

# Abdominal pain in children (Non-acute)

## What is it?

Abdominal pain is a common symptom and can be caused by a wide range of surgical and non-surgical conditions. An underlying cause will be found only in a small proportion of children, and a significant number of children will be diagnosed to have non-specific abdominal pain.

### A. Common causes:

#### 1. Constipation

- › Crampy abdominal pain, often relieved by opening bowels
- › Faecal mass or palpable bowel loop with soft stool
- › History of reduced stool frequency, hard stools, soiling and straining

#### 2. Non-specific abdominal pain / Functional abdominal pain

- › 3 or more episodes of abdominal pain
- › Symptoms of more than 3 months duration
- › Child older than 3 years of age
- › Symptoms affecting daily activities like schooling and play
- › Child is active and thriving

### B. Less common causes

- › Coeliac disease
- › Food intolerance (Lactose intolerance)
- › Irritable bowel syndrome (usually above 10 years of age)
- › Gastro-oesophageal reflux disease
- › Gynaecological causes: pelvic inflammatory disease, endometriosis, polycystic ovaries, simple ovarian cyst
- › Helicobacter pylori related or NSAID induced gastritis
- › Psychological: school phobia or bullying
- › Child abuse

## What should I do?

Parents are often worried that there may be a sinister underlying cause and should be reassured that this is extremely unlikely in the absence of additional worrying symptoms.

- History and examination to establish cause
- Reassurance and education about functional abdominal pain
- Management of constipation (see page 16)
- Investigations (only if indicated by history and examination):
  - › Coeliac screen, FBC, CRP, LFT, Amylase
  - › Stool sample for H. Pylori (fresh sample)
  - › Ultrasound abdomen
- Consider psychology input, in discussion with child and carers.

## When should I refer?

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| • Recent weight loss or faltering growth | • Haematemesis                                 |
| • Fresh blood in stools/melaena          | • Jaundice                                     |
| • Persistent diarrhoea                   | • Unexplained fever                            |
| • Vomiting                               | • Family history of inflammatory bowel disease |
| • Pain waking child from sleep           | • Significant school absences                  |