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A 17- year-old boy was referred to us in November 1995, because of recurrent fever episodes and intense preexisting low back pain. Despite his three hospitalizations and the thorough diagnostic evaluation he had (CT, MRI), findings were poor and the only diagnosis was a mild inflammation of the prostate which was successfully treated with the appropriate antibiotic. This diagnostic finding could not in any way explain the existence of the pain – symptom with a ten month history that limited the patient’s activities and kept him from school. The absence of physical and laboratory evidence in association with the characteristic style of reporting this ever-present symptom, lead to the boy’s referral in order to investigate the possible etiology. According to the DSM-IV criterion the diagnosis of “*psychogenic pain disorder*” was supported by positive criteria. We discuss the incidence, the diagnostic process and the management of the disorder which is of great interest for the physician as he is the one conducting the initial evaluation that has a marked influence of the success of future treatment. The disorder seems to have great importance when appearing during adolescence, a period of rapid psychological, cognitive and moral growth.