

Coping with Bodily Distress Syndrome

By: [Isabella Raasthøj](#), MD, PhD student

Primary Advisor: [Dorte Ejg Jarbøl](#), PhD., Professor, Senior Researcher and General Practitioner

Background

Symptoms like abdominal pain, headache and muscle/joint pain are frequently experienced among Danish citizens. When you have at least four symptoms from one organ system but no medical explanation for the symptoms it can be classified as Bodily Distress Syndrome (BDS). It is a condition where the body registers unusually many symptoms/signals causing bodily distress.

The etiology of BDS is not clear but often predisposing, triggering and maintaining factors within the fields of biology, psychology and social medicine are proposed. Hence the recovery in some patients and persistence of symptoms in others may be explained by multiple factors, for example by differences in the individuals' ways of dealing with their symptoms – a process known as coping.

A study has shown that 17 % of adult Danes have BDS. The high frequency and the poor knowledge about cause and treatment make BDS to a frustrating diagnosis for patient and healthcare professionals. Additionally, it is expensive for the society as patients with BDS have a higher use of health care resources and more frequently leave the work force due to early retirement. More than 50 % of the patients still have their symptoms after two years which indicate that the symptoms have the potential to become chronic and sometimes disabling. Some individuals, even not aware of this, may be more prone to maintain their symptoms than others through ineffective coping, and therefore it is important to investigate the associations between coping and BDS.

Aim

The project aims to answer the following three research questions:

1. What characterizes individuals with BDS with regard to coping styles in the approach-avoidance dichotomy
2. Are coping styles stationary over time in the general population?
3. What is the long-term prognosis of BDS regarding the stability of symptom clusters and how is the persistence of BDS associated with different coping styles?

Method

The study will partially be based on the Danish Symptom Cohort (DaSC) which contain data from a large national questionnaire conducted in 2012. An invitational letter containing a link to a secure website was sent out to 100.000 individuals. Of the invited persons, almost 50.000 fulfilled the questionnaire.

Moreover, a follow-up questionnaire on DaSC will be conducted, scheduled for 2021. For this aim, a new web-based questionnaire will be developed and sent out to the previous respondents of DaSC. Among others, the questionnaire will contain the same questions on BDS and coping as previously posed.

Project status

Currently, literature search is ongoing and the analysis of existing DaSC data is being prepared. Additionally, the follow-up questionnaire is under development.

Related publications (links)

The Danish Symptom Cohort: Questionnaire and Feasibility in the Nationwide Study on Symptom Experience and Healthcare-Seeking among 100 000 Individuals - DOI: [10.1155/2014/187280](https://doi.org/10.1155/2014/187280)

Updated: 26-05-2020