



✚ FND SUB-TYPES

It's common for individuals with FND to experience multiple sets of symptoms (known as sub-types), or to shift between sub-types over time.

To better understand FND's clinical presentations and underlying mechanisms, several sub-types have been identified:



Functional movement disorders – e.g., difficulty walking, tremors, shakes, jerks, spasms, or paralysis



Sensory symptoms – e.g., heightened sensitivity to light, sound, or touch; numbness; tingling; pain; visual and hearing disturbances



Functional seizures (PNES) – non-epileptic seizures, blackouts, or sudden drop attacks



Functional cognitive disorder – e.g., difficulties with memory, learning, decision-making, emotional regulation, or sense of agency



Persistent Postural-Perceptual Dizziness (PPPD) – chronic balance problems that worsen when upright and improve when lying down

**THESE CORE
SYMPTOMS DEFINE
FUNCTIONAL
NEUROLOGICAL
DISORDER**





✚ FND TREATMENT TEAM APPROACH

Treatment typically involves a team approach, because FND affects the body, brain, and emotions. **Co-existing psychological conditions and other comorbidities, should be treated alongside FND to support whole-body healing.**

Key team members working together may include:



Neurologist explains the diagnosis clearly & coordinates care



Psychiatrist/Psychologist – addresses stress, trauma, or emotional patterns and regulation through different coping techniques



Physiotherapist – retrains movement and body awareness



Occupational Therapist – supports daily functioning and energy management



Speech & Language Therapist – assists with speech, communication, or swallowing difficulties

**FND SYMPTOMS
ARE REAL &
DEBILITATING**

