential telephone service for children. Helpline 0800 1111; www.childline.org.uk.
- The Mental Health Foundation, 7th Floor, 83 Victoria Street, London SW1H 0HW; tel. 020 7802 0300; www.mentalhealth.org.uk.
- Parentline offers help and advice to parents on bringing up children and teenagers. Helpline 0800 800 2222; textphone 0800 783 6783; www.parentlineplus.org.uk.
- YoungMinds provides information and advice on child mental health issues. 102–108 Clerkenwell Road, London EC1M 5SA; Parents' Information Service 0800 018 2138; www.youngminds.org.uk.
- The *Mental Health and Growing Up* series contains 36 factsheets on a range of common mental health problems. To order the pack, contact Book Sales at the Royal College of Psychiatrists, 17 Belgrave Square, London SW1X 8PG; tel. 020 7235 2351, ext. 146; fax 020 7245 1231; e-mail: booksales@rcpsych.ac.uk, or you can download them from www.rcpsych.ac.uk.

The aim is to help the child to recover gradually by creating more effective ways of coping with the symptoms and getting back to a normal daily routine. This is best done with active participation from the family. It will involve:

- finding ways of paying less attention to the symptoms
- a small but steady increase in everyday and social activities
- the child will be encouraged to do more for themselves and to regain their confidence and independence
- asking teachers to help with looking at ways of overcoming any school or education problems.

Carers of children with unexplained physical symptoms can suffer a lot of stress. Family life may become dominated by the child's problem. Parents will need to be caring, but also determined and positive even when things seem bleak and uncertain. Often parents find it hard to know what to do for the best – when to encourage and when to comfort, when to insist and when to take the pressure off. They may benefit from expert help and advice about this.

Family or individual counselling may be helpful if focused on issues such as how to:

- respond to pain and other symptoms more effectively
- increase levels of physical and social activity
- overcome depression, anxiety, lack of confidence and poor motivation
- deal with family relationship difficulties when these become part of the problem.

It can be helpful for everyone involved in helping the child to meet and review progress from time to time. This allows everyone to share their ideas about the best ways forward – physical, psychological and educational.

References

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- Taylor, S. & Garralda, E. (2003) The management of somatoform disorder in childhood. *Current Opinion in Psychiatry*, **16**, 227–231.