

Understanding and helping your teen cope with medically unexplained symptoms

What are medically unexplained symptoms?

Your son or daughter may have pain or other symptoms that have no known cause. The doctor has not found any illness or medical reason for the symptoms, so they are called “medically unexplained”.

Here are some unexplained symptoms that are common in teens:

- headaches
- stomach upset or pain
- pain in the chest, back or legs
- feeling tired, dizzy or weak
- spells that look like seizures

Medically unexplained symptoms can also be called:

- **MUS**
- **somatic symptoms**
- **functional symptoms**
- **conversion disorder**

Your teen may have one or more of these symptoms. Although the cause isn't known, **the symptoms are real** and can be very distressing. It is important to understand that your teen is not imagining or “making up” these symptoms.

Should the doctor keep looking for the cause of these symptoms?

Not usually. In most cases more tests won't uncover anything new. They may, however, cause more anxiety and stress. Unnecessary tests can give your teen the wrong message: "There's something very wrong with me, or they wouldn't keep doing all these tests!"

What is known about MUS?

Medical research is underway to help us better understand medical unexplained symptoms (MUS). It may be that the brain interprets signals from nerves in the body as pain or other warning signs, when nothing damaging is going on. Some people are more sensitive or aware of these "false signals" than others. It is also possible that emotional stress contributes to developing symptoms.

Does this mean my teen has too much stress?

Not necessarily. All people (including teens) have some worry and stress. This is a normal part of growing up, a reaction to:

- changes in their bodies
- changes in their peer group
- more responsibility at school and at home

How they respond to stress varies. When worried or stressed, teens may:

- have a racing heart, flushed cheeks or sweaty palms
- have stomach aches, headaches, chest pain or dizziness
- not show any signs of distress at all

Teens with MUS respond to stress in different ways too. Many don't appear stressed at all. Because the link between MUS and stress isn't always clear, it is important for the doctor to ask about your teen's emotional health and well-being. This is part of a complete health assessment.

How will MUS affect my teen?

Many teens with MUS live normally. They continue to see friends, go to school and remain active.

But for some teens, the symptoms can have a serious affect on their well-being.

They may spend less time with friends, stop going to school or taking part in activities they once enjoyed.

When a teen stops his or her usual activities because of symptoms, other problems can develop such as depression, anxiety, difficulty sleeping and poor fitness.

In turn, these problems can make symptoms worse. This becomes a vicious cycle.

Will my teen always have these symptoms?

No, most teens recover from MUS in a few weeks or months. In some unusual situations, the symptoms can last for a few years.

Symptoms usually come and go, often returning at times of change such as the start of the school year or a change in the family routine. Symptoms can return even when the change is eagerly anticipated, such as a summer camp or sports competition. Sometimes happy changes cause more stress than sad ones!

What about our feelings?

Despite getting medical help for your teen, he or she still has a problem and the cause and treatment are not always clear. This can make parents feel frustrated or helpless.

Some parents feel angry and worried that their teen is making up or exaggerating symptoms to get attention or to get out of responsibilities. It is important to recognize that the symptoms are REAL and your teen is not making them up.

It may be hard to believe that no more tests will be done. You may want to seek a second opinion from another doctor. It is important to find a doctor that you and your teen trust.

However, if you get the same advice, it is important to move on and start to work on recovery. Continuing to look for a specific cause of the symptoms can delay your teen's recovery.

How can I help my teen cope with MUS?

Your teen will likely recover fully in a few weeks or months. During this time, we will work together to help your teen manage symptoms, function as well as possible, and prevent further problems.

Offer support and information

- Your teen needs to know that you believe his or her symptoms are real. He or she can also benefit from your reassurance that nothing bad is expected to happen.
- Help your teen understand how emotions can affect the body. Start with simple examples such as tears at a sad movie, blushing when embarrassed or trembling when giving a speech.

Then explore more subtle effects of emotional stress such as headaches, stomach aches or sleep problems.

Get back to daily routines

- A regular schedule of healthy eating, sleeping and exercise is extremely important. If your teen isn't eating or sleeping as usual, this needs attention right away.
- The goal is for your teen to get back to a normal daily routine, including going to school every day, keeping up with activities and continuing to see friends.
- Work with your teen to gradually make this happen. This may take some time and negotiation. As much as possible, don't let the symptoms interfere with your teen's daily routine.
- When your teen has symptoms, distractions can help. Try involving your teen in activities such as playing a board game, watching a movie or spending time together as a family.
- It will be hard for your teen to carry on with their day despite the symptoms, so give your teen encouragement and praise on days that the symptoms have not interfered with daily activities.

Talk to your teen

- Don't ignore or deny symptoms by saying "nothing is wrong" when your teen is obviously in distress. When your teen talks about symptoms, listen with sympathy and then, continue on with the daily routines. Try not to let your teen or family focus on the symptoms.

Next steps

- If these suggestions don't help your teen recover, you may want to visit the doctor again. He or she can reassess the symptoms to make sure MUS is still the most likely diagnosis. The doctor will also check for other health concerns, such as depression and anxiety.
 - Your doctor may refer your teen to other health professionals such as a physiotherapist, a social worker or a psychologist.
 - Counselling can help coach your teen to slowly return to normal daily activities and help him or her to better understand and cope with symptoms.
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Notes



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