

Functional Disorders and Symptoms

What's Going On?

Functional symptoms are sometimes known as “medically unexplained” symptoms but we are increasingly able to explain them. They are now understood to be caused by subtle alterations in physiological function (the way the cells and organs of the body work and communicate) and in the brain’s processing of incoming physiological signals. Changes may include hyperawareness (e.g. of minor variations in balance or heartbeat, or of or normal functions of other areas of the body such as digestion which are usually not consciously felt) or distorted or reduced awareness of sensations in a part of the body e.g. parts of the skin or certain muscles. Altered hormone and nerve signals to parts of the body can also occur e.g. to the muscles in fibromyalgia, to the bowels in irritable bowel syndrome.

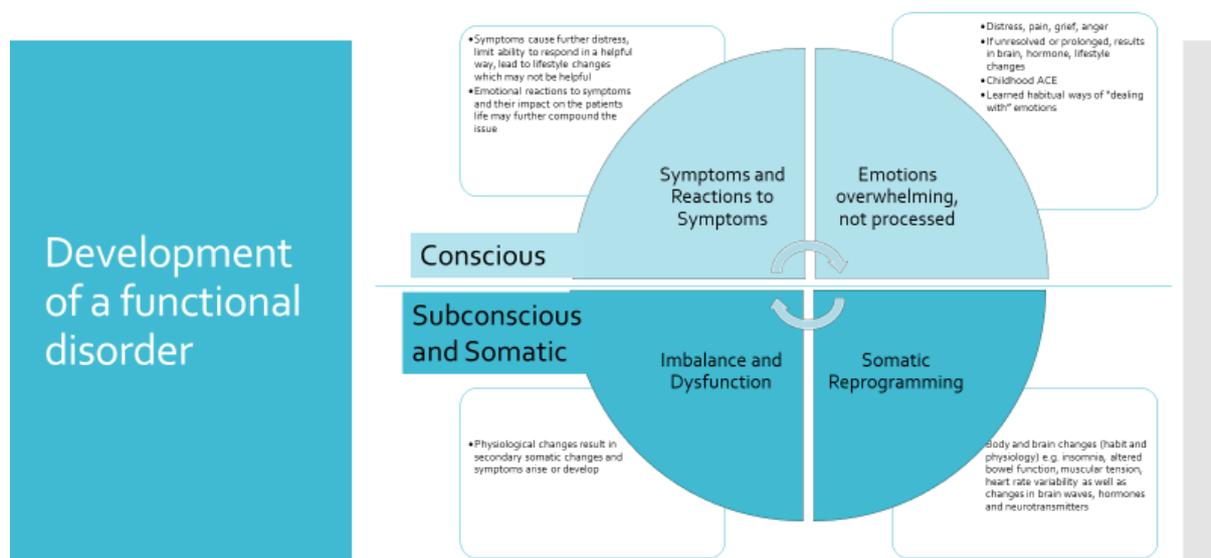
Sometimes there is an inability to switch off physiological responses (e.g. failure of muscular tension to resolve after tensing in response to stress or failure of the pain “gate” to close after a useful signal has passed through). There are often changes in the balance between the two parts of the regulatory (autonomic) nervous systems: the sympathetic nervous system which coordinates stress-induced “fight or flight” type responses which are helpful in responding to real threats (but less helpful if it occurs when there is no threat); and the parasympathetic nervous system, which coordinates “rest and restore” responses which are vital to recovery and maintenance of the body and brain. An imbalance between these systems results in a number of significant changes in the brain and body. Sometimes vicious circles e.g.

- Anxiety-related somatic symptoms as a minor variation → sensed as abnormal → alarm → more anxiety and associated physiological reaction → sensed as dangerous → full-blown panic attack or increasingly severe physical symptoms
- Muscular tension-related pain met with fear, frustration or anger/resentment, augmenting the experience of pain due to focusing on the pain, and worsening muscular tension, in turn worsening the physical pain. Often strong emotions in relation to pain (feeling it is unbearable) elicit avoidance or carrying on regardless and thereby impede helpful coping mechanisms such as adapting activities but remaining active.

There is strong evidence that adverse life events predispose to functional symptoms, especially if experienced early. This may well be through re-setting physiological mechanisms.

