DIAGNOSIS	DEFINITION	NEUROPLASTIC CONTRIBUTION
Acid Reflux (see GERD)	x	x
Acne	A very common inflammatory condition presenting as blackheads, pimples and cysts on the face and trunk of teenagers and younger adults. Significant disease may cause scarring.	Acne is caused by hormones, genetics and diet. 'Stress' can be a major factor, and patients should be educated about neuroplastic symptoms (NS) as a possible significant trigger.
Addison's Disease	See Adrenal Insufficiency	x
ADHD	See Attention Deficit Hyperactivity Disorder	x
Adhesions (Pelvic or Abdominal)	Bands of scar-like tissue commonly found in the abdomen or pelvis, particularly after surgery or infection. Normally, internal tissues and organs have slippery surfaces so they can shift easily as the body moves. Adhesions cause tissues and organs to stick together or they might connect the loops of the intestines to each other, to nearby organs, or to the wall of the abdomen or pelvis.	Scar tissue does not contain nerves. Symptoms from adhesions therefore can only develop if an organ or its circulation is compromised by the adhesion which then causes acute (short term) symptoms but not usually chronic (long term) symptoms. Therefore, most chronic symptoms attributed to adhesions likely result from neuroplastic symptoms (NS).
Adhesive Capsulitis	See Shoulder, Frozen	x
Adrenal fatigue	The adrenals are two small glands that sit on top of the kidneys and produce several hormones, among them cortisol. Like other hormones, cortisol is a relatively small molecule that circulates in the body and has effects on the physiology of other organs. The adrenal fatigue theory, which is not an accepted medical diagnosis, suggests that prolonged exposure to stress could drain the adrenals leading to a low cortisol state that would cause brain fog, low energy, depressive mood, salt and sweet cravings, lightheadedness, and other vague symptoms.	There is no evidence supporting the adrenal fatigue theory so neuroplastic symptoms (NS) are the likely cause of symptoms attributed to this condition, particularly when Adrenal Insufficiency (see below) is ruled out.
Adrenal Insufficiency	Also called Addison's Disease. Diagnosed by a blood test documenting that the adrenal glands are not producing sufficient amounts of the hormone cortisol and sometimes aldosterone, too. Symptoms tend to be non-specific and include fatigue, nausea, darkening of the skin, abdominal discomfort and dizziness upon standing. Treatment involves taking hormones to replace those not produced by the adrenal glands.	Symptoms respond well to treatment. Symptoms that remain after treatment should be assessed for neuroplastic symptoms (NS).
Algodystrophy (see Pain, Complex Regional Pain Syndrome)	x	x

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Allergy, Environmental	Environmental allergies involve an immune system overreaction to substances (the allergens) that exist in our everyday surroundings, including home, work, and the outdoors. This allergic reaction occurs when the immune system produces antibodies. These are proteins that stick to the allergen to facilitate clearing it from the body. This occurs even though the allergen itself is not a threat. The most common environmental allergens are pollen, dust, pet dander, mold, and cockroaches. Allergy sufferers report a variety of symptoms, including: Sneezing, Coughing, Runny nose, Nasal congestion, Itchy watery eyes, Fatigue, Headaches, Wheezing, Dark under-eye circles and Hives.	When the nature of the allergen is not clear, the reaction to the allergen is not consistent, or the response to treatment is not as expected then neuroplastic symptoms (NS) will be a common cause of the patient's symptoms and they should be evaluated for it.
Allergy, Food	Food allergies involve an immune system overreaction to substances (the allergens) found in food. This allergic reaction occurs when the immune system produces antibodies. These are proteins that stick to the allergen to facilitate clearing it from the body. This occurs even though the allergen itself is not a threat. In some cases the allergic reaction can damage the lining of the gut, limiting the ability to absorb nutrients. If sufficiently severe, this can result in diarrnea (the most common symptom of a food allergy) and weight loss.	Most people who believe they have a food allergy have experienced gastrointestinal (GI) symptoms after ingesting the food and, incorrectly, blamed the food. More often what is happening is that the GI symptoms are due to neuroplastic symptoms (NS) and the perceived link to the food is a coincidence. This is particularly likely if the reaction to the food is inconsistent, ie occurs only some of the times that the food is ingested but not every time. neuroplastic symptoms (NS) are also more likely in people who have had a negative test for celiac disease (allergy to gluten) such as a TTG blood test or a tissue sample (biopsy) from the small intestine. Assessment for neuroplastic symptoms (NS) will be helpful to most people who believe they have a food allergy.
