

Advice Note: Chronic abdominal pain

Dear GP,

Thank you for referring this patient with abdominal pain.

Chronic and recurrent abdominal pains are common symptoms in children and adolescents occurring in up to 20% of all children. Most patients with no red flags on history or examination and normal investigations are likely to have a functional disorder, such as functional dyspepsia, functional abdominal pain or irritable bowel syndrome. Functional constipation is also a very common cause of chronic abdominal pain.

Signs and symptoms that might suggest an organic disorder include:

- Upper GI:
 - o Persistent vomiting
 - o Dysphagia / food impaction
- Lower GI:
 - o Chronic diarrhoea
 - o Blood in the bowel motion
 - o Night wakening due to the pain
 - o Night wakening to evacuate bowels
 - o Significant abdominal tenderness
 - o Palpable mass (other than faecal mass)
- Urinary:
 - o Dysuria
 - o Gross haematuria
- Systemic (in association with abdominal pain)
 - o Recurrent unexplained fever
 - o Unexplained rash (erythema nodosum)
 - o Recurrent mouth ulcers
 - o Large joint pain or swelling
 - o Unintentional weight loss or slow growth
- Family history of Inflammatory Bowel disease or coeliac disease

Please consider these investigations to exclude an organic cause for chronic abdominal pain:

- Blood tests:
 - o FBC with differential
 - o CRP +/- ESR
 - o Coeliac screen
 - o Liver function tests with albumin
 - o +/- pregnancy test in adolescent females
- Stool tests
 - o Faecal PCR (replaced microscopy and culture)
 - o Faecal calprotectin if concerns about inflammatory bowel disease
 - o PLEASE NOTE, H.PYLORI ANTIGEN TESTING IS NOT HELPFUL AND SHOULD NOT BE REQUESTED IN THIS CONTEXT
- Urine clean catch sample
 - o Dipstick +/- microscopy and culture

If your patient is systemically unwell or you are particularly concerned about your patient's symptoms, then you may wish to **consider a referral for an acute assessment.**

Please do not hesitate to re-refer to Paediatric Clinic if the patient has the red flags on the history or examination or your investigations indicate a pathology.

Patients with IBS can be referred directly to a dietician. Otherwise the management focusses on education and reassurance.

Further information can be found on

<https://www.starship.org.nz/for-health-professionals/starship-clinical-guidelines/a/abdominal-pain-in-childhood/> .

Kind regards,
Hutt Paediatric Team