**Supplemental Text Box 2**

**Brief Summary of Key Contributions from Clinicians (and Their Teams) from Around the World Working with Children and Adolescents with FND**

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| Pediatric team | Key contributions |
| Elena Garralda and colleagues (London, United Kingdom) | Throughout her career, Elena Garralda highlighted the interface between physical health and mental health, and the need for an integrative, holistic approach. She supported the development of consultation-liaison and pediatric liaison child/adolescent mental health services in the United Kingdom. She and her colleagues have written extensively about the biopsychosocial assessment and treatment of children with functional somatic symptoms.74,108–110 Because of this work, consultation-liaison services in the United Kingdom considered treatment of children with FND as part of their mandate. Garralda’s work set a model for clinicians from other countries. |
| Kenneth Nunn, Kasia Kozlowska, and colleagues (Sydney, Australia) | Ken Nunn founded the Mind-Body Program in 1994 (see Supplemental Text Box 1). Carrying on the work, Kasia Kozlowska and her mind-body team began a research program looking at biomarkers in children with mixed FND in 2006. Based on this research and extending the landmark work of George Chrousos,125 the team has developed the stress-system model of FND (and, more broadly, functional somatic symptoms).10,39,40 The team has also tried to share their clinical experience—what they have learned over time—with other clinicians via published case studies and other clinical materials (see references in main text). |
| Janet Baker and colleagues (Sydney, Australia) | Janet Baker and her international colleagues have developed guidelines for the assessment and treatment of functional voice disorders for adults and children.43,111,112 Baker teaches the biopsychosocial approach to speech therapists. |
| Per Fink, Charlotte Rask, and Karen Hansen (Aarhus, Denmark) | The Danish pediatric research team has worked under the umbrella of two Aarhus University Hospital departments: the Research Clinic for Functional Disorders and Psychosomatics (founded by Per Fink in 1999) and the Psychiatric Hospital for Children and Adolescents. This team has conducted research about functional somatic symptoms in preschool and school-age children.74,115,116 They have examined the utility of acceptance and commitment therapy in adolescents with functional somatic symptoms.117–119 Fink is a strong voice for evidence-based practice in the field of functional somatic disorders, including chronic fatigue syndrome.113,114 |
| Trond Diseth and Helene Helgeland, and colleagues (Oslo, Norway) | Trond Diseth, Helene Helgeland, and their colleagues have promoted a biopsychosocial understanding and personalized treatment of children with functional somatic symptoms across Norway.120 They have developed a white-board conversation tool for documenting the co-constructed formulation with the child and the family.58,59 Based on her work on hypnosis, Helgeland has underlined the healing potential of positive suggestion and health-promoting communication when working with children with functional somatic symptoms and their families.37 |
| Tyson Sawchuk and colleagues (Canada) | Tyson Sawchuk and his colleagues have run research looking at biomarkers in children with functional seizures. Their studies have confirmed that children with functional seizures show activation of the autonomic nervous system and respiratory motor system.11 They have developed a clinical pathway to manage this patient group in their health system.20,81 Their most recent research uses a hyperventilation task to demonstrate that children with functional seizures activate their neural networks with hyperventilation (increased beta-wave power) and that this activation fails to downregulate when hyperventilation is terminated (i.e., increased beta-wave power is maintained).126 |
| Aaron Fobian and colleagues (Alabama, USA) | Aaron Fobian developed a novel treatment for children with functional seizures called retraining and control therapy (ReACT), which aims to increase sense of control and retrain reflexive functional seizure symptoms via use of habit reversal and other cognitive-behavioral strategies.15,127 She and colleagues have conducted a randomized, controlled trial of ReACT vs. supportive therapy.15,127 She and her colleagues have also established a research program that aims to identify and evaluate novel treatment targets for the development and refinement of evidence-based interventions for FND.15,80,92,121,127,128 |
| Jeff Waugh and colleagues (Texas, USA) | Jeff Waugh and colleagues have examined the issue of stigma in the work of pediatric neurologists when they make a diagnosis of FND.124 They also studied the long-term accuracy of FND diagnoses in children122 and the impact of shared community trauma on the rate of FND diagnoses in children.123 |
| Areti Vassilopoulos and colleagues  (Connecticut, USA) | Areti Vassilopoulos and her colleagues have created the first FND special interest group for the American Psychological Associations Division of Pediatric Psychology (APA Division 54). It is focused on promoting excellence in clinical work, research, and education on FND in children and adolescents. Together with her international colleagues, she has published a review of current treatment approaches to pediatric FND.25 |