



EVIDENCE SEARCH RESULTS

Question/subject of request:	I am looking for any research articles related to setting up and running education groups for patients with FND and functional seizures and the benefits of these groups
Date requested:	8 th July 2025
Date completed:	22 nd August 2025
Compiled by:	Cate Newell – Knowledge & Library Services Manager

CITING THIS SEARCH

If you reference this search in any paper, publication or presentation, please let us know.

The citation format is:

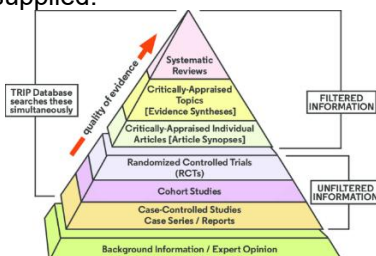
- Newell, C., (2025). *Evidence summary: patient education groups for Functional Neurological Disorders*. Taunton, UK: Somerset Foundation Trust Knowledge and Library Services.

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The results are presented according to the hierarchy of evidence which is used to rank the relative strength of results obtained from scientific research.

The design of the study and the endpoints measured affect the strength of the evidence.

Evidence hierarchies are often applied in evidence-based practices and are integral to evidence-based medicine.

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Summary of search results:

Key article – Stanton 2023 – describes how to set up a functional neurological disorder group. A copy will be sent with this evidence summary,

Examples of educational materials from other hospitals running FND education sessions:
(These could also be good contacts for sharing best practice)

[Functional Neurological Disorder \(FND\) videos : University College London Hospitals NHS Foundation Trust](#)
6 part self-help video series on the management of FND
FND team contact details: uclh.neuropsychiatry.enquiries@nhs.net

[Functional Neurological Disorder \(FND\) rehabilitation service : University College London Hospitals NHS Foundation Trust](#)

[Treatment of Functional Neurological Disorders \(FND\) - Sheffield Teaching Hospital](#)

From the selected [journal articles](#), here is a summary of the benefits of education session for FND/functional seizures:

- Improve patient and non-patient understanding of FND/seizures ([Hillyer 2025](#), [Eilon 2024](#), [Edwards 2024](#))
- Reduced anxiety, depression and functional impairment and improved physical performance ([Guy 2024](#))
- Effective as a first step treatment ([Duncan 2024](#))
- Potentially reduce need for emergency department visits ([Gheis 2023](#), [Gurcan 2022](#))
- Improve readiness for further treatments ([Cope 2021](#), [Thompson 2013](#))
- Positive impact on quality of life ([Sarudiansky 2020](#))

However, some research indicated that educational interventions, while beneficial, are not effective treatments as interventions in their own right but should be considered as a part of a stepped care model between initial diagnosis and further treatments ([Underwood 2024](#), [Gelauff 2020](#)).

In case it is useful I have collated some [patient information resources and sources](#).

I hope this is helpful. Please do let us know if you need any further information.



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Journal articles

1. [Functional neurological disorder treated with psychoeducation: A case report](#)

Authors: Alhazmi, Amal Yousef;Attar, Ahmed Ahmed;Labban, Suhail Ali and Felemban, Reema Ghazi

Publication Date: Jan 17 ,2025

Journal: Medicine 104(3), pp. e41194

Abstract: RATIONALE: Psychogenic tremor (PT) is the most common subtype of psychogenic movement disorder, characterized by involuntary movement, and is usually related to occupational injuries or accidents. Psychogenic movement disorder falls under the category of functional neurological disorders, which are diagnosed based on the criteria outlined in the Diagnostic and Statistical Manual of Mental Disorders. PATIENT CONCERNS: A 25-year-old Saudi male with a history of recurrent superior ventricular tachycardia presented to the emergency department with tremors affecting all his extremities for 8 days. Tremors were nonrhythmic, continuous, and worsened over time and were exacerbated by reaching objects. There was no history of similar presentations or neurological diseases. DIAGNOSES: Examination revealed high-frequency, high-amplitude tremors and rigidity in all extremities, and hyperreflexia in the lower limbs. Laboratory findings were unremarkable; thus, the psychiatric team was consulted for possible PTs. INTERVENTIONS: Psychiatric assessments showed no evidence of psychiatric disorders. The patient only received psychoeducation about his diagnosis. OUTCOMES: The tremor was completely resolved by the time of discharge. LESSONS: In our case, the patient's PT resolved entirely with education alone, differing from previous cases that included psychotherapy and medication, emphasizing the importance of the doctor-patient relationship and the need for future research on effective approaches to delivering diagnosis to patients.

