

FND: Comprehensive, Integrated, Multidisciplinary Management

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Introduction

Functional Neurological Disorder (FND) represents a significant and often debilitating challenge within the field of neurology, leading to considerable functional impairment. A contemporary multidisciplinary perspective is essential, advocating for the recognition of FND not merely as a diagnosis of exclusion, but as a common and genuinely treatable condition underpinned by identifiable alterations in brain network function. This comprehensive view emphasizes the critical importance of key clinical features, robust diagnostic criteria, and the necessity of integrated care approaches that bring together expertise from neurology, psychiatry, and rehabilitation specialties to address its complex presentation and support patients effectively[1].

Exploring the landscape of FND treatment, systematic reviews provide an invaluable overview of evidence-based interventions. These studies consistently highlight the growing body of literature that supports psychological therapies, such as Cognitive Behavioral Therapy (CBT) and various forms of psychotherapy, as well as physical rehabilitation, as central and foundational components of FND management. The consensus emphasizes the critical need for highly tailored, multi-component interventions, stressing the integration of diverse therapeutic approaches to achieve optimal and sustained outcomes for individuals grappling with the disorder[2].

Moving beyond purely psychological interpretations, recent research delves deeply into the intricate neurobiological underpinnings of Functional Neurological Disorder. This work synthesizes findings on altered brain connectivity patterns, disruptions in abnormal predictive processing, and the crucial role played by interoception and emotion regulation mechanisms. A comprehensive understanding of these complex neurobiological mechanisms is not only pivotal for developing more effective and precisely targeted treatments but also instrumental in dismantling the pervasive stigma that has historically been associated with FND, fostering greater acceptance and informed care[3].

Contemporary diagnostic strategies for Functional Neurological Disorder have evolved significantly, now strongly emphasizing positive diagnostic criteria rather than relying on a problematic diagnosis by exclusion. These advanced approaches meticulously detail the specific clinical signs and employ specialized diagnostic tests designed to accurately identify FND, particularly focusing on the often-prominent motor and sensory symptoms. Crucially, the prevailing recommendation advocates for transparent and clear communication of the diagnosis to patients, a practice that is vital for cultivating patient understanding, encouraging active engagement, and promoting adherence to subsequent treatment plans[4].

An important dimension of FND is its manifestation in pediatric and adolescent populations, where the disorder presents with unique characteristics and distinct challenges. Overviews of this demographic discuss specific prevalence rates, age-dependent clinical features, and underscore the profound importance of early diagnosis and timely intervention in younger individuals. The literature strongly stresses the imperative for age-appropriate and family-centered care models that seamlessly integrate neurological, psychological, and rehabilitative strategies, ensuring a holistic and supportive environment for children and adolescents affected by FND[5].

Systematic reviews have illuminated the often-overlooked cognitive aspects of Functional Neurological Disorder, a dimension historically overshadowed by more overt motor or sensory symptoms. Research now unequivocally reveals compelling evidence of altered cognitive function among FND patients, encompassing specific deficits in areas such as attention, memory, and executive function. These significant findings strongly suggest that cognitive symptoms are an integral and intrinsic component of FND, profoundly influencing patients' daily functioning and unequivocally demanding thoughtful consideration within comprehensive treatment plans[6].

Investigations into the prognosis of Functional Neurological Disorder offer crucial and nuanced insights into the long-term outcomes for affected patients. These systematic reviews highlight considerable variability in prognosis, which is contingent upon factors such as the specific symptom type, the duration of symptoms, and critically, the patient's access to appropriate and timely treatment. The collective findings indicate that while a subset of patients may experience a full recovery, a substantial proportion unfortunately continues to face persistent symptoms, thereby profoundly underscoring the pressing need for early, comprehensive, and sustained intervention strategies[7].

A comprehensive understanding of Functional Neurological Disorder necessitates an examination of its frequently observed comorbidities. Systematic reviews synthesize findings on a high prevalence of various psychiatric conditions, including mood disorders and anxiety disorders, as well as common non-psychiatric issues like chronic pain conditions. This intricate pattern of comorbidity highlights the complex interplay between FND and other significant health issues. Recognizing and effectively addressing these comorbidities is absolutely vital for conducting comprehensive patient assessments and implementing truly integrated treatment planning, which ultimately leads to a substantial improvement in overall patient care and well-being[8].

Qualitative systematic reviews offer profound and invaluable insights into the lived experiences of individuals diagnosed with Functional Neurological Disorder, pro-

viding a patient-centered perspective often missed by purely quantitative studies. These reviews consistently highlight compelling themes such as the profound diagnostic uncertainty patients often face, pervasive feelings of invalidation from healthcare systems and society, the significant impact the condition has on their personal identity, and the persistent challenges encountered in accessing effective and empathetic care. Gaining a deep understanding of these powerful patient experiences is unequivocally crucial for developing more empathetic, truly patient-centered approaches to diagnosis, treatment, and ongoing support for FND[9].

The current landscape of management strategies for Functional Neurological Disorder is thoroughly discussed in recent narrative reviews, which advocate for a highly personalized and adaptable approach. This strategy emphasizes the seamless integration of pharmacological interventions, psychological therapies, and physical rehabilitation meticulously tailored to each individual's unique constellation of symptoms and specific needs. The reviews consistently underscore the paramount importance of comprehensive patient education, the benefits of early intervention, and the indispensable role of a collaborative multidisciplinary team in significantly improving functional outcomes and enhancing the overall quality of life for those living with FND[10].

