

Let's Talk About...

FAPD in Children

What is FAPD and what causes it?

FAPD stands for **functional** [funk-shun-uhl] **abdominal** [ab-DAH-min-ahl] **pain disorder**. FAPD is a chronic (long-term) belly pain in an otherwise-healthy child. "Functional" means that there is no blockage, inflammation, allergy, or infection causing the stomachaches. The pain can occur alone or come with other symptoms such as nausea, diarrhea, or constipation.

FAPD is caused by increased activity between the nerves in the digestive [die-JEST-iv] tract and brain. This activity can cause spasms in the muscles of the digestive system. It can also cause the pain nerves in the digestive system to become active during normal digestive activities. The brain might interpret normal signals from the digestive system as pain.

Some children with other chronic medical conditions can also develop FAPD.

What are the symptoms of FAPD

The pain is often (but not always) focused around the belly button. It may get worse with eating. Your child may look pale or red in the face during a pain episode, or not want to eat. The pain may even be bad enough to make them "double over." It may make your child avoid school or activities they enjoy.

Symptoms of FAPD can appear without a clear cause. They can also show up after an infection, a stressful life event, or after a surgery or injury. Anxiety, depression, added stress, or even worrying about the pain can make symptoms worse.



How is FAPD diagnosed?

To diagnose FAPD, your child's doctor will ask questions about the history of the pain and perform a physical exam. The doctor may consider a diagnosis of FAPD if:

- The pain has been going on for a while (2 months or more), but the child appears healthy and is growing well.
- There are no "red flag" symptoms such as fever, difficulty swallowing, uncontrolled weight loss, blood in their vomit or poop, or pain when peeing.

Testing is not necessary to make a diagnosis of FAPD. Testing is only recommended if another medical condition is suspected.

How common is FAPD?

FAPD is very common. A study of children attending elementary school found that:

- Four out of 10 children complain of abdominal pain weekly
- Nine out of 10 children report abdominal pain at least once in a 6-month period
- Two out of 10 children miss school due to abdominal pain
- One out of 10 parents have to miss work to care for a child with chronic abdominal pain

How is FAPD treated?

There is no specific treatment for FAPD that is helpful for all children. Treatment typically is done by your child's primary care provider, but sometimes with the help of a GI specialist or pediatric behavioral health specialist. The best treatment plan will be based on your child's specific symptoms. Changing your child's lifestyle habits and reducing the focus on the pain are often very effective ways for decreasing symptoms.

Treating your child's symptoms

There are several ways to treat your child's symptoms, including:

- **Lifestyle changes**, such as better sleep, less screen time, exercise, and getting plenty of fluids. Heating packs may also help during an episode.
- **Diet changes, herbal therapies, or use of probiotics.** Limit potential trigger foods such as junk food, caffeine, or sugary drinks. Your child's doctor may refer you to a dietitian to help find the best nutrition plan for your child.
- **Cognitive behavioral therapy**, such as relaxation training, biofeedback (mind-body therapy), hypnotherapy, and setting goals to improve daily behavior and activities (school attendance, participating in social activities). Addressing anxiety and depression with a behavioral health provider may be an important part of the treatment plan.
- **Medications to:**
 - Relax the muscles in the bowel
 - Reduce acid production in the stomach
 - Manage bowel habits (stool softeners or laxatives)
 - Reduce anxiety or depression (Some of these medications help reduce pain.)

What can I expect for my child in the long term?

FAPD is not a life-threatening condition. However, symptoms can be troubling and cause many problems in day-to-day life. Symptoms come and go, and may last for months or even years.

Most children can start to do regular activities before they feel completely better. Pain may not improve right away. A decrease in pain intensity or frequency should be seen as a positive sign. The main goal for treatment of FAPD is to help your child get back to their regular routine, including regular attendance at school, doing chores and homework, and getting back to doing the things they enjoy in life.

Where can I learn more?

Check out the links below for more information on FAPD.

- [American College of Gastroenterology](#)
- [American Academy of Pediatrics](#)
- [GI Kids](#)
- [UpToDate](#)

Notes

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