Access or request full text: <https://libkey.io/10.1097/MD.0000000000041194>

2. [A service evaluation of psychoeducation groups for patients with functional seizures.](#)

Authors: Hillyer, Fay A.;Chapman, Timothy and Rodrigues, Angela M.

Publication Date: Sep ,2025

Journal: Epilepsy & Behavior 170, pp. 110462

Abstract: This study presents a mixed method service evaluation of the Non-Epileptic Attack Disorder (NEAD) service psychoeducation groups, which were developed to provide timely care to patients diagnosed with functional seizures at the Newcastle upon Tyne Hospitals NHS Foundation trust (NUTH). The study aimed to conduct a content analysis of the interventions and identify behaviour change techniques utilised, as well evaluating the outcome data collected from Step 1 and Step 2 psychoeducation sessions from a year period (February 2023-January 2024). 13 Behaviour Change Techniques (BCTs) were identified in the Step 1 psychoeducation session, that targeted four intervention functions and 15 BCTs were identified across the Step 2 psychoeducation sessions, that also targeted four intervention functions. The quantitative findings demonstrated that the Step 1 psychoeducation sessions significantly improved patient and non-patient understanding of functional seizures, and the Step 2 psychoeducation sessions significantly improved patient understanding of functional seizures, self-efficacy and distress. Qualitative findings from the Step 1 patient data produced three themes: Affirmation, Improving Understanding and Heterogeneous Needs. Additionally, qualitative findings from the Step 1 non-patient data produced three themes: Resources,



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Improving Understanding and Satisfaction With Content. Overall, the study concludes that the NEAD service is meeting the needs of patients and non-patients who attend the NEAD psychoeducation sessions at NUTH. The findings were discussed in the context of their strengths and limitations, and recommendations were made for further research.

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Access or request full text: <https://libkey.io/10.1016/j.yebeh.2025.110462>

3. [Evaluation of a psychoeducation group for children presenting with functional tic-like behaviours](#)

Authors: Duncan, Morvwen;Pearman, Zoe;Harrold, Katie;Warren, Amy;Evans, Sacha;McAllister, Eve;Heyman, Isobel;Shavel-Jessop, Sara;Murphy, Tara and Liang, Holan

Publication Date: 2024

Journal: Clinical Child Psychology & Psychiatry 29(3), pp. 1011–1025

Abstract: We describe the implementation and evaluation of an online psychoeducation group for young people experiencing functional tic-like behaviours (FTLBs) – a type of functional neurological disorder (FND). Across six groups, 50 participants completed pre- and post-group goal-based outcomes (GBOs) and 36 participants completed service-user feedback, which gathered qualitative and quantitative data about participants experiences of the group. Young people and their parents reported significant improvement in their GBOs following the group and increased knowledge and confidence in managing FTLBs. The findings highlight that virtual psychoeducation group intervention is an acceptable and effective first step in treatment of young people with FTLBs. We discuss implications for future intervention development. Plain language summary: We describe an online psychoeducation group for young people experiencing functional tic-like behaviours (FTLBs) – a type of functional neurological disorder (FND). Across six groups, 50 participants completed goal-based outcomes (GBOs) before and after the intervention. A total of 36 participants completed service-user feedback, which gathered data about participants experiences of the group. Young people and their parents reported significant improvement in their GBOs following the group and increased knowledge and confidence in managing FTLBs. The findings highlight that virtual psychoeducation group intervention is an acceptable and effective first step in treatment of young people with FTLBs. We discuss implications for future intervention development.

