

# Children with Functional Neurological Symptom Disorder

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# BUPs Konsultenhet, Karolinska, Solna

## Consultation liaison clinic

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- 5 psychologists, 3 doctors in training, 2 child psychiatrists, 2 social workers, 1 secretary
- 434 referrals (2016) from the pediatricians
- 64 referrals (2016) from the Neurological ward
- Unknown number of Functional Neurological Symptom Disorder!

# Functional neurological symptoms

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Other names:

- Dissociative symptoms
- Functional gait disturbances
- Non-epileptic seizures/psychogenic seizures
- Non organic neurological symptoms
- Conversion Disorder
- Somatoform Disorder (not only neurological symptoms)

# Symptoms that are:

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*” neurological (such as weakness, numbness or blackouts)*

*REAL (and not imagined)*

*and due to a PROBLEM with the FUNCTIONING of the nervous system, and NOT due to neurological disease...”*

*from [www.neurosymptoms.org](http://www.neurosymptoms.org)*

*Dr Jon Stone*

# Lisa 15 years old

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Family; parents married, two older siblings, sister bullying

School; home full time, previously high achiever

Friends; few, in a conflict with one former best friend

Leg weakness, inability to walk, seizures



Moderate depressive symptoms, no anxiety, no trauma

# Lisa 15 years old

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Psycho-  
education

Values,  
behaviour  
activation

Stress-  
reduction

Together  
with the  
neurologist



Family  
support

# Small study of Functional Neurological Symptoms/ Conversion Disorder in Children

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- Review of the literature from 1995 until June 2015
  - Over 60 articles but only 14 described a cohort of children.
- Interviews with four parents of former patients
  - What did they think was helpful and unhelpful in recovery?

# Why are these symptoms important?

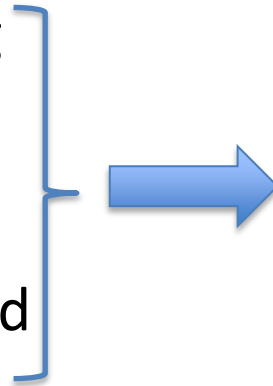
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- Huge amount of suffering
- No guidelines regarding:
  - diagnosis
  - work up / evaluation
  - treatment



# Diagnosis

- Describes the functioning
- Not based on cause
- Not dissociative
- Not medically unexplained



Conversion Disorder  
(Functional  
Neurological  
Symptom Disorder)  
according to DSM-5!!!

## ~~DSM-IV Conversion Disorder~~

- ~~• Psychologically caused?~~
- ~~• Not feigning?~~

# Annual Incidence and clinical presentation

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- 1.3-4.2/100 000 (Kozłowska et al 2007, Ani et al 2013)
- Mean age 12 years
- Girls ( approx. 75 %)
- Multi symptomatic presentation common (western world)
- Frequent hospital visits
- Missing school
- Comorbidity with other somatic diseases
- Antecedent life event or stressor 70%
- Depression
- Anxiety
- Post Traumatic Stress Disorder(PTSD), sexual abuse and violence?
- ADHD? Autism?

# Treatment

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- Psycho education
- Consulting
- Solution focused treatment
- Anxiety treatment
- Relaxation treatment (including biofeedback)
- Family therapy
- Restrained rehabilitation
- CBT
- Medication(antidepressant and sleep inducing)
- Physiotherapy

# Outcome

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- 75 - 100% improved symptoms at follow up 1 year  
(Ani et al 2013)
- Early diagnosis and treatment – better recovery  
(Pehlivanturk, Unal 2001)

# Parental study

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Interviews with 4 parents to 3 girls with functional neurological symptoms:

This was helpful:

- BUP gave support
- Treatment by the physiotherapist

Could be better:

- Information about the condition
- Cooperation with the neurological ward
- Difficulties with some members of the team
- Not so happy about prompt start on medication

# Summary

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- Start work up and treatment as early as possible
- Work together with the neurologist
- Check for- and treat; Depression? Anxiety? Trauma? Other stressors? Sleep disturbance?
- Consider using DSM-5/ ICD-10 Conversion disorder/ Functional neurological symptom disorder and secondary diagnoses
- Psycho education about the symptoms and the good prognosis
- Unburden the child and family the guilt of the symptoms
- Psychological and psychiatric support as part of the rehabilitation
- Contact with a physiotherapist?
- Focus on helping the patient to do what she finds important in life
- Re-evaluate

# Interested in more?

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- [www.funktionellasymptom.se](http://www.funktionellasymptom.se)  
Dr Mazya, Keselman –  
translated/adjusted from Dr Stone [www.neurosymptoms.org](http://www.neurosymptoms.org)
- Kasia Koslowska

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# Appendix

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# 300.11 DSM-5 Conversion Disorder (Functional Neurological Symptom Disorder) (F44.X)

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- A. One or more symptoms of altered voluntary motor or sensory function
- B. Clinical findings provide evidence of incompatibility between the symptom and recognized neurological or medical conditions
- C. The symptom or deficit is not better explained by another medical or mental disorder
- D. The symptom or deficit causes clinically significant distress or impairment in social, occupational, or other important areas of functioning or warrants medical evaluation

# 300.11 DSM-5 Conversion Disorder (Functional Neurological Symptom Disorder)

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*Specify* symptom type:

(F 44.4) With weakness or paralysis

(F 44.4) With abnormal movement (e.g., tremor, dystonic movement, myoclonus, gait disorder)

(F 44.4) With swallowing symptoms

(F44.4) With speech symptoms

(F44.5) With attacks or seizures

(F44.6) With anesthesia or sensory loss

(F 44.6) With special sensory symptoms( e.g., visual, olfactory, or hearing disturbance)

(F44.7) With mixed symptoms

# 300.11 DSM-5 Conversion Disorder (Functional Neurological Symptom Disorder)

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*Specify if*

Acute episode: Symptoms present for less than 6 months.

Persistent: Symptoms occurring for 6 months or more.

*Specify if:*

With psychological stressor (*specify stressor*)

Without psychological stressor