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ABDOMINAL PAIN RELIEVED BY ANTIPSYCHOTIC MEDICATION

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OBJECTIVE: Somatic Symptom Disorder is characterized by an excessive, disproportionate, and persistent focus on one or more bodily symptoms, accompanied by intense anxiety, thoughts, and behaviors related to these symptoms. This case highlights the diagnostic and therapeutic challenges in a 61-year-old male patient presenting with somatic complaints and chronic abdominal pain resistant to standard treatment protocols.

CASE: A 61-year-old, single, retired male patient presented with complaints of inner distress, fatigue, anxiety, and abdominal pain persisting for five years. He reported no periods of well-being during this time. Due to the severity of the abdominal pain, he was unable to maintain his social and occupational functioning. Functional impairment and decreased self-care were evident. His psychiatric history revealed that chronic abdominal pain and prominent anxiety began after a COVID-19 infection five years earlier. He had multiple admissions to various medical departments; however, no organic pathology was identified, and he did not benefit from symptomatic treatments.

Comprehensive evaluations conducted during hospitalization by Neurology, Gastroenterology, Cardiology, InternalMedicine, and GeneralSurgery revealed no organic cause. Treatment with duloxetine, venlafaxine, fluoxetine, paroxetine, and benzodiazepines provided no benefit. In contrast, he reported relief following intermittent intramuscular haloperidol/biperiden injections. The treatment regimen was adjusted to fluvoxamine 200 mg/day, olanzapine 20 mg/day, quetiapine 100 mg/day, and sulpiride titrated to 1200 mg/day. Intramuscular haloperidol was administered for episodic pain attacks. Under antipsychotic treatment, the patient's abdominal pain and somatic distress symptoms significantly improved. Informed consent was obtained.

DISCUSSION: The patient was evaluated as having Somatic Symptom Disorder and was followed with a treatment and psychotherapy plan. However, the lack of response to antidepressants and psychotherapy necessitated therapeutic reconsideration. As emphasized by Cruz et al. (Cureus2023) antipsychotic strategies should be considered, particularly in elderly patients with medically unexplained symptoms when standard treatments fail.

Keywords: Somatic symptom disorder, antipsychotics, abdominal pain