

MENTAL HEALTH

Association of somatic complaints and externalizing/internalizing mental health difficulties in Latvian adolescents

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Background. Various physical symptoms and complaints are a common experience in paediatric and child psychiatric practice. Adolescents suffering from somatic symptoms perform worse in school, are more often absent from school, and more frequently tend to have problematic social relations. Somatic symptoms in children and adolescents are also associated with mental health disorders (Bohman, 2018). There is increasing evidence that somatic health complaints in combination with mental health complaints are important components of mental disorders (Potrebny, 2017). So far, there have been no studies to investigate association of somatic complaints and externalizing (behavioural) and internalizing (emotional) mental health difficulties in adolescents in Latvia.

Aim. To investigate association of somatic complaints and externalizing and internalizing mental health difficulties in adolescents.

Methods. The study was conducted using data from the international Health Behaviour in School-Aged Children (HBSC) study year 2017/2018 database. HBSC in 2017/2018 included a mental health-screening instrument – the Strengths and Difficulties Questionnaire (SDQ), which is a brief behavioural screening questionnaire for 3–16-year-olds. SDQ results were defined as abnormal, and indicative of significant mental health difficulties, if 22 points and higher were reached on the total difficulties score (results above the 90th centile). Separate binomial logistic regression models were performed in SPSS to explore the link between headaches, backaches, stomach aches and the risk of externalizing and internalizing difficulties, adjusted for sex, age and socioeconomic status.

Results. The sample consisted of 4412 adolescents aged 11, 13 and 15, of these, 2224 (50.4%) were girls. Girls had 1.33 times higher odds of having an abnormal SDQ score (CI=1.07–1.66). Adolescents who evaluated their socioeconomic status as poor had 2.44 times higher odds of having an abnormal SDQ score (CI=1.62–3.69). Frequent aches were defined as any aches at least once a week in the past 6 months. The most frequent aches that were reported in the sample were headaches (30.1%), followed by backaches (22.6%) and stomach aches (20%). Adolescents reporting any frequent aches had 2.63 times higher odds of having an abnormal SDQ score (CI=2.09–3.30).

Conclusion. Self-reported aches indicate a higher risk of having internalizing and externalizing difficulties. Therefore, it is recommended in general practice to screen adolescents reporting any frequent aches for mental health difficulties.

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