

## IS IT ALL IN MY HEAD??



Recognition & Effective  
Management of Somatization

## SOMATIZATION

- Mechanism by which anxiety is translated into physical illness or bodily complaints

## SOMATIZATION

- Physical symptoms are not fully explained by any known organic pathology or physical disorder

## SOMATIZATION

- Symptoms are in excess of what would be expected by history, physical exam or laboratory findings
- Symptoms linked to psychological factors or conflict

## SOMATIZATION

- Chronic syndrome of multiple somatic symptoms that cannot be explained medically
- Associated with psychosocial distress and long-term seeking of assistance from healthcare professionals.

## COMMON RECURRING SOMATIC COMPLAINTS

- Multiple pain symptoms, multiple sites
- Gastrointestinal symptoms
- Neurologic symptoms
- Fatigue
- Sexual Dysfunction

## Somatoform Disorders

- Personality characteristics
  - Heightened emotionality
  - Strong dependency needs
  - A preoccupation with symptoms and oneself

## Somatoform Disorders

Disorder is chronic

Anxiety, depression, & suicidal ideations are frequent

Drug abuse & dependence common

## Etiological Theories

- **Genetic:** Hereditary factors
- **Biochemical:** Decreased levels of serotonin and endorphins

## Etiological Theories

- **PSYCHODYNAMICS:**  
Physical complaints become the expression of low self-esteem, because it is easier to feel something is wrong with the body than to feel something is wrong with the self.

## Etiological Theories

- **PSYCHODYNAMICS:**  
Emotions associated with a traumatic event that are too unacceptable to express may be acceptably "converted" into physical symptoms.

## Etiological Theories

- **LEARNED BEHAVIOR:**  
Past Experience  
Primary Gain  
Secondary Gain  
Tertiary Gain

## Outcomes

- **The client:**
  - Copes effectively without resorting to physical symptoms
  - Verbalizes relief from pain
  - Has decreased frequency of physical complaints & interprets bodily sensations rationally
  - Is free of physical disability
  - Verbalizes realistic perception of appearance & expresses positive body image

## Planning and Implementation

- Care of the individual with a somatoform disorder is aimed at relief of discomfort from the physical symptoms.
- Assistance is provided to the client in an effort to determine strategies for coping with stress by means other than preoccupation with physical symptoms.

## Planning and Implementation

- Interdisciplinary communication & collaboration is essential

## INTERVENTIONS

- Monitor ongoing assessments, labs, & other data to maintain assurance that possibility of organic pathology is clearly ruled out
- Refer all new physical complaints to physician

## INTERVENTIONS

- Accept that physical complaint is real to the client
- Identify what the physical symptoms are providing the client
- Gradually withdraw attention to physical symptoms

## INTERVENTIONS

- Encourage verbalization of fears & anxieties
- Discuss alternative coping strategies
- Help identify ways to achieve support & recognition from others

## INTERVENTIONS

- Provide nursing comfort measures
- Offer support & attention at times when pt not focusing on somatic complaints
- Identify activities that serve as a distraction from pain

## INTERVENTIONS

- Promote independence in self-care activities
- Teach appropriate stress management techniques & provide education about resources and lifestyle changes

## INTERVENTIONS

- Family support and education
- Case management to manage services
- Examine personal attitudes & how they affect patient care

## Specialized Treatment Modalities

- Individual psychotherapy
- Group psychotherapy
- Behavior therapy
- Psychopharmacology