Allergy: Mold, Pollen or Seasonal	When people allergic to mold, pollen or seasonally released compounds (the allergens) are exposed (at work, home, or outdoors) it causes the immune system to react and can cause cough, itchy watery eyes, and hives. People who have asthma may experience wheezing and difficulty breathing. Treatment involves avoiding exposure to the allergens. Medications such as antihistamines, nasal sprays, and allergy shots can help relieve symptoms and manage asthma.	When the reaction to the allergen is not consistent or the response to treatment is not as expected then the patient should be evaluated for neuroplastic symptoms (NS).
Allodynia	The experience of pain from stimuli that aren't normally painful. People with migraine might describe this experience by saying, “My hair hurts.” Brushing the hair may produce pain, as will other simple activities such as washing your face, laying your head on a pillow, or a gentle tap on the wrist.	neuroplastic symptoms (NS) are commonly found in people with this condition.

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Alopecia areata	Alopecia areata usually presents as sudden patches of hair loss in the scalp or beard, most commonly in younger adults. These usually resolve after cortisone injections. Rarer cases can affect the entire scalp or body.	AA has a partial genetic/autoimmune etiology. Patients with AA have a higher risk of other autoimmune diseases. However, AA also has a strong neuroplastic symptoms (NS) component. A controlled study even showed that AA patients had a higher incidence of childhood stressors.
Amplified Musculoskeletal Pain Syndrome (AMPS)	Amplified musculoskeletal pain syndrome (AMPS) is a diagnosis made most often in children with intense persistent or intermittent pain anywhere in the body (localized or widespread). Children may develop AMPS after an injury, illness, or psychological stress though the pain is typically more intense and/or longlasting than expected for these situations. When the pain is widespread it has been called juvenile fibromyalgia. When there are autonomic changes involving color and temperature – for example, cold and blue – as well as swelling and sweating this can be diagnosed as Complex Regional Pain Syndrome (see Pain, Complex Regional Pain Syndrome).	Evaluation for neuroplastic symptoms (NS) are essential as part of a complete evaluation.
ANA blood test, abnormal	Anti-Nuclear Antibody test. Antibodies are usually part of our defense against foreign proteins such as those found in bacteria or viruses. However, this antibody is directed against the nucleus of the human cell and is therefore classified as an auto-antibody.	A positive ANA test is more meaningful in patients who have clinical evidence of an autoimmune disease. In autoimmune disease the body's immune system is attacking elements of our own body. Examples include lupus, rheumatoid arthritis and multiple sclerosis. If the patient's only symptom is pain, however, then a positive ANA test is less likely to be meaningful and neuroplastic symptoms (NS) are more likely to explain the pain than an autoimmune disease.
Ankle Impingement, Anterior or Posterior	Ankle impingement is a condition that causes a painful limitation of the range of motion due to a soft-tissue or bony abnormality. There is trapping of the soft tissues upon bending the ankle. In most cases, the impingement symptoms follow acute trauma such as sprains or they occur after small injuries that accumulate over time from running and jumping. Impingement is divided into two main types: Anterior occurs in the front and causes pain over the front-outside of the ankle that is reproduced with bending the ankle up. Posterior occurs in the back part of the ankle and is common in ballet dancers but can also be seen in runners and soccer players. These patients will usually complain of pain when pointing the toe down.	Not due to neuroplastic symptoms (NS). However, if symptoms are not typical or the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) as a contributing factor is reasonable.