Access or request full text: <https://libkey.io/10.1177/13591045241237829>

4. [Illness perceptions, experiences of stigma and engagement in functional neurological disorder \(FND\): exploring the role of multidisciplinary group education sessions](#)

Author: Edwards, Mark, Timothy, R. Nicholson, Mildon, Bridget, Poole, Norman, Butler, Matt, Agrawal, Niruj, Bailey, Cate, Cope, Sarah, Proctor, Barnaby and Holt, Kate

Publication Date: 2024

Publication Details: BMJ Neurology Open, 6, (1) BMJ Publishing Group.

Abstract: Background A critical first step in managing functional neurological disorder (FND) is a positive diagnosis and clear explanation using an understandable illness model.



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Multidisciplinary group education sessions are one way to achieve this, with some evidence they improve understanding, confidence in diagnosis and outcomes with further treatment. In many conditions, illness perceptions and stigma affect distress, functioning, quality of life and engagement. Exploring relationships between these factors could lead to deeper understanding of the impact of education. Methods Questionnaires assessing illness perceptions, quality of life, mood, anxiety, comorbidities, treatment engagement and stigma (both experienced and anticipated) were completed before, immediately and 1 month after a multidisciplinary online group education session for FND at a regional neurosciences centre. Free-text data on causal attributions and needs were also collected. Results 166 patients attended online education sessions from January 2022 to July 2023; 61 (37%) completed presession surveys, 42 (25%) completed postsession and 35 (21%) completed 1 month postsession surveys. Patients reported multiple comorbidities, poor quality of life, functioning and high levels of stigma. Illness perception scores indicated FND as threatening, mysterious and unpredictable, with low personal or treatment control over symptoms. Illness coherence/understanding (mean difference 2.27, p

Access or request full text: <https://libkey.io/10.1136/bmjno-2024-000633>

5. [Parent Experiences of a Pilot Functional Neurological Disorders Clinic at Great Ormond Street Hospital \(GOSH\)](#)

Author: Eilon, Talia, Evans, Sacha, Pujar, Suresh, Orme, Lily and Smith, Abbie

Publication Date: 2024

Publication Details: BJPsych Open, 10, pp.S185–S186. Cambridge University Press.

Abstract: Aims There are a shortage of specialist services available for Functional Neurological Disorders, especially within the paediatric population. Patients and families often find themselves falling within the borderland between medical and psychiatric services. Functional symptoms can cause significant morbidity and disruption to the lives of children and young people, impacting their access to education and social lives. Early diagnosis and explanation of FND is a mainstay of treatment, and is associated with positive outcomes. A Functional Neurological Disorder pilot MDT clinic was set up within Great Ormond Street Hospital, with the aim to provide a one-off therapeutic assessment and psychoeducation. We surveyed families who attended the clinic to assess their experiences and outcomes. Methods A pilot clinic was set up for patients referred within GOSH with a confirmed diagnosis of FND. The Multidisciplinary team consisted of a CAMHS psychiatrist, paediatric neurologist, physiotherapist and occupational therapist. Patients received a one-off outpatient consultation to discuss FND symptoms and background history. Clinicians provided psychoeducation for patients and families about the diagnosis and devised treatment plans including follow-up assessments, onward referral to local services and a consultation with teams where appropriate. A follow-up survey was conducted using semi-structured telephone interviews and patient satisfaction questionnaires. Questionnaires were scored using a Likert rating scale (1: very dissatisfied – 5: very satisfied). Parents were asked about their understanding of the FND diagnosis and about their experiences of support from local teams. Results 25 patients diagnosed with FND were referred to the clinic. Of those, 20 patients took up the consultation. Patients presented with range of functional syndromes. 15 families consented to follow-up interviews. Parents rated their experience at the FND clinic highly (median score 5 – very satisfied). They were very dissatisfied with follow up care (median score 1). Only one patient remained under CAMHS at the time of follow up. 3 families had sought support privately. Parents subjectively rated their children's symptoms at follow up as: much worse (3); a bit



