

Mental Health Center

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Somatoform Disorders

Somatoform disorders are mental illnesses that cause bodily symptoms, including [pain](#). The symptoms can't be traced back to any physical cause. And they are not the result of substance abuse or another [mental illness](#).

People with somatoform disorders are not faking their symptoms. The pain and other problems they experience are real. The symptoms can significantly affect daily functioning.

Doctors need to perform many tests to rule out other possible causes before they diagnose a somatoform disorder.

A diagnosis of a somatoform disorder can create a lot of [stress](#) and frustration for patients. They may feel unsatisfied that there's no known explanation for their symptoms. Stress often leads patients to become more worried about their health. This creates a vicious cycle that can persist for years.

Types and Symptoms of Somatoform Disorders

Symptoms and their severity vary depending on the type of somatoform disorder. There are several types of somatoform disorders:

Somatization disorder. This is also known as Briquet's syndrome. Patients with this type have a long history of medical problems that starts before the age of 30.

The symptoms involve several different organs and body systems. The patient may report a combination of:

- pain
- neurologic problems
- gastrointestinal complaints
- sexual symptoms

Many people who have somatization disorder will also have an anxiety disorder.

Undifferentiated somatoform disorder. This is a less specific version of

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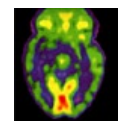
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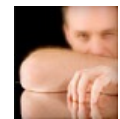
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somatization disorder. A diagnosis requires that a person have one or more physical complaints of unexplained symptoms for at least six months.

Hypochondriasis. People with this type are preoccupied with concern they have a serious disease. They may believe that minor complaints are signs of very serious medical problems. For example, they may believe that a common headache is a sign of a [brain tumor](#).

Body dysmorphic disorder. People with this disorder are obsessed with -- or may exaggerate -- a physical flaw. Patients may also imagine a flaw they don't have.

The worry over this trait or flaw is typically constant. It may involve any part of the body. Patients can be obsessed with things such as wrinkles, hair, or the size or shape of the eyes, nose, or breasts.

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