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Ankylosing Spondylitis	An inflammatory (characterized by pain, swelling or redness) arthritis (joint inflammation) affecting the spine and large joints. Symptoms typically appear in early adulthood and include reduced flexibility in the spine. This reduced flexibility eventually results in a hunched-forward posture. Pain in the back and other large joints is also common.	Not caused by neuroplastic symptoms (NS) but if the symptoms, the clinical course over time or the response to treatment are not as expected then assessment for neuroplastic symptoms (NS) are reasonable.
Anorexia Nervosa	An eating disorder in which patients obsess about their weight and what they eat. It is characterized by a distorted body image, with an unwarranted fear of being overweight. Symptoms include trying to maintain a below-normal weight through starvation or too much exercise. Can be life-threatening.	Psycho-social issues commonly found in neuroplastic symptoms (NS) patients are also common in this condition and so should be assessed and treated.
Anxiety, Generalized Anxiety Disorder	Excessive anxiety or worry on most days for at least 6 months. This can be about any of a variety of issues including personal health, work, social interactions, and everyday life circumstances. The fear and anxiety can cause significant problems in areas such as social interactions, school, and work. Generalized anxiety disorder symptoms include: feeling restless, wound-up, or on-edge; being easily fatigued; difficulty concentrating; mind going blank; being irritable, having muscle tension, difficulty controlling feelings of worry and having sleep problems such as difficulty falling or staying asleep, restlessness or unsatisfying sleep.	Psycho-social issues commonly found in neuroplastic symptoms (NS) patients are also common in this condition and so should be assessed.
Arthritis	Inflammation (swelling and tenderness) of one or more joints, causing pain and stiffness that can worsen with age.	Not caused by neuroplastic symptoms (NS) but in some patients neuroplastic symptoms (NS) contributes to their symptoms. This is particularly likely if the course of the condition over time or the response to treatment is not typical.
Arthritis, Osteoarthritis	Sometimes called "wear and tear arthritis", osteoarthritis (OA) is the most common type of arthritis (joint inflammation). When the smooth cushion between bones (cartilage) breaks down, joints can get painful, swollen and hard to move. OA can affect any joint, but it occurs most often in hands, knees, hips, lower back and neck. Sometimes causes no pain at all. In other patients, there is a lot of pain.	Not caused by neuroplastic symptoms (NS) but in some patients neuroplastic symptoms (NS) contributes to their symptoms. This is particularly likely if the course of the condition over time or the response to treatment is not typical.

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Arthritis, Psoriatic	Psoriatic arthritis is a type of joint inflammation (swelling and tenderness) associated with the skin disease psoriasis. Symptoms include joint pain, stiffness, and swelling, which may flare and subside. Many people with the condition are affected by increased stiffness in the morning. Even mild skin psoriasis can be associated with a significant degree of arthritis.	Not caused by neuroplastic symptoms (NS) but in some patients neuroplastic symptoms (NS) contributes to their symptoms. This is particularly likely if the course of the condition over time or the response to treatment is not typical.
Arthritis, Rheumatoid	In rheumatoid arthritis, the body's immune system attacks its own tissue, including joints. In severe cases, it attacks internal organs. Rheumatoid arthritis affects joint linings, causing painful swelling. Over long periods of time, the inflammation associated with rheumatoid arthritis can cause bone erosion and joint deformity.	Not caused by neuroplastic symptoms (NS) but in some patients neuroplastic symptoms (NS) contributes to their symptoms. This is particularly likely if the course of the condition over time or the response to treatment is not typical.
Arthritis, Seronegative	Arthritis with negative blood tests for rheumatoid factor (RF) and anticitrullinated protein antibodies (ACPA). Over time this condition can evolve into any of a large number of different forms of arthritis but usually follows a milder course than in people with positive blood tests for RF or ACPA.	Not caused by neuroplastic symptoms (NS) but in some patients neuroplastic symptoms (NS) contributes to their symptoms. This is particularly likely if the course of the condition over time or the response to treatment is not typical.