Psychosomatic Mechanisms

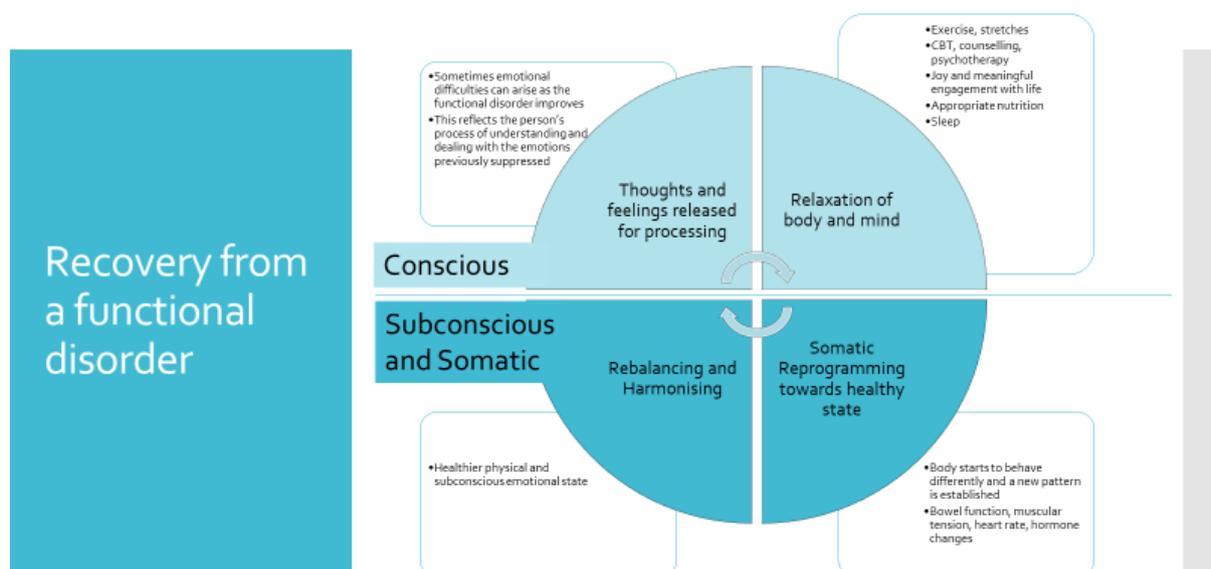
The following diagram may be useful in understanding the psychosomatic origins of functional disorder.



This shows how a physical or emotional shock, trauma or more chronic stress (demands upon the person which can't easily be accommodated) result in physiological and brain changes which become habitual and result in a vicious cycle which produces further symptoms and distress which result in maintenance of the problem.

Recovery from functional symptoms and disorders

The process of recovering from functional disorders can be depicted and understood in a similar way.



It therefore follows that the following modalities may be helpful in the process of recovery from MUS and functional disorders:

- Counselling
- CBT and psychotherapy
- Anthroposophic therapies such as therapeutic art/speech/eurythmy
- Relaxation and meditation techniques
- Contemplation and gratitude exercises
- Finding positive and meaningful activities to bring positive interhuman connections and positive emotions.

Specific functional Syndromes and Symptoms

- Chronic Fatigue Syndrome
 - Overview article with useful links to other organisations <https://www.nrshealthcare.co.uk/articles/condition/chronic-fatigue-syndrome>
 - Persistent Burnout Theory of Chronic Fatigue Syndrome <http://dx.doi.org/10.4236/nm.2016.72008>
 - Useful guide to ME symptoms and management <http://www.remembercfs.org.uk/about-mecfs/>
 - A brief guide is also available on the [Action for ME website](https://www.actionforme.org.uk/uploads/supporting-outcomes-HCP-briefing-2018.pdf) at <https://www.actionforme.org.uk/uploads/supporting-outcomes-HCP-briefing-2018.pdf>
 - Understanding the HPA axis, stress and burnout <https://www.mind-body-health.net/hpa-axis.shtml>
- Fibromyalgia
 - Fibromyalgia UK charity <http://www.fmauk.org/>
 - Fibromyalgia patient information leaflet by Versus Arthritis <https://www.versusarthritis.org/about-arthritis/conditions/fibromyalgia/>
- Functional gastroenterology symptoms
 - <https://www.iffgd.org/manage-your-health/symptoms-causes.html>
- Functional respiratory symptoms/breathing pattern disorders
 - <http://www.uhs.nhs.uk/Media/Controlleddocuments/Patientinformation/Respiratory/Breathing-pattern-disorders-patient-information.pdf>
- Functional Neurological Symptoms (many types)
 - Neurosymptoms website <http://neurosymptoms.org/>
 - FND hope charity <https://fndhope.org.uk/>
 - FND Action charity <https://www.fndaction.org.uk/>
- Irritable bowel syndrome and other functional gut symptoms
 - <https://gutscharity.org.uk/advice-and-information/conditions/irritable-bowel-syndrome/>
- Migraine
 - Factsheets <https://www.nationalmigrainecentre.org.uk/migraine-and-headaches/migraine-and-headache-factsheets/>
- Non-cardiac chest pain
 - <https://gi.org/topics/non-cardiac-chest-pain/>
- Non epileptic attack disorder
 - Website <http://www.nonepilepticattackdisorder.org.uk/>