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worse (1); the same (7); a bit better (2) and much better (2). Conclusion Patients and parents demonstrated high levels of satisfaction with the one-off therapeutic assessment. The majority of parents reported that the GOSH consultation helped them to understand the diagnosis of FND. All families felt they had received inadequate support from primary care, local CAMHS services and schools. Patients who struggled to access support from CAMHS/ school were less likely to experience any improvement in FND symptoms and had poorer levels of functioning.

Access or request full text: <https://libkey.io/10.1192/bjo.2024.469>

6. [Routine outcomes and evaluation of an 8-week outpatient multidisciplinary rehabilitative therapy program for functional neurological disorder.](#)

Authors: Guy, Lisette;Caceres, Gabriella A.;Jackson, Temeika;Gorman, Sean;Wilson, Jennifer;Hsieh, Yvonne;Petty, Demelza;Harrison, Simon and Pick, Susannah

Publication Date: Apr ,2024

Journal: Journal of Neurology 271(4), pp. 1873–1884

Abstract: OBJECTIVES: We report routinely collected outcome data from an 8-week outpatient rehabilitative therapy program. The aims of the intervention were to (1) reduce symptom severity and (2) improve functional mobility in adults with functional neurological disorder (FND). **METHODS:** The program delivered individual physiotherapy, cognitive behavioral therapy (CBT) and self-management sessions, group physiotherapy, and psychoeducation. Outcome measures included the Beck Anxiety Inventory (BAI), Beck Depression Inventory (BDI-II), Work and Social Adjustment Scale (WSAS), 10-Meter Walk Test (10MWT), Timed Up and Go (TUG), and Berg Balance Scale (BBS). Data were analyzed retrospectively in accordance with routine service evaluation. Wilcoxon signed-rank tests assessed changes in outcomes between weeks 1 and 8 for all patients completing treatment (n = 45). For patients who attended the 3-month follow-up (n = 31), Friedman's ANOVA assessed overall change in outcomes over time. Post hoc Wilcoxon signed-rank tests compared pairs of time-points (Weeks 1, 8, and 3-month follow-up). **RESULTS:** Analyses of patients completing the program revealed significant improvements in scores between week 1 and week 8. Excluding the BBS, there were statistically significant improvements in all outcomes between weeks 1 and 8 and between weeks 1 and 3-month follow-up. **DISCUSSION:** This outpatient therapy program provided effective treatment for FND. Patients reported reduced anxiety, depression, and functional impairment, as well as improved performance on most physiotherapy measures.

Access or request full text: <https://libkey.io/10.1007/s00415-023-12111-4>

7. [Ask the Patient: Goals for Functional seizure treatment.](#)

Authors: Rush, Beth K.;Kim, Luke;Savinoff, Steve;Watson, Meagan and Strom, Laura

Publication Date: Dec ,2024

Journal: Epilepsy & Behavior 161, pp. 110141

Abstract: Treatment trials for functional seizure (FS) help improve functioning and reduce disability in affected individuals. Clinical trials have prioritized clinician-defined outcomes, but no studies have directly asked adults with FS what they hope to accomplish. This study examined patient-defined goals for treatment in a consecutive cohort of 826 adults with FS referred for outpatient treatment. Goals were reviewed and sorted into 6 categories with



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32.5% of goals related to seizure management, 21.8% to abstract functional improvement, 20.3% to concrete functional improvement, 14.8% to seizure education, 10.1% to psychiatry tools, and 0.5% to Other. Although treatment trials have prioritized reduced event frequency as a primary outcome, people with FS most frequently prioritize goals for functional improvement. Data suggests that rehabilitation metrics of FS treatment outcome may be just as, or more important to adults with FS than what medical providers prioritize for outcome success. Study findings have implications for how to define FS treatment success and suggest equal prioritization of patient-centered goals to medically-defined goals in trial design.