Arthritis, Spondyloarthritis	Arthritis means inflammation of a joint. Spondyloarthritis means inflammation of the joints between bones of the spine (the vertebrae).	Not caused by neuroplastic symptoms (NS) but in some patients neuroplastic symptoms (NS) contributes to symptoms. This is particularly likely if the course of the condition over time or the response to treatment is not typical. An extra challenge here is that the diagnosis of spondyloarthritis is sometimes made based upon loose criteria and not confirmed (or ruled out) with blood tests, xrays, or MRI of the sacrum to define the process.
Arthrofibrosis	A buildup of scar tissue around a joint, usually after a traumatic injury or surgical procedure. It's especially common in the knee. Can be debilitating, limit the joint's range of motion and cause substantial pain.	Not caused by neuroplastic symptoms (NS) but if the symptoms, the course of the condition over time or the response to treatment are atypical then neuroplastic symptoms (NS) should be considered as a potential contributing factor.
Asthma	A condition marked by spasms in the bronchi (tubular air passages) of the lungs. The resulting narrowing limits airflow and causes difficulty breathing. It usually results from an allergic reaction.	Not caused by neuroplastic symptoms (NS) but in some patients neuroplastic symptoms (NS) contributes to symptoms of difficulty in breathing. This is particularly likely if the course of the condition over time or the response to treatment is not typical.

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Attention Deficit Hyperactivity Disorder	Attention-deficit/hyperactivity disorder (ADHD) is one of the most common mental disorders affecting children. ADHD also affects many adults. Symptoms of ADHD include inattention (not being able to keep focus), hyperactivity (excess movement that is not fitting to the setting) and impulsivity (hasty acts that occur in the moment without thought).	Psycho-social issues commonly found in neuroplastic symptoms (NS) patients are also common in this condition and so should be assessed.
Atypical	An adjective that means symptoms do not match a common clinical pattern.	neuroplastic symptoms (NS) are often, though not always, the explanation for symptoms with this label and so should be assessed.
Autoimmune Disorders	Any of a variety of diseases in which the body's immune system attacks healthy cells. Examples include rheumatoid arthritis, systemic lupus erythematosus, inflammatory bowel disease, multiple sclerosis, diabetes mellitus type 1, Guillain-Barre syndrome and psoriasis.	These conditions are not due to neuroplastic symptoms (NS). However, in some patients neuroplastic symptoms (NS) can contribute to their symptoms so assessment should be done, particularly if symptoms are not typical for the disease, or the clinical course over time is not usual or the response to treatment is less than expected.
Babesiosis	Babesia is a tiny parasite that infects red blood cells. Infection with Babesia is called babesiosis. The parasitic infection is usually transmitted by a bite from the same tick that carries Lyme disease.	Diagnosis should be confirmed by an experienced reference laborotory or the Center for Disease Control. Effective treatment is available so this infection is not a cause of long-term (chronic) symptoms. Long-term symptoms attributed to "chronic babesiosis" are therefore most likely due to neuroplastic symptoms (NS).
Baker's Cyst	A fluid-filled cyst that causes a bulge and a feeling of tightness behind the knee. The pain can get worse when the patient fully flexes or extends the knee or when the patient's leg is active.	The actual swelling is a structural issue. In some patients, however, the swelling is minimal and the pain can be neuroplastic symptoms (NS). This is particularly likely if the course of the condition over time or the response to treatment is not typical.
Bell's Palsy	A condition that causes a temporary weakness or paralysis of the muscles in the face. It can occur when the nerve that controls the facial muscles becomes inflamed, swollen, or compressed. The condition causes one side of the face to droop or become stiff. Bell's palsy usually resolves on its own within six months.	In some patients neuroplastic symptoms (NS) contributes to their symptoms. This is particularly likely if the course of the condition over time or the response to treatment is not typical.
