



# SEVERITY OF SOMATIC SYMPTOMS IN ADOLESCENCE: HOW DISTRESSING THEY ARE?

Anita Vulić-Prtorić, Department of Psychology, University of Zadar, CROATIA (avulicp@gmail.com)

Slavka Galić, Department of Neurology, Psychiatry and Clinical Psychology, General County Hospital Požega, CROATIA

Somatic symptoms are usually diffuse, nonspecific and ambiguous, and they are very prevalent in nonclinical populations (about 50% of all patient visits to physicians are due to these symptoms). Although very common, they can be very distressing, bring a lot of feelings of misunderstanding and result in significant disruption of everyday functioning.

**The aim** of the study was to determine the age- and gender-specific perceived burden of somatic symptoms, at symptom level and cluster level.

**Sample** consisted of 1512 participants (52.7% females) aged 10 to 25 years old. Respondents rated how much each of the 35 somatic symptoms bothered them within the last three months.

	SOMATIC SYMPTOM	Severity scale (Range 1-3)	
		Mean	SD
1.	Lack of energy / Fatigue	1.93	0.69
2.	Headaches	1.79	0.65
3.	Cold (sore throat, cough etc.)	1.79	0.67
4.	Back pain	1.65	0.65
5.	Nausea	1.65	0.66
6.	Pain in arms and/or legs	1.57	0.62
7.	Acne and pimples	1.56	0.72
8.	Over-perspiration	1.52	0.68
9.	Pain in joints	1.48	0.61
10.	Pain in stomach	1.48	0.67
11.	Food intolerance	1.48	0.65
12.	Heart beating too fast	1.47	0.61
13.	High body temperature	1.46	0.63
14.	Vertigo	1.44	0.63
15.	Lump in throat	1.43	0.62
16.	Pain in chest	1.43	0.60
17.	Muscle tenseness	1.40	0.56
18.	Appetite loss	1.35	0.55
19.	Breathing difficulties	1.34	0.58
20.	Blurred vision	1.33	0.58
21.	Diarrhoea	1.33	0.55
22.	Muscle weakness	1.31	0.51
23.	Vomiting	1.31	0.56
24.	Bloated stomach	1.29	0.53
25.	Heartburn	1.25	0.50
26.	Skin itching/redness	1.25	0.51
27.	Loss of balance	1.22	0.47
28.	Sudden memory loss	1.21	0.49
29.	Sense of choking	1.21	0.49
30.	Double vision	1.20	0.47
31.	Constipation	1.18	0.43
32.	Skin rash	1.18	0.46
33.	Sudden loss of sight	1.13	0.42
34.	Fainting	1.12	0.38
35.	Sudden loss of voice	1.11	0.37

