



FAP

If your child has **FUNCTIONAL ABDOMINAL PAIN**, he or she may be eligible to participate in a research study.

What causes FAP?

The cause of FAP is not known, but a child with FAP may be overly sensitive to gut sensation and movement. It could be that the gut is actually more sensitive in children with FAP. Or in these children the brain may be more likely to interpret messages from the gut as a signal that something is wrong. Children may have this condition naturally, or it may develop later in life, sometimes after an infection or inflammation of the gut has already healed.

Why study FAP in children and adolescents?

FAP is a real problem and it hurts. FAP can interfere with school attendance and performance, as well as with important activities and social relationships.




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FAP

FUNCTIONAL ABDOMINAL PAIN

**Does your child
have frequent
stomach aches?**



Worries
Feelings of Discouragement
Sadness
Irritability

What is Functional Abdominal Pain?

Functional abdominal pain (**FAP**) is a common problem in which chronic or frequent abdominal pain interferes with a child's regular activities and daily life. It is not caused by tissue damage or serious inflammation.

Common symptoms associated with FAP:

- Headaches
- Other aches and pains
- Feelings of dizziness or tiredness

Many children with FAP suffer from migraine headaches, and others struggle with fears and worries, and feelings of discouragement, sadness, or irritability. In some children and adolescents, stressful events can trigger pain or make it worse.


What treatments are available?

Researchers at Nationwide Children's Hospital are trying to learn more about different treatments for FAP. We are currently recruiting for two research studies that will help us determine whether one or both of the treatments offered will be effective in treating FAP. One of the studies is looking at a medicine called citalopram (Celexa*) and the other is looking at a type of talking therapy called Cognitive Behavioral Therapy.

What do I need to know about the studies?

For the **medication study**, children and adolescents between the ages of 7 and 18 years who have been diagnosed with FAP may be able to participate. Participants will be randomly assigned to receive either citalopram or a pill that is inactive (called placebo) for eight weeks. During this time, our research team will closely monitor the physical symptoms, psychiatric symptoms, and side effects for each participant.

After eight weeks, children and adolescents who were on citalopram may choose to continue on the medication, and will be monitored by their physician. Children and adolescents who were on placebo and did not improve may begin taking citalopram as prescribed by the study staff and their physician. There will be an additional research assessment visit 6 months after starting the study.



For the **talking therapy study**, children and adolescents between the ages of 7 and 16 years who have been diagnosed with FAP and have symptoms of anxiety may participate.

Participants will be randomly assigned to receive either CBT treatment, or treatment as usual with a referring physician. During this time, our research team will do an initial assessment and monitor physical and psychiatric symptoms for each participant. For your convenience, all study visits will take place at your physician's office locations or at Nationwide Children's Hospital.

After the eight-week trial, children and adolescents will meet again with our study staff to discuss their treatment and outcomes. Children who were assigned to treatment as usual and did not improve will go over other options with our study staff. There will be an additional research assessment visit 6 months after starting the study.

For more information about either study, please call (614) 722-2293 or 1-866-929-2099.

There is no cost to participate in either study and participants will be compensated for their time.