Somatoform Disorders

Somatoform disorders are mental illnesses that cause bodily symptoms, including pain. The symptoms can't be traced back to any physical cause. And they are not the result of substance abuse or another mental illness.

People with somatoform disorders are not faking their symptoms. The pain and other problems they experience are real. The symptoms can significantly affect daily functioning.

Doctors need to perform many tests to rule out other possible causes before they diagnose a somatoform disorder.

A diagnosis of a somatoform disorder can create a lot of stress and frustration for patients. They may feel unsatisfied that there's no known explanation for their symptoms. Stress often leads patients to become more worried about their health. This creates a vicious cycle that can persist for years.

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Types and Symptoms of Somatoform Disorders

Symptoms and their severity vary depending on the type of somatoform disorder. There are several types of somatoform disorders:

**Somatization disorder.** This is also known as Briquet’s syndrome. Patients with this type have a long history of medical problems that starts before the age of 30.

The symptoms involve several different organs and body systems. The patient may report a combination of:

- pain
- neurologic problems
- gastrointestinal complaints
- sexual symptoms

Many people who have somatization disorder will also have an anxiety disorder.

**Undifferentiated somatoform disorder.** This is a less specific version of somatization disorder. A diagnosis requires that a person have one or more physical complaints of unexplained symptoms for at least six months.

**Hypochondriasis.** People with this type are preoccupied with concern they have a serious disease. They may believe that minor complaints are signs of very serious medical problems. For example, they may believe that a common headache is a sign of a brain tumor.

**Body dysmorphic disorder.** People with this disorder are obsessed with -- or may exaggerate -- a physical flaw. Patients may also imagine a flaw they don't have.

The worry over this trait or flaw is typically constant. It may involve any part of the body. Patients can be obsessed with things such as wrinkles, hair, or the size or shape of the eyes, nose, or breasts.

**Conversion disorder.** This condition strikes when people have neurological symptoms that can't be traced back to a medical cause. For example, patients may have symptoms such as:

- paralysis
• blindness
• hearing loss
• loss of sensation or numbness

Stress usually makes symptoms of conversion disorder worse.

**Pain disorder.** People who have pain disorder typically experience pain that started with a psychological stress or trauma.

For example, they develop an unexplained, chronic headache after a stressful life event.

Pain is the focus of the disorder. But psychological factors are believed to play a role in the perception and severity of the pain.

People with pain disorder frequently seek medical care. They may become socially isolated and experience problems with work and family life.

**Somatoform disorder not otherwise specified.** People with this type may have conditions that have features of other somatoform disorders. But they do not meet the full criteria for any other diagnosis.

Conditions that fall into this category include pseudocyesis. This is the mistaken belief of being pregnant based on other signs of pregnancy, including an expanding abdomen; feeling labor pains, nausea, breast changes, fetal movement; breast changes; and cessation of the menstrual period.

**Treatment of Somatoform Disorders**

Patients who experience unexplained physical symptoms often cling to the belief that their symptoms have an underlying physical cause, despite evidence to the contrary. Patients may also dismiss any suggestion that psychiatric factors are playing a role in their symptoms.

A strong doctor-patient relationship is a key to getting help with somatoform disorders. Seeing a single health care provider with experience managing somatoform disorders can help cut down on unnecessary tests and treatments.

The focus of treatment is on improving daily functioning, not on managing symptoms. Stress reduction is often an important part of getting better. Counseling for family and friends may also be useful.

Cognitive behavioral therapy may also help relieve symptoms associated with somatoform disorders. The therapy focuses on correcting:

• distorted thoughts
• unrealistic beliefs
• behaviors that prompt health anxiety

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WebMD Medical Reference
SOURCES:
American Academy of Family Physicians: Somatoform Disorders."

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