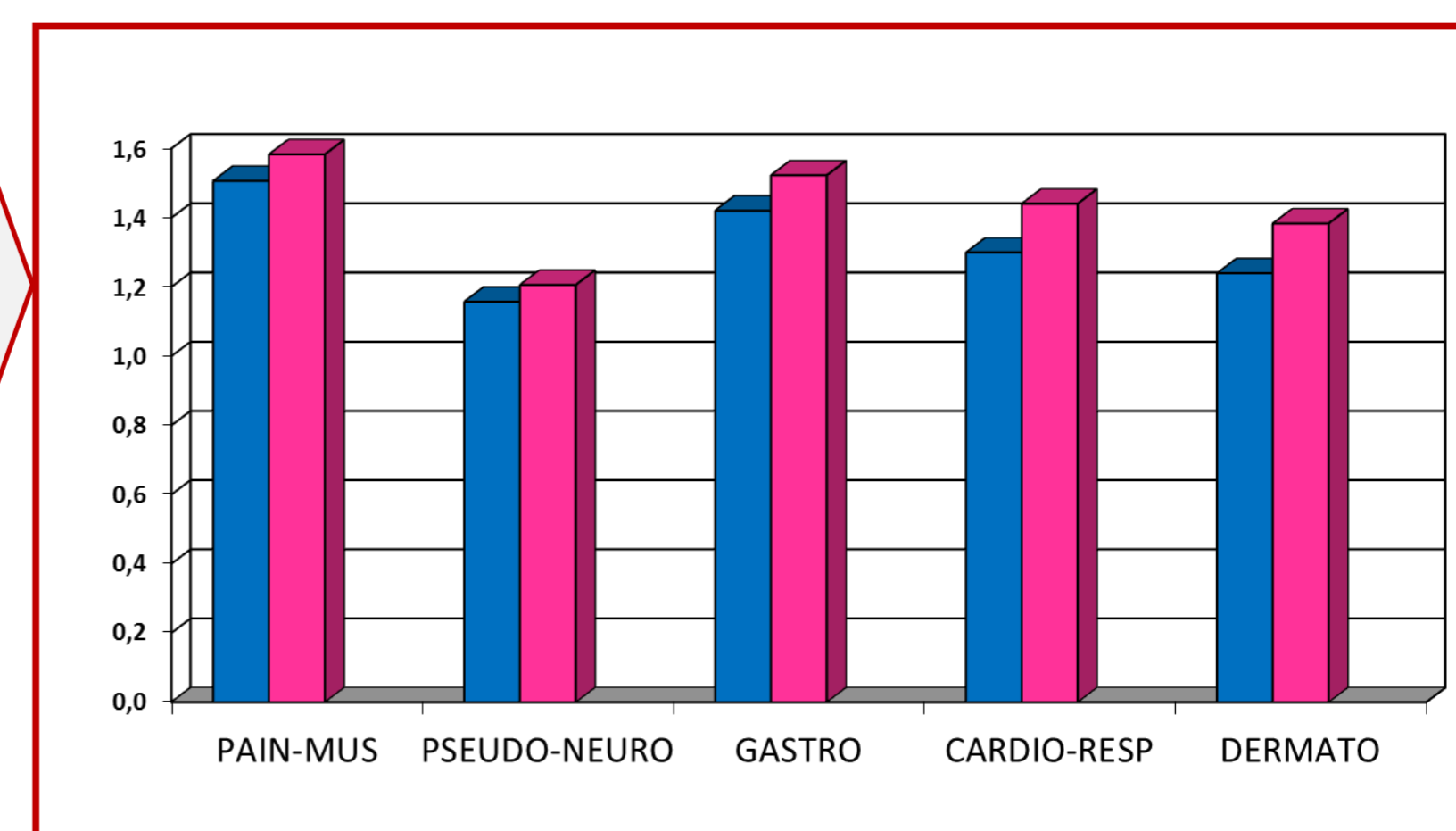
**The Psychosomatic Symptoms Scale (PSS)** (Vulić-Prtorić, 2005; 2016) PSS is self-report questionnaire used to assess frequencies and perceived burden of somatic symptoms commonly seen in primary care and relevant for a large number of diseases and mental disorders. is a 35-item scale that inquires about 35 somatic symptoms and sensations from 5 clusters: **Pain-Musculoskeletal, Pseudoneurological, Gastrointestinal, Cardiovascular-Respiratory and Dermatological.**

The subjects scored each symptom for frequency (*How often have you had these problems in the last 3 months?*) as 1 (never), 2 (a few times a month), 3 (a few times a week), 4 (almost every day) and then for the degree to which each symptom interferes with their daily activities (distress) (*How much does it bother you in daily activities?*) as 1 (does not bother me at all), 2 (it bothers me a little) and 3 (it bothers me a lot).