Access or request full text: <https://libkey.io/10.1016/j.yebeh.2024.110141>

8. [Psychoeducation interventions for people with non-epileptic seizures: A scoping review.](#)

Authors: Underwood, Rebecca;Falshaw, Lawson and McFarlane, Fiona

Publication Date: Aug ,2024

Journal: Seizure 120, pp. 15–24

Abstract: BACKGROUND: Cognitive behavioural therapy (CBT) and other psychological approaches have a growing evidence base for treating Non-Epileptic Seizures (NES). However, communication about the diagnosis can be difficult for clinicians and is not always well received. It is thought that Psychoeducation about NES may improve engagement with treatment such as CBT and may contribute to reductions in the frequency of seizures and improvements in health related quality of life. However, psychoeducational components of treatment are often not evaluated in isolation meaning the specific benefit to patients is not currently well understood. **AIMS:** The researchers aimed to examine the outcomes associated with psychoeducational interventions and the content of these programmes for NES. **METHOD:** A scoping review was undertaken across four databases with seventeen eligible studies identified which were charted to analyse the data. **RESULTS:** Findings revealed that components and modalities of interventions varied as did methods of evaluating the interventions. A number of different outcome measures were used and not all studies reported the significance of findings. Results across studies were inconsistent; however, there was a general trend across the studies of symptom reduction and improvement in mental health. **CONCLUSIONS:** Findings illustrate that psychoeducation has potential benefits as an intervention in its own right. However, it may be best placed as a second step in a stepped care model, between initial diagnosis and further psychological treatment. The present literature needs replication and more robust studies for more certain conclusions to be drawn.

Access or request full text: <https://libkey.io/10.1016/j.seizure.2024.05.013>

9. [Changes in the Rate of Emergency Presentation in Patients with Functional Neurological Disorder Attending a Long-term Community Care Program for FND](#)

Author: Gheis, M. and Sekhon, G.

Publication Date: 2023

Publication Details: European Psychiatry, 66, pp.S545–S546. Cambridge University Press.

Abstract: Introduction Patients with Functional Neurological Disorder have a high return rate to Emergency Rooms. Objectives To assess possible changes in Emergency Room presentation



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rates in patients with Functional Neurological Disorder following their attendance of specialized long-term multidisciplinary treatment and rehabilitation program. Methods Seventy-two adult patients with Functional Neurological Disorder were included. These patients were consecutive referrals accepted for ongoing specialist FND treatment. The total number of Emergency Room presentations in the year prior to program admission was obtained from central health records. Patients were provided ongoing treatment for one year, during which the number of ER presentations was monitored. Patients received one or more of the following treatment modalities: psychoeducation, psychological therapy, psychologically informed physical and occupational rehabilitation and psychopharmacological treatments. We subsequently compared high and low emergency service users. Low ER users are those with pre-treatment Emergency Room presentations of less than 3 per year. High emergency service users are those who presented to the emergency room 3 or more times per year before the start of their treatment. Results The mean emergency room presentation per year in the year leading to patients referral was 2.6 per patient, SD 9.4; dropped to 1.2 emergency room presentations per year, with a standard deviation of 4.4 in the year following the start of treatment. The difference was statistically significant ($p=0.02$). There was a strong positive correlation between the pre and post-treatment number of presentations with a Pearson Correlation Coefficient of 0.976 (95% Confidence Interval 0.962 to 0.985). The reduction in emergency room presentations in both high and low-emergency service user groups was significant, with a mean difference of 12 ER visits a year in high-frequency emergency service users ($p=0.04$) and a mean difference of 0.5 visits a year in low-frequency emergency service users ($p < 0.001$). Conclusions Ongoing specialist treatment and rehabilitation of patients with Functional Neurological Disorder significantly reduce their need for emergency room presentation, regardless of the treatment modality. Disclosure of Interest None Declared

