**Chronic Abdominal Pain**

**Ask About**

* Nature of pain
* Duration (more than 3 months)
* Diet
* Constipation
* Associated symptoms including fever and weight loss
* Stressors

Don’t forget to inspect the anus

**Remember Chronic Abdominal Pain is common 13% of normal children have abdominal pain**

**Are there red flags present?**

* Faltering growth or weight loss
* Haemetemesis or blood or mucus mixed in with stool
* Chronic severe diarrhoea or vomiting
* Change in bowel habit
* Unexplained fever more than 14 days
* Jaundice
* Urinary symptoms/ back /flank pain
* Pain that wakes child at night
* Family History of IBD
* Abnormal clinical examination: pubertal delay, anal fissure, organomegaly, extra intestinal manifestation
* Age less than 4 or more than 15

**YES**

**NO**

Consider:

* Blood tests – FBC, U+E, LFT, Amylase, CRP, Glucose, Coeliac Screen
* Stool Sample for OCP, MC+S, H.Pylori
* Urinalysis if urinary symptoms
* US Abdo for RUQ/ RLQ pain, jaundice, urinary symptoms, back / flank pain, FTT or abnormal examination
* Referral to paediatricians

Consider coeliac screen

**Functional Pain**

If tests normal consider treatment with:

* Peppermint oil
* Simple Analgesia
* Lactobacillus

Explore stressors

Reassure family

Positive = refer gastro

**Top tips**

* 13% of normal children have abdominal pain
* Consider the important role of stressors
* Remember constipation is painless