Description

Functional Neurological Disorder (FND) represents a significant and often disabling condition within neurology, now increasingly understood through a comprehensive multidisciplinary lens. This perspective positions FND as a common and treatable disorder, fundamentally rooted in altered brain network function, rather than solely a psychological ailment. Recent research has delved into the intricate neurobiological underpinnings of FND, revealing complex disruptions in brain connectivity, abnormal predictive processing, and challenges in interoception and emotion regulation. A profound understanding of these underlying neurobiological mechanisms is not only crucial for developing more effective and targeted treatments, but also vital for actively working to reduce the long-standing stigma that has historically been associated with FND [1, 3].

The evolution of diagnostic approaches to FND now strongly emphasizes positive diagnostic criteria, moving decisively away from the less precise and often stigmatizing diagnosis by exclusion. These contemporary methods meticulously detail specific clinical signs and employ tailored diagnostic tests to accurately identify FND, with particular attention paid to common motor and sensory symptoms. A key recommendation is the clear and empathetic communication of the diagnosis to patients, a practice that is paramount for cultivating patient understanding, fostering active engagement, and ensuring adherence to subsequent treatment pathways [4]. Furthermore, a distinct and important aspect of FND involves its unique presentation and particular challenges within pediatric and adolescent populations. Early diagnosis and timely intervention are critically important for younger individuals, necessitating the implementation of age-appropriate, family-centered care models that seamlessly integrate neurological, psychological, and rehabilitative strategies to provide holistic support [5].

Evidence-based interventions form the cornerstone of FND treatment, with systematic reviews consistently highlighting psychological therapies—such as Cognitive Behavioral Therapy (CBT) and various forms of psychotherapy—and physical rehabilitation as core components of effective management. The literature strongly advocates for tailored, multi-component interventions that integrate diverse therapeutic approaches, ensuring optimal and sustainable outcomes for patients [2]. Beyond the more visible motor and sensory symptoms, the cognitive aspects of FND are gaining deserved attention. Systematic reviews have illuminated compelling evidence of altered cognitive function in FND patients, including discernible deficits in areas like attention, memory, and executive function. These findings

confirm that cognitive symptoms are an integral part of FND, profoundly influencing daily functioning and thus demanding careful and dedicated consideration within comprehensive treatment plans [6]. Overall, current management strategies for FND emphasize a personalized approach, integrating pharmacological, psychological, and physical therapies meticulously tailored to each individual's unique constellation of symptoms and specific needs. Patient education, early intervention, and the indispensable collaborative efforts of a multidisciplinary team are highlighted as paramount for significantly improving functional outcomes and enhancing the overall quality of life for those living with FND [10].

Crucial insights into the long-term outcomes and prognosis of FND are provided by systematic reviews, which underscore a significant variability influenced by factors such as symptom type, duration, and, critically, access to appropriate and timely treatment. While a subset of patients may experience a full recovery, a considerable proportion unfortunately continues to face persistent symptoms, thereby profoundly emphasizing the pressing need for early, comprehensive, and sustained intervention strategies [7]. Adding to the complexity, FND is frequently associated with a high prevalence of various psychiatric comorbidities, notably mood and anxiety disorders, alongside common non-psychiatric issues such as chronic pain conditions. This intricate pattern of comorbidity highlights the complex interplay between FND and other significant health issues. Recognizing and effectively addressing these comorbidities is absolutely vital for conducting comprehensive patient assessments and implementing truly integrated treatment planning, which ultimately leads to a substantial improvement in overall patient care and patient well-being [8].

Understanding the profound and often challenging lived experiences of individuals with Functional Neurological Disorder is indispensable for shaping more empathetic, patient-centered, and ultimately more effective care pathways. Qualitative systematic reviews consistently bring to light compelling themes such as the pervasive diagnostic uncertainty patients often encounter, deeply felt feelings of invalidation from healthcare systems and society, the significant and often distressing impact the condition has on their personal identity, and the persistent practical challenges they face in accessing adequate, understanding, and effective treatment. Gaining a deep and nuanced understanding of these powerful patient perspectives is unequivocally fundamental for developing truly patient-centered approaches to diagnosis, treatment, and ongoing support for FND, thereby enhancing their overall journey towards recovery and improved quality of life [9].

Conclusion

Functional Neurological Disorder (FND) is a significant challenge in neurology, now recognized as a common, treatable condition stemming from altered brain network function. A multidisciplinary approach integrating neurology, psychiatry, and rehabilitation is crucial for its management. Diagnosis has shifted towards positive criteria, moving away from exclusion, with specific clinical signs defining the condition. Treatment emphasizes evidence-based psychological therapies and physical rehabilitation, delivered through tailored, multi-component interventions. Beyond motor symptoms, FND involves neurobiological underpinnings like altered brain connectivity and cognitive aspects, including deficits in attention and memory, which require consideration in treatment plans. The disorder also presents uniquely in pediatric and adolescent populations, necessitating age-appropriate, family-centered care. Patients often experience diagnostic uncertainty and feelings of invalidation, highlighting the importance of understanding their lived experiences for empathetic care. FND frequently co-occurs with psychiatric comorbidities such as mood and anxiety disorders, and chronic pain, which must be addressed for comprehensive patient care. Prognosis varies, with many patients facing persistent symptoms, underscoring the need for early and sustained inter-

vention. Effective management involves personalized strategies, patient education, and collaborative multidisciplinary teams to improve functional outcomes and quality of life.

Acknowledgement

None.

Conflict of Interest

None.

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How to cite this article: Hassan, Leila. "FND: Comprehensive, Integrated, Multidisciplinary Management." *Abnorm Behav Psychol* 11 (2025):357.

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Received: 01-Dec-2025, Manuscript No. abp-25-178184; **Editor assigned:** 03-Dec-2025, PreQC No. P-178184; **Reviewed:** 17-Dec-2025, QC No. Q-178184; **Revised:** 22-Dec-2025, Manuscript No. R-178184; **Published:** 29-Dec-2025, DOI: 10.37421/2472-0496.2025.11.357