Access or request full text: <https://libkey.io/10.1192/j.eurpsy.2023.1152>

10. [How to set up a functional neurological disorder education group](#)

Authors: Stanton, Biba;Segal, Tim;Bradley-Westguard, Abigail and Edwards, Mark

Publication Date: 2023

Journal: Practical Neurology 23(4), pp. 323–326

Abstract: Functional neurological disorder (FND) can be a difficult diagnosis for patients to understand and for clinicians to explain. The postdiagnostic support that patients with other chronic neurological illnesses normally receive is often not available to patients with FND. Here, we share our experience of how to set up an FND education group, including the content, practical aspects of delivering groups and how to avoid potential pitfalls. A group education session can improve understanding of the diagnosis among patients and caregivers, reduce stigma and provide self-management advice. Such groups should be multidisciplinary and include input from service users.

Access or request full text: <https://libkey.io/10.1136/pn-2023-003713>

11. [Improved understanding of non-epileptic seizures and reduced emergency health care usage following a single psychoeducational group for children and their parents.](#)

Authors: Gurcan, Lara;McAllister, Eve;Gilmour, Jane;Green, Dan J.;McFarlane, Fiona A.;Hadji-



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Michael, Maria;Heyman, Isobel and Stark, Daniel

Publication Date: Oct ,2022

Journal: Seizure 101, pp. 1–7

Abstract: RATIONALE: The aim of this study was to evaluate the effectiveness of a three-hour psychoeducation group in improving understanding of non-epileptic seizures (NES), health outcomes and quality of life in young people with NES. **BACKGROUND:** Multi-session psychoeducational groups for adults with NES have reported improved psychosocial functioning and reduced NES compared to those who do not receive psychoeducational interventions. To date there have been no studies in young people examining the effects of a single session of psychoeducation. **METHOD:** 15 young people with NES and their families attended a psychoeducation group within a specialist hospital following a multidisciplinary assessment. The group's effectiveness was evaluated in terms of perceptions of seizure controllability, seizure severity, the management of the condition and health-related quality of life measures. **RESULTS:** A significant decrease in accident and emergency (A&E) visits and ambulance call outs was observed following the psychoeducation group. Young people additionally reported increased knowledge of NES and ability to cope with the condition which was maintained at 6-week follow-up. Significant reduction in NES occurrence or quality of life was not observed. **CONCLUSION:** Significant reduction in A&E attendance and ambulance use was found following group psychoeducation and improvements in psychosocial functioning and knowledge about NES. Group psychoeducation has the potential to increase child and parental understanding of NES and reduce inappropriate healthcare usage.

Access or request full text: <https://libkey.io/10.1016/j.seizure.2022.07.001>

12. [Enhancing the communication of functional neurological disorder diagnosis: a multidisciplinary education session.](#)

Authors: Cope, S. R.;Smith, J. G.;Edwards, M. J.;Holt, K. and Agrawal, N.

Publication Date: 2021

Journal: European Journal of Neurology 28(1), pp. 40–47

Abstract: BACKGROUND AND PURPOSE: Functional neurological disorder (FND) is a common diagnosis within neurology. Effective communication of the diagnosis is known to be an important part of treatment and can result in reduction or cessation of symptoms, as well as decreased healthcare utilisation. A single group education session, facilitated by professionals commonly involved in the care of patients with FND, was developed to further enhance patients' and relatives' understanding and acceptance of diagnosis. **METHODS:** Patients and relatives attending a single education session were asked to complete self-report ratings of understanding of diagnosis, acceptance of diagnosis, belief in treatability and hopefulness regarding recovery, at the beginning and end of the session. Satisfaction data were also collected. **RESULTS:** Data were obtained from 193 patients and 153 relatives. Patients had experienced a median duration of symptoms of 4 years, and more than 80% of patients reported more than one functional neurological symptom. There were significant increases in terms of understanding, acceptance, belief in treatability and hopefulness for patients and relatives. Effect sizes ranged from large for improved understanding of FND to small-to-medium for increased agreement with FND diagnosis. High levels of satisfaction were also reported. **CONCLUSIONS:** A multidisciplinary, single group education session is an effective and acceptable method of increasing understanding and acceptance of an FND diagnosis, even for patients with a long duration of symptoms and high symptom burden. It could help improve



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readiness for further treatment.

