Recurrent Abdominal Pain

SANDHIA NAIK

PAEDIATRIC GASTROENTEROLOGIST

Definition

- 1958 Apley – 3 episodes over 3 months affecting daily activities

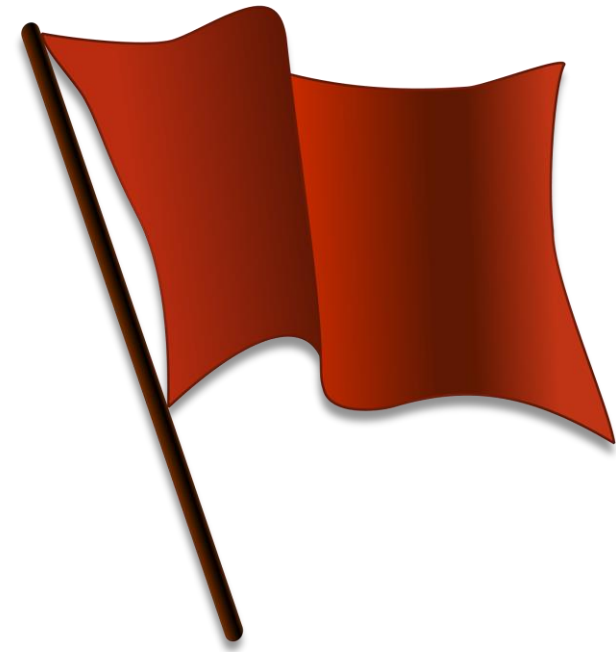- Based on schoolchildren not hospital presentation

- Non Organic

Exclude Organic Causes

Detailed History and Examination

- Age at onset
- Location of Pain
- Dietary History
- Social History
- Detailed bowel history
- Family History

Red Flags

- Age< 4
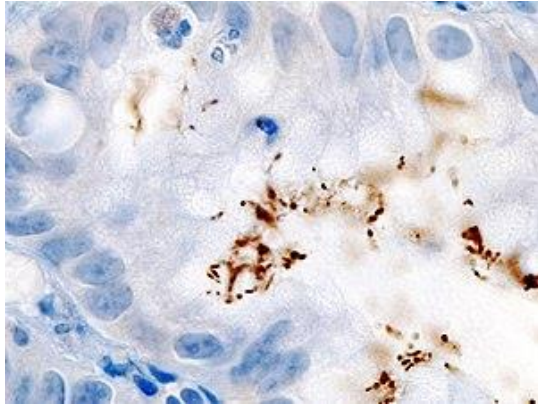- Not periumbilical
- Weight loss
- Fever
- Arthralgia
- Growth issues/Delayed Puberty
- Rashes
- Change Bowel habit +/-blood
- Vomiting
- Nocturnal Pain
- Urinary Symptoms
- Positive Family History-IBD/Coeliac/Peptic Ulcer

What Organic causes need excluding?

THERE WILL FOLLOW A SERIES OF 8 PICTURES TO GUESS AND THEN I WILL PROVIDE THE   ANSWERS
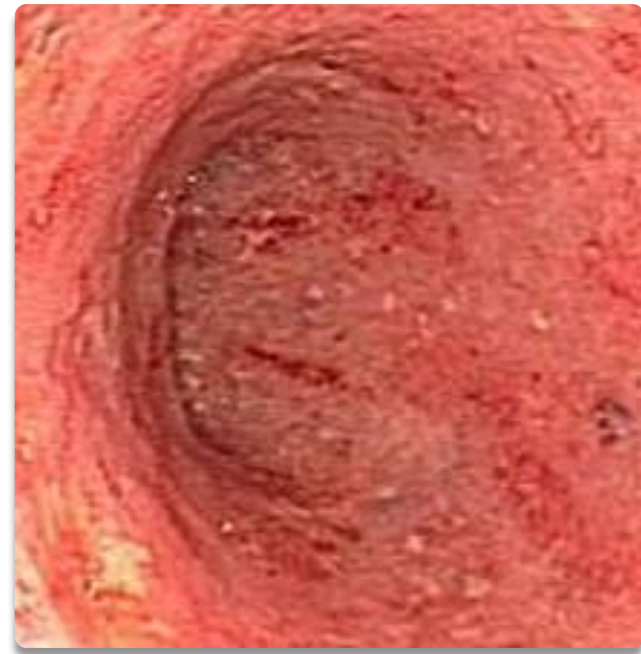
One

Two

Three

ENDOSCOPY

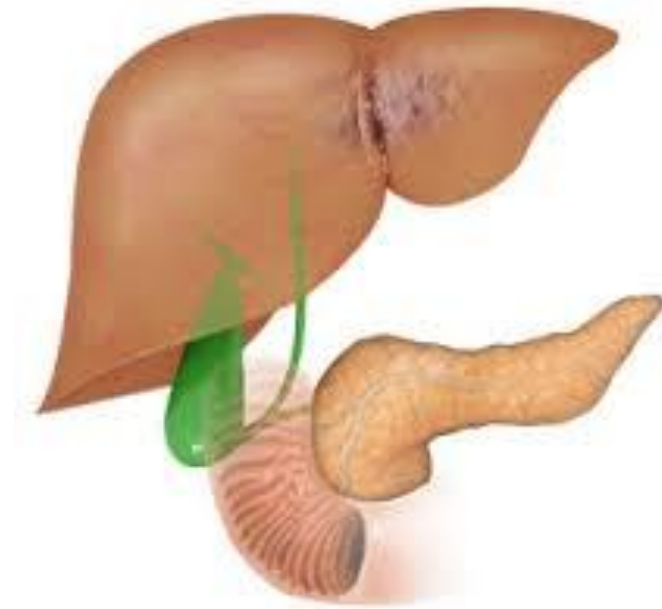Histology
Left Normal
Right Abnormal

Four

Five

Six

G.E.T.S.M.A.S.H.E.D

Seven

Eight

Answers

- Pic 1 H Pylori
- Pic 2 GOR
- Pic 3 Coeliac
- Pic 4 UTI
- Pic 5 IBD
- Pic 6 Pancreatitis
- Pic 7 Hepatobiliary Disorders
- Pic 8 Menstrual Issues

Investigations

- COULD BE NONE
- Pending Hx and examination Consider
- Baseline Bloods-FBC/U and E/LFT/Bone
- Coeliac Screen and total IgA
- CRP/ESR
- Stool for Hpylori ag
- Urine Dip

Further Classification

- ROME IV Criteria
- Functional GI Disorders
- Useful for research
- Useful in secondary and tertiary care
- Useful for those desperate for an alternative ' diagnosis' /'label'

Management

- REASSURANCE
- Explore Psychosocial
- Hot water bottle
- Paracetamol
- Avoid NSAIDS or stronger
- Distraction Techniques
- Mindfulness
- Hypnotherapy
- Avoid referrals unless clear red flags

Conclusion

- RAP is common – 1-2 in every 10 children
- Minimal Investigations
- Avoid overmedication
- Reassure and invest time
- Sign post if anxiety/stresses
- If addressed early can reduce chronic pain as adult