

## Original article

# The visible and less visible in the suffering of a conversion disorder in children and adolescents. A qualitative study of illness explanatory models presented to caregivers of children and adolescents with conversion disorder<sup>☆</sup>



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### ARTICLE INFO

#### Article history:

Received 2 October 2016

Accepted 20 February 2017

Available online 20 July 2018

#### Keywords:

Conversion disorder

Child psychiatry

Patient-centred care

Qualitative research

### ABSTRACT

**Background:** Conversion disorder is a challenge for clinicians due to the conceptual gaps as regards its pathogenesis, the way in which it converges with other psychiatric disorders, and the lack of approaches to the experiences of both patients and family members with the disease.

**Objective:** To describe Explanatory Models (EM) offered to caregivers of paediatric patients with conversion disorder who attended the *Hospital de la Misericordia*.

**Methods:** A qualitative study was conducted with a convenience sample of 10 patients who attended the *Hospital de La Misericordia, ¿Bogotá?* between May 2014 and April 2015. The tool used was an in-depth interview applied to parents and/or caregivers.

**Results:** Caregivers have different beliefs about the origin of the symptoms, especially considering sickness, magical–mystical factors, and psychosocial factors. The symptoms are explained in each case in various ways and there is no direct relationship between these beliefs, the pattern of symptoms, and help-seeking behaviours. Symptomatic presentation is polymorphous and mainly interferes in the patient's school activities. The medical care is perceived as relevant, and psychiatric care as insufficient. Among the therapeutic routes, consultations with various agents are described, including medical care, alternative medicine, and magical–religious approaches.

DOI of original article: <https://doi.org/10.1016/j.rcp.2017.02.003>.

<sup>☆</sup> Please cite this article as: Garcia Mantilla JS, Vasquez Rojas RA. Lo visible y lo menos visible en el padecimiento de un trastorno conversivo en niños y adolescentes. Un estudio cualitativo sobre los modelos explicativos de la enfermedad que ofrecen los cuidadores de niños y adolescentes con trastorno conversivo. *Rev Colomb Psiquiat.* 2018;47:155–164.

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<https://doi.org/10.1016/j.rcpeng.2018.06.002>

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*Conclusions:* EMs in conversion disorder are varied, but often include magical-religious elements and psychosocial factors. The underlying beliefs are not directly related to help-seeking behaviours or other variables.

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## Lo visible y lo menos visible en el padecimiento de un trastorno conversivo en niños y adolescentes. Un estudio cualitativo sobre los modelos explicativos de la enfermedad que ofrecen los cuidadores de niños y adolescentes con trastorno conversivo

### R E S U M E N

#### Palabras clave:

Trastornos de conversión  
Psiquiatría infantil  
Atención dirigida al paciente  
Investigación cualitativa

*Antecedentes:* El trastorno conversivo es un reto para los clínicos por los vacíos conceptuales en lo que respecta a la patogenia y cómo confluyen otras entidades psiquiátricas y la falta de aproximaciones a las vivencias tanto de pacientes como de familiares con la enfermedad.

*Objetivo:* Describir los modelos explicativos (ME) que utilizan los cuidadores de niños y adolescentes con trastorno conversivo que consultan al Hospital Pediátrico de La Misericordia. *Métodos:* Se realizó un estudio cualitativo con una muestra por conveniencia de 10 casos atendidos entre mayo de 2014 y abril de 2015. La herramienta usada fue una entrevista en profundidad con padres y/o cuidadores.

*Resultados:* Los cuidadores tienen diversas creencias en torno al origen de los síntomas, y consideran principalmente enfermedad, factores mágico místicos y factores psicosociales. Se explican los síntomas en cada caso de varias maneras, y no se encontró una relación directa entre estas creencias, el patrón de síntomas y los comportamientos de búsqueda de ayuda. La presentación sintomática es polimorfa y genera interferencia principalmente en la actividad escolar de los pacientes. La atención médica se percibe como pertinente y la atención psiquiátrica, como insuficiente. Entre los itinerarios terapéuticos, se describen consultas con diversos agentes, además de la atención médica, incluidas medicinas alternativas y enfoques mágico-religiosos.

*Conclusiones:* Los ME en trastorno conversivo son variados, pero incluyen con frecuencia elementos mágico-religiosos y factores psicosociales. Las creencias subyacentes no se relacionan directamente con la búsqueda de ayuda u otras variables.

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## Introduction

Somatic symptom disorders are characterised by physical signs or symptoms which suggest a “medical” disease, but when investigated, no condition can be found to fully explain them.<sup>1</sup> When the symptoms are suggestive of a neurological condition, they are referred to as conversion disorders.<sup>2</sup> Even though this type of disorder has a long trajectory in the history of humanity, it can be extremely challenging in medical practice, partly due to conceptual gaps, particularly in the pathogenesis or psychopathology, and also because of the lack of concrete answers doctors are able to provide and the suffering it causes to patients and their families.

There have been a number of different explanations for this group of disorders over the course of history, depending on the theory with the highest degree of consensus at the time.<sup>3</sup> However, in these endeavours there has been little consideration of how the sufferer and those around them experience the disease, and this creates barriers for healthcare workers,

limiting their understanding of and response to the particular problems of those affected.<sup>4</sup> The experience of illness and suffering transcends the mere individual experience of one symptom or another and becomes an experience that shakes up different aspects of the subject’s life, beyond their body and even their individuality, and affects all those around them. Suffering then moves to an interpersonal, relational level, heavily mediated by cultural representations of health and disease. Within the initiatives emerging to better understand this subject area, we find ourselves in the social sciences, and specifically in the concept known as explanatory models (EM) developed by Kleinman,<sup>5</sup> which refers to:

“... the notions about an episode of sickness and its treatment that are employed by all those engaged in the clinical process”.

Patients, relatives and/or caregivers explain health problems in different ways: this includes explanations about the origin of symptoms, their causes and how they progress. It is also closely related to help-seeking behaviours and

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