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Access or request full text: <https://libkey.io/10.1111/ene.14525>

13. [**Internet-based self-help randomized trial for motor functional neurologic disorder \(SHIFT\).**](#)

Authors: Gelauff, Jeannette M.;Rosmalen, Judith G. M.;Carson, Alan;Dijk, Joke M.;Ekkel, Martijn;Nielsen, Glenn;Stone, Jon and Tijssen, Marina A. J.

Publication Date: 09 29 ,2020

Journal: Neurology 95(13), pp. e1883–e1896

Abstract: OBJECTIVE: To determine whether self-rated health of patients with motor functional neurologic disorder (FND) can be improved by unguided Internet-based self-help and education. **METHODS:** In this nonblinded randomized controlled trial, patients were allocated 1:1 unbiased to an unguided education and self-help website in addition to usual care or usual care only. Patients over 17 years of age with a functional motor symptom that caused distress or disability were included. The primary outcome was self-rated health on the Clinical Global Improvement scale at 3 and 6 months. Secondary outcomes were severity of motor symptoms, other physical and psychiatric symptoms, physical functioning, quality of life, work and social adjustment, illness beliefs, and satisfaction with care. **RESULTS:** A total of 186 patients were randomized, with a follow-up rate of 87% at 6 months. There was no difference in improvement of self-rated health at 3 months (44% vs 40%, $p = 0.899$) or 6 months (42% vs 43%, $p = 0.435$). Secondary outcomes did not differ between groups, with a threshold of p **CONCLUSION:** We found no significant effect of the intervention added to usual care on self-rated health or secondary outcome measures, despite high patient satisfaction with the intervention. These results suggest that online education and nonguided self-help could be valuable additions to stepped care for motor FND, but are not effective treatments as interventions in their own right.

Access or request full text: <https://libkey.io/10.1212/WNL.0000000000010381>

14. [**Report on a psychoeducational intervention for psychogenic non-epileptic seizures in Argentina.**](#)

Authors: Sarudiansky, Mercedes;Pablo Korman, Guido;Lanzillotti, Alejandra Ines;Areco Pico, Maria Marta;Tenreyro, Cristina;Paolasini, Gabriela Valdez;Wolfzun, Camila;Kochen, Silvia;D'Alessio, Luciana and Myers, Lorna

Publication Date: Aug ,2020

Journal: Seizure 80, pp. 270–277

Abstract: PURPOSE: To examine the effects of a three-session psychoeducational intervention on patients diagnosed with psychogenic non-epileptic seizures (PNES) in an Argentinian public hospital. It was hypothesized that patients would experience improvements in their understanding of PNES, illness perception and affective scores, but might not necessarily experience a significant change in post-traumatic and dissociative symptoms and in seizure frequency. **METHODS:** This study included 12 patients (10 women, 2 men) who were invited to participate in a psychoeducational group after receiving a V-EEG confirmed diagnosis of PNES.



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The group consisted of 3 sessions lasting 2h each. Pre and post measures included Psychoeducational Intervention Questionnaire, State-Trait Anxiety Inventory, Beck Depression Inventory-II, Brief Illness Perception Questionnaire, Posttraumatic Stress Disorder Diagnostic Scale 5, Dissociative Experiences Scale (DES-M). **RESULTS:** This psychoeducational intervention produced results that were similar to interventions reported in US and European studies with regard to changes on psychological measures. Moreover, many patients also reported (on the final day of the intervention) a decrease in seizure frequency. All patients reported that participating in the intervention was a positive experience. Also, all but one patient referred that the participation in the group would have a positive impact on their quality of life. **CONCLUSIONS:** Psychoeducational interventions appear to have had positive results in Argentinian patients with PNES. This is initial step in the design of empirically based psychoeducational/supportive initiatives for patients in South America.

