Also called conversion reaction, hysteria and hysterical reaction

Conversion disorder is a condition in which you show psychological stress in physical ways. The condition was so named to describe a health problem that starts as a mental or emotional crisis — a scary or stressful incident of some kind — and converts to a physical problem.

In conversion disorder, your leg may become paralyzed after you fall from a horse, even though you weren't physically injured. Conversion disorder signs and symptoms appear with no underlying physical cause, and you can't control them. Signs and symptoms of conversion disorder typically affect your movement or your senses, such as the ability to walk, swallow, see or hear. Conversion disorder symptoms can be severe, but for most people, they get better within a couple of weeks.

**Symptoms**

Conversion disorder symptoms usually appear suddenly after a stressful event. Common symptoms can include:

- Poor coordination or balance
- Paralysis in an arm or leg
- Difficulty swallowing or "a lump in the throat"
- Inability to speak
- Vision problems, including double vision and blindness
- Deafness
- Seizures or convulsions

Other conversion disorder symptoms include:

- Loss of balance
- Numbness or loss of the touch sensation
- Inability to feel pain
- Hallucinations
- Difficulty with walking
- Urinary retention

**When to see a doctor**

It's best to seek medical attention as soon as you notice symptoms that might be caused by conversion disorder. If the underlying cause of your signs and symptoms is something physical, quick diagnosis and treatment may be important. If the diagnosis is conversion disorder, then psychological help may improve the symptoms and prevent future episodes.

**Causes**

Episodes of conversion disorder are nearly always triggered by a stressful event, an emotional conflict or another mental health disorder, such as depression. The exact cause of conversion disorder is unknown, but the part of the brain that controls your muscles and senses may be involved. It may be the brain's way of coping with something that seems like a threat.
Risk factors

- Recent significant stress or emotional trauma
- Being female — women are much more likely to get conversion disorder
- Being an adolescent or young adult — conversion disorder can occur at any age, but it's most common during adolescence or early adulthood
- Having a mental health condition, such as mood and anxiety disorders, dissociative disorder and certain personality disorders
- Having a family member with conversion disorder
- A history of physical or sexual abuse
- Financial problems

Complications

For most people, symptoms of conversion disorder get better with nothing more than reassurance that they don't have a serious health problem. However, symptoms may get worse over time, or may go away only to return within a year. Seeking treatment as soon as possible after symptoms appear may improve your long-term outlook.

What you can do

- Write down any symptoms you're experiencing, including any that may seem unrelated to the reason for which you scheduled the appointment.
- Write down key personal information, including any major stresses or recent life changes.
- Make a list of all medications, vitamins and supplements that you're taking.
- Take a family member or friend along, if possible. Someone who accompanies you may remember something that you missed or forgot.
- Write down questions to ask your doctor.

Your time with your doctor is limited, so preparing a list of questions ahead of time will help you make the most of your time together. Some basic questions to ask your doctor include:

- What is likely causing my symptoms or condition?
- Are there other possible causes for my symptoms or condition?
- What kinds of tests do I need?
- What treatment approach do you recommend in my case?
- If you're recommending medications, are there any possible side effects?
- For how long will I need to be treated?
- What can I do to reduce the risk of my symptoms recurring?
- Should I see a specialist? What will that cost, and will my insurance cover seeing a specialist?
- Is there a generic alternative to the medicine you're prescribing?
- Are there any brochures or other printed material that I can take home with me? What websites do you recommend?

In addition to the questions that you've prepared to ask your doctor, don't hesitate to ask questions during your appointment.
**Tests and diagnosis**

For you to be diagnosed with conversion disorder:

- You must have one or more symptoms you can't control that affect movement of part of your body or your senses. These symptoms must seem as if they could be caused by a neurological or other medical condition.

- Your symptoms must have occurred after a stressful event.

- You're not producing symptoms on purpose.

- Your symptoms aren't fully explained by a general medical condition, drug use or a culturally accepted behavior, such as experiencing visions at a religious ritual.

- Your symptoms must cause significant stress or difficulty in social, work or other settings.

- Your symptoms aren't limited to pain or sexual problems, and aren't better accounted for by another mental health problem.

- There are no standard tests to check for conversion disorder. The tests your doctor uses will depend on what kind of signs and symptoms you have. They may include:
  - Simple bedside tests. Your doctor checks for normal reflexes to help rule out a physical cause for your signs and symptoms. These tests don't require any specialized equipment and are quick and painless. The exact tests your doctor does depends on your signs and symptoms.
  - X-rays or other imaging tests. These tests may help your doctor confirm that your symptoms aren't caused by an injury or neurological or other physical conditions that might cause similar symptoms.
  - An electroencephalogram (EEG) scan. Your doctor uses an EEG because it can help rule out a neurological cause of seizure symptoms. This test is a painless procedure to detect electrical activity in your brain. It's used to test for epilepsy and other brain disorders.

Diagnosis can be tricky because a doctor must rule out medical conditions with a physical cause.

**Treatments and drugs**

For many people, symptoms of conversion disorder get better without treatment, especially after reassurance from the doctor that their symptoms aren't caused by a serious underlying problem. Almost 70% have spontaneous resolution.

**Treatment:**

You may benefit from treatment if you have conversion disorder signs and symptoms that linger or keep coming back, you have severe symptoms, or you have other mental or physical health conditions. Treatment will depend on your particular signs and symptoms and may include:

- **Counseling** (psychotherapy). Seeing a psychologist or professional counselor can help treat symptoms of conversion disorder and prevent it from coming back. This can be especially helpful if you have anxiety, depression or other mental health issues.

- **Physiotherapy.** Working with a physical therapist may prevent complications of certain symptoms of conversion disorder. For example, regular movement of arms or legs may ward off muscle tightness and weakness if you have paralysis or loss of mobility.

- **Treating related stress and other conditions.** Conversion disorder may improve when you get treatment for stress, anxiety or another underlying problem. Your doctor may prescribe anti-anxiety medications, antidepressants or other drugs as part of your treatment plans, depending on your individual health profile.

- **Hypnosis.** Undergoing hypnosis with a trained expert may help a person identify and resolve psychological issues. Hypnosis is usually done along with another form of psychotherapy in treating conversion disorder.

**Prevention**

Conversion disorder is triggered by a reaction to some kind of stress. Stress-relieving activities such as meditation and yoga may help reduce reactions to the events that prompt symptoms of conversion disorder. If you have other mental health conditions, make sure you're getting the right treatment. Treatment may include counseling and medications.