Many kids can get an occasional upset tummy, but what if your child's stomachaches are more persistent?

Dr. David Ziring, associate director of the Pediatric Inflammatory Bowel Disease Program at Cedars-Sinai Guerin Children's in Los Angeles,
offers up possible diagnoses that doctors should look out for.

First of all, kids' stomach pain isn't uncommon: About a third of youngsters will at some point complain of persistent abdominal pain, according to Cedars-Sinai.

Luckily, a pediatrician or gastroenterologist can usually get to the bottom of the trouble.

**Look for these red flags**

Anytime your child complains for more than two weeks of any of these symptoms—aches, cramps, bloating, gas or nausea—it's time to take them to the doctor, Ziring said.

Things might become more urgent if the child is also experiencing abnormal weight loss, loss of appetite, unexplained fever, vomiting, diarrhea, blood in the stool or joint pain.

"Parents should always bring their children to the doctor when they're concerned, but these red flags are more likely to indicate a problem that requires further investigation and intervention," Ziring explained in Cedars-Sinai news release.

**The bellybutton rule**

Exactly where is the child feeling pain? If it's nearer to the navel then it may not be something serious—but the further away from the bellybutton the pain is centered, the more serious the cause might be, Ziring said.

Doctors such as pediatric gastroenterologists typically do a thorough
exam and ask parents for a detailed family history, including whether or not any relative has irritable bowel syndrome (IBS).

That's because up to 95% of kids with persistent abdominal pain come to be diagnosed with what's known as functional abdominal pain, Ziring said. That diagnosis can include irritable bowel syndrome.

"Children with functional abdominal pain are acutely sensitive to the sensations their bodies are giving them," Ziring explained. "It's a mind-body problem of communication between the brain and the gut that causes abnormal perceptions and heightened response to pain. Their brains amplify signals as being exquisitely painful when other people might not even recognize them."

**Diagnosing, treating functional abdominal pain**

Often doctors can diagnose functional abdominal pain in a child without much testing, but sometimes tests are needed, such as those used to spot stomach ulcers, celiac disease and inflammatory bowel disease (Crohn's and colitis).

"A diagnosis can be a relief for parents, but it can be frustrating as well when you can't point to lab tests to indicate a problem," Ziring said. "But it's common to have abdominal pain. There are treatments, and it almost always gets better."

He stressed that a child's abdominal pain isn't strongly tied to their emotional state—sadness, anxiety—but it can exacerbate existing pain.

So any intervention that distracts and eases the mind—sports or music, for example—might help lessen the pain, Ziring said. Medications for abdominal spasms and changes to diet might also help.
Avoid commercial tests

One last tip: There are consumer tests out there being hawked as quick ways to spot food allergies, leaky gut or disturbances to the microbiome.

"Often these tests raise more concerns for parents, in addition to legitimate concerns about their child's pain," Ziring said. "Food allergies are not a significant contributor to isolated abdominal pain in children, and it's difficult to take that information and come up with medical treatment."

Copyright © 2024 HealthDay. All rights reserved.


This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.