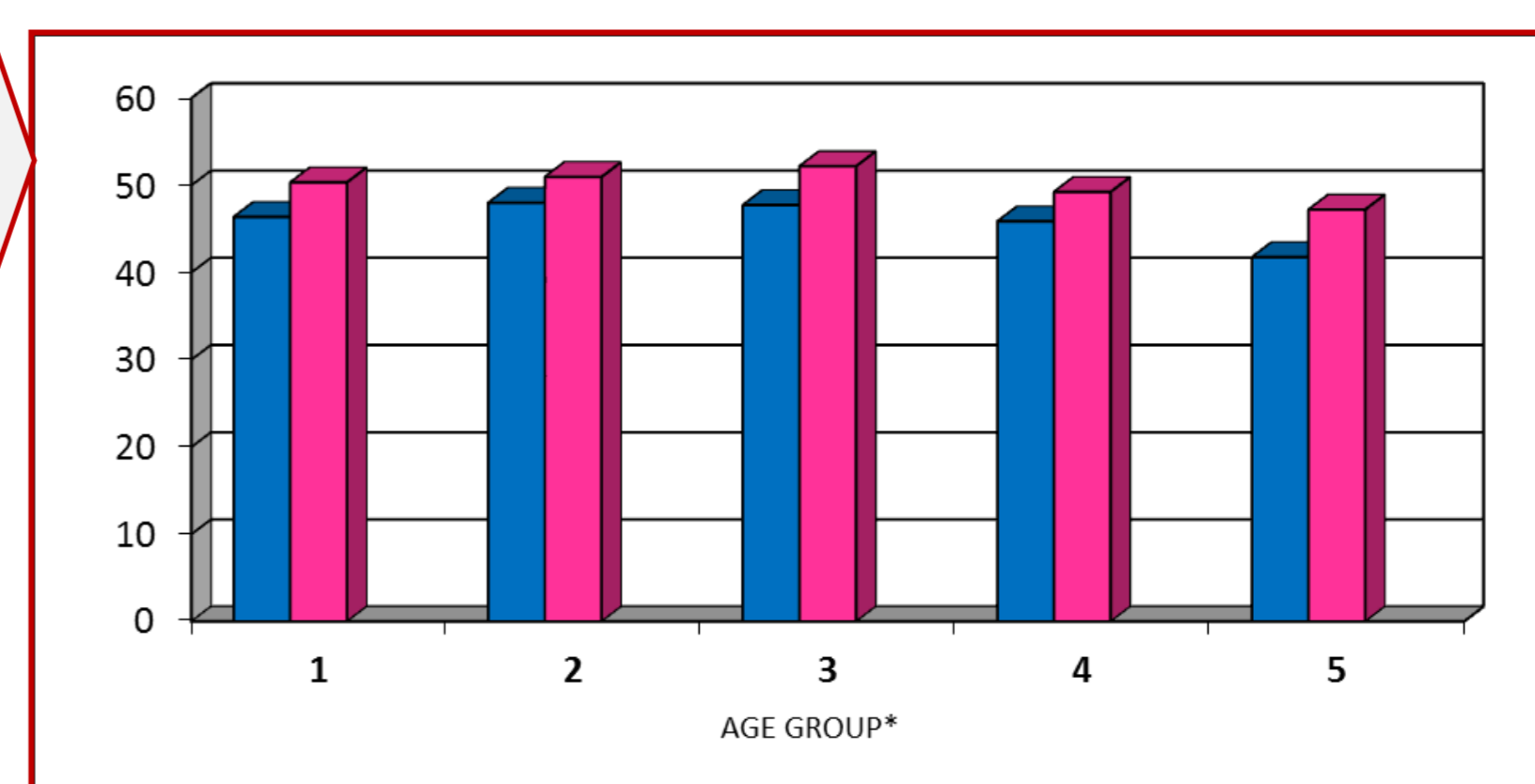
A total score can be computed by summing the scores across all items, with higher scores indicating a higher intensity (frequency scale) and higher distress (severity scale) of somatic complaints. Thus, in determination the PSS score, the total score for the frequency subscale ranges from 35 to 140, and the total score for the severity subscale ranges from 35 to 105.

The PSS has demonstrated good psychometric properties in different samples with Cronbach alphas of .89 for the Frequency scale and .91 for the Severity scale.

Gender differences in the somatic distress score across 5 clusters



Gender and age differences in the total distress score



Symptom severity: mean and standard-deviation values  
**Significant gender differences were marked with red colour**

\*Age groups: Group 1 = elementary school, 5th and 6th grade; Group 2 = elementary schools, 7th and 8th grade; Group 3 = secondary schools, 1st and 2nd grade; Group 4 = secondary schools, 3rd and 4th grade; Group 5 = university students

## RESULTS

Data were analyzed on each **symptom level** and **5 clusters levels**: Pain-Musculoskeletal, Pseudoneurological, Gastrointestinal, Cardiovascular-Respiratory and Dermatological.

The most distressfully reported symptoms were lack of energy, headaches, upper respiratory symptoms and back pain, and the most distressfully cluster was Pain-Musculoskeletal group of symptoms.

Gender differences were found on symptom and cluster level, with females feeling more distressed with their somatic symptoms. On the symptom level gender differences were found in 22 of the 35 symptoms, with females reporting more distress for all symptoms than males.

On cluster level analysis of variance found statistically significant gender differences in all somatic symptom clusters with females reporting higher distress scores.

The study findings give insight into the differences in the perceived burden of the somatic symptoms in males and females with the necessity of different approaches in the therapeutic interventions.



## REFERENCES FOR PSS:

- Vulić-Prtorić, A. (2005). **The Psychosomatic Symptoms Scale for Children and Adolescents**, *Contemporary Psychology*, 8, 2, 211-227.
- Vulić-Prtorić, A., & Cifrek-Kolarić, M. (2012). *Child and Adolescent Clinical Psychology: Research Review*. Saarbrücken, Deutschland: LAP LAMBERT Academic Publishing.
- Vulić-Prtorić, A. (2016) **Somatic Complaints in Adolescence: Prevalence Patterns Across Gender and Age**. *Psychologica Topics*, 25, 1, 75-105.