Access or request full text: <https://libkey.io/10.1016/j.seizure.2020.04.008>

15. [Psychogenic Nonepileptic Seizures: A Pilot Study of a Brief Educational Intervention](#)

Authors: Thompson, Noreen;Connelly, Lynne;Peltzer, Jill;Nowack, William J.;Hamera, Edna and Hunter, Edward E.

Publication Date: 2013

Journal: Perspectives in Psychiatric Care 49(2), pp. 78–83

Abstract: Purpose Attending to psychological support and education from the time of diagnosis will assist patients in their acceptance of the need for psychological services. Design and Methods An intervention was provided at the time of diagnosis of psychogenic nonepileptic seizures. This randomized control pilot study examined outcomes 6-8 weeks after discharge from the hospital. Findings All subjects in the treatment group made and/or kept an appointment with a psychotherapist or psychiatrist within 6-8 weeks of discharge from the hospital as compared with 50% of the control group. Practice Implications This supportive approach assists patients to accept the functional or nonorganic nature of their symptoms and the need for psychological services.

Access or request full text: <https://libkey.io/10.1111/j.1744-6163.2012.00353.x>

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Patient information resources and sources

[Functional neurological and somatic symptom disorders: patient discussions](#)

Authors: BMJ Best Practice

URL: <https://bestpractice.bmj.com/topics/en-gb/989/patient-discussions>

(log in with NHS OpenAthens if prompted).

[Patient education: Functional neurological symptom disorder \(The Basics\) - UpToDate](#)

Authors: UpToDate

URL: https://www.uptodate.com/contents/functional-neurological-symptom-disorder-the-basics?search=functional%20neurological%20disorder&topicRef=85766&source=see_link

(log in with NHS OpenAthens if prompted).

[FND Guide](#)

[FND Action](#)

[FND Hope UK](#)

[MyFND App](#)





FOR OFFICE USE ONLY

DATABASES AND INFORMATION SOURCES USED					
X	Pubmed		HMIC	X	BMJ Best Practice
X	Medline		Social Policy and Practice	X	Cochrane Library
	Emcare	X	CINAHL		TRIP
	Embase		PsycINFO	X	Grey Literature
	AMED	X	UpToDate	X	Other

PURPOSE OF SEARCH			
	Patient info/health & well being	X	Clinical decision making (inc. patient care)
	Executive Team support	X	Research/Education/Professional development
	Quality Improvement		Primary Care & Neighbourhoods Directorate support
X	KM/Management decision making		Other

USER CATEGORY OF REQUESTOR			
	Medical students		Patients/public
	Nursing/midwifery students		Physician Associates
	Doctor/Psychiatrist		Public Health (Somerset CC)
X	Nurses/Midwives		Other
	Allied Health professionals		

HAS PERMISSION TO SHARE THE RESULTS BEEN OBTAINED FROM THE REQUESTOR?			
X	YES - share		NO – do not share





KEY WORDS/SEARCH STRATEGY INCLUDING MESH HEADINGS	LIMITS USED
<p>Ovid MEDLINE(R) ALL <1946 to August 19, 2025></p> <ol style="list-style-type: none">1 (functional neurologic* disorder* or FND or functional seizures or non-epileptic seizures or conversion disorder*).mp. 58592 Conversion disorders/ 32623 1 or 2 58594 (education or psychoeducation).mp. 11884635 Patient Education as Topic/ 910126 4 or 5 11884637 3 and 6 2108 limit 7 to yr="2010 -Current" 174	

