

Priority Topic: SOMATIZATION

Key Features:

For a single source on this topic: [Somatic Symptom Disorder AAFP 2016](#)

1. In patients with recurrent physical symptoms, **diagnose somatization only after an adequate work-up** to rule out any **medical or psychiatric condition** (e.g., depression).

What you should study: workup will depend on presenting symptoms, but you should know how to diagnose somatization by DSM 5 criteria and differentiate it from other similarly presenting disorders.

✓ [Somatic Symptom Disorder AAFP 2016](#) ****THIS is an EXCELLENT summary**

If you want the DSM Criteria for Somatic Disorders: (available via McGill Library)

- ✓ [Conversion Disorder DSM 5](#)
- ✓ [Somatic Symptom Disorder DSM 5](#)
- ✓ [Illness Anxiety Disorder DSM 5](#)
- ✓ [Factitious Disorder DSM 5](#)
- ✓ [Other Somatic Disorders DSM 5](#)
- ✓ [Psychological Factors affecting other diagnoses DSM 5](#)

2. [Do not assume](#) that somatization is the cause of new or ongoing symptoms in patients [previously diagnosed as somatizers](#). Periodically reassess the need to extend/repeat the work-up in these patients.

What you should study:

- ✓ [Somatic Symptom Disorder AAFP 2016 Table 4: CAREMD - Assessment for other medical and psychiatric diagnoses applies to patients previously diagnosed with Somatic Symptom Disorder.](#)

3. [Acknowledge the illness experience](#) of patients who somatize, and strive to [find common ground](#) with them concerning their diagnosis and management, including investigations. This is usually a long-term project, and should be planned as such.

What you should study:

- ✓ [Somatic Symptom Disorder AAFP 2016 Table 4: CAREMD](#)

4. In patients who somatize, [inquire about the use of and suggest therapies](#) that may provide symptomatic relief, and/or help them cope with their symptoms (e.g., with biofeedback, acupuncture, or naturopathy).

What you should study:

- ✓ [Non-traditional approaches to enhance mental health care APA Blog](#)