

UNEXPLAINED SIGNS AND SYMPTOMS

Where illness is unexplained, terms such as somatization, conversion, and psychosomatic are to be avoided, except where there is clear evidence of a psychological cause for the problems. The use of these terms at other times implies a psychological causation which usually cannot be demonstrated. The label 'Unexplained Signs and Symptoms' is preferred. Implicit in this label is that not only are the symptoms *physically* unexplained but also often *psychologically* unexplained.

It is best to accept that symptoms are real and that they need to be treated. Pain must be taken seriously. The core intervention is usually a rehabilitation program, the principles of which are very similar to those for rehabilitation for any disability.

Practice at WCH is to hold a multi-disciplinary meeting *early* in the process of an inpatient stay attended by

- relevant clinician from Allied Health,
- a DPM Clinician,
- Nursing Unit Head (preferably the Adolescent Ward)
- Consultant from medical, surgical or sub-specialty team,
- Social worker
- pain team where appropriate

That meeting will

- act as the initiation point for Allied Health to put in place a rehabilitation program.
- define an appropriate case manager

We have developed a booklet for patients outlining why we use the term 'unexplained signs and symptoms', our approach to restrained rehabilitation and defining the role of case manager.

We have had our best outcomes when the paediatric or surgical team has discussed the case with Allied Health and DPM staff as soon as the possibility of conversion disorder is raised. There is no need to wait until all possible 'organic' explanations are excluded, before having a consultation with DPM (phone 17227). DPM and allied health can tailor assessment and intervention to the ongoing need for medical investigations, taking into account judgements about what is acceptable to the family.

A paper describing WCH's approach to conversion disorder can be found here and on the intranet:

[Restrained Rehabilitation: An approach to Conversion Disorder](#)

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