



3. Pain disorder

Condition characterised by a serious and prolonged pain with no medical explanation, or if there is any medical explanation their pain is excessively exaggerated.

4. Body dysmorphic disorder

Is a distressing and impairing pre-occupation with an imagined or slight defect in bodily appearance.

5. Hypochondriasis

Preoccupation with the fear of contracting or belief of having a serious disease.

6. Undifferentiated somatoform disorder

Is characterised by one or more unexplained physical complaints of at least six months duration.

7. Somatoform disorder not otherwise specified

This residual category was created in order to classify certain somatoform disorders whose symptoms and associated disability do not fit the criteria for other somatoform disorder.

Common Complications / Problems

1. To the patient

- Failure of doctors to recognize the problem may lead to severe stress for the patient and patient may develop severe depression, anxiety disorder and other psychiatric disorders.
- In certain cases patients have attempted and / or even committed suicide.

2. To the family

- Loss of quality time because the patient is always sick.
- The cost of medical treatment.

3. To the doctors

- Reports have been mentioned where patients have tried to sue or expressed fantasies of harming their physicians.

4. To the health system

- Patients may be exposed to dangerous, costly and frustrating diagnostic procedures and treatments.

Approach to Management

Despite their high incidence, few hospitals have teams with the expertise to manage this group of conditions. The lack of appropriately trained personnel leads to inappropriate care, including increased numbers of admissions and investigations, to the detriment of the patients. The absence of appropriate care also increases the cost to the health services.

Successful treatment of somatoform disorder require physician to pursue a positive diagnosis rather than rely on a diagnosis of exclusion.

Treatment consists of giving an acceptable explanation of the symptoms to the patient, avoiding unwarranted interventions, and arranging brief but regular office visits for which the patient does not need to develop a new symptom to receive medical attention.

The use of SSRI's together with cognitive behavioural therapy (CBT) has been shown to be the most effective form of therapy for patients with different types of somatoform disorders. This may require multi-disciplinary approach and referral to psychiatrists.

Conclusion

Physical illness, where there is no apparent disease, is a problem for doctors and the health system. Such an illness is also a cause of distress and anguish for patients and families. General practitioners are inevitable involved. Therefore doctors must always check their blind spots for those type of patients. This will help in reducing the patient distress and unnecessary costs burden to the health system. ◆

References on Request