

ABDOMINAL PAIN

Abdominal pain, or stomachache, is quite common in children and is a very non-specific complaint. It can be due to a wide variety of causes, most of which are benign. In some cases, however, abdominal pain may be due to a serious underlying condition.

In most cases, stomachache will subside without any specific treatment. It is very important to note some information about the complaint before requesting medical advice – this will make it easier for the doctor to find out the cause. Is the pain confined to one area or is it generalized? How many episodes have occurred and how long does each attack last? What brings on the pain and what relieves the attack? What is the relation of the attack to food intake and bowel movements and how is the child's appetite? Is there any fever, vomiting, diarrhea or burning sensation while urinating? How severe is the pain? Does it interfere with the child's usual activities? Has there been any recent stressful event in the child's life (for example, exams)? Has the child had any surgery or is he taking any medications? Any recent travel?

SOME CAUSE OF ABDOMINAL PAIN IN INFANCY AND CHILDHOOD

Gastro-enteritis
Pyloric stenosis
Intussusception
Malrotation
Hernia
Appendicitis
Torsion of the testis
Urinary tract infection
Urinary obstruction
Urinary stones
Constipation
Lactose intolerance
Pneumonia
Ulcer
Roundworm infestations
Medicines (like Ibuprofen, Erythromycin)

WHEN TO CALL YOUR DOCTOR

In many cases abdominal pain will resolve without any specific treatment. However, if the pain is sudden and severe, or causes the child to roll around in agony, causes the child to lift his knees up to his chest, or the child is listless and weak, you should take your child to the doctor immediately. You should also see the doctor if the child has abdominal pain with fever and vomiting. Comfort the child as much as you can and don't force him to eat or drink if he does not want to.

WHAT TO EXPECT AT THE DOCTOR'S OFFICE

Depending on the history and physical findings on examination, the doctor may order some tests of blood, urine, stool, an X-Ray of the chest and/or abdomen, or an ultrasound scan of the abdomen. Treatment will be directed at the cause of the pain. Pain relieving medicines are often not of much use and in some cases may make the pain worse.

It is important to understand that chronic abdominal pain is a different entity and the exact cause in children may be found out in only 5 to 8% of patients. However, with time and encouragement, most children will get better.