Benign paroxysmal positional vertigo	see Vertigo, Benign paroxysmal positional	x

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Benzodiazepine, Protracted Withdrawal	This applies to patients who have stopped taking benzodiazepine medication after extended (months or years) use. The term refers to symptoms that persist for longer than a week or two after the medication is stopped.	For some chronic benzodiazepine users, withdrawal can be a long, drawn-out process. A sizable minority, perhaps 10% to 15%, develop a post-withdrawal syndrome, which may linger for months or even years. This syndrome is clearly not a disease entity; it probably represents an amalgam of pharmacologic and psychological factors directly and indirectly related to benzodiazepine use. The syndrome includes (1) pharmacologic withdrawal symptoms involving the slow reversal of receptor changes directly induced in the brain by benzodiazepines and (2) psychological symptoms resulting indirectly from long-term benzodiazepine use, including exposure of poor stress-coping abilities and other personal difficulties. These symptoms merge into a complex clinical picture that may be further complicated by the reappearance of underlying anxiety or depression and possibly also by ill-understood long-term neurological effects of benzodiazepines. (See Ashton H. Protracted Withdrawal From Benzodiazepines: The Post-Withdrawal Syndrome. Psychiatric Annals. 1995;25(3):174-179 https://doi.org/10.3928/0048-5713-19950301-11) Issues common in patients with neuroplastic symptoms (NS) are likely to be common in people with this diagnosis so neuroplastic symptoms (NS) assessment should be done.
Bertolotti's syndrome	see Lumbosacral transitional vertebra	x
Binocular Vision Disorder	The eyes are unable to align properly causing blurriness and double-vision. The eye muscles can correct for the misalignment, but this creates strain on and fatigue of those muscles. Other symptoms include light-headedness, severe headaches, sinus problems, nausea, poor depth perception, unsteadiness while walking, light sensitivity, neck and shoulder discomfort from twisting the body to focus, reading problems, car sickness and anxiety in large spaces like malls or when driving.	If no organ/structure explanation is found or response to treatment is insufficient then an evaluation for neuroplastic symptoms (NS) are appropriate and likely to be helpful.

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Bipolar Disorder	A psychological disorder associated with episodes of mood swings ranging from depressive lows to manic highs. Manic episodes may include symptoms such as high energy, reduced need for sleep, and loss of touch with reality. Depressive episodes may include symptoms such as low energy, low motivation, and loss of interest in daily activities. Mood episodes last days to months at a time and may also be associated with suicidal thoughts.	Psychosocial issues often found in neuroplastic symptoms (NS) patients can be a contributing factor.
Bladder spasms	The sensation of having a full bladder occurs suddenly and often severely. The spasm itself is the sudden, involuntary squeezing of the bladder muscle. The spasm can force urine from the bladder, causing leakage. When this happens, the condition is called urge incontinence or overactive bladder. The spasms are usually described as a cramping pain and sometimes as a burning sensation. Some women with severe bladder spasms compared the muscle contractions to severe menstrual cramps and even labor pains experienced during childbirth.	If no organ/structure explanation is found or response to treatment is insufficient then an evaluation for neuroplastic symptoms (NS) are appropriate and likely to be helpful.
Bladder, Overactive	Causes a frequent and sudden urge to urinate that may be difficult to control. Patients may feel a need to pass urine many times during the day and night, and may also experience unintentional loss of urine (urgency incontinence).	neuroplastic symptoms (NS) are often, though not always, a contributing factor and so should be assessed, particularly when no organ disease or structural abnormality accounts for the symptoms.
Bloating, Abdominal	A sensation of swelling in the abdomen often caused by excess air ingestion, gas production or disturbances in the movement of the muscles of the digestive system. Can cause pain, discomfort or a “stuffed” feeling. Bloating can have causes that aren't due to underlying disease. Examples include swallowing air when eating (this can happen if talking and eating simultaneously), drinking carbonated beverages, eating a large meal, menstruation, constipation, gas production by intestinal bacteria or as a manifestation of Irritable Bowel Syndrome.	If diagnostic evaluation does not reveal a cause and/or treatment measures do not have the expected response then evaluation for neuroplastic symptoms (NS) should be done.

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Blood Pressure, High	When the pressure of the blood inside the arteries (vessels that carry blood from the heart to the tissues) is consistently too high. Blood pressure is measured both when the heart is contracting (systolic blood pressure) and when the heart is relaxed (diastolic blood pressure). High blood pressure is usually diagnosed when these pressures exceed 130-140 and 80-90 (mm Hg) respectively. Cause may be multifactorial including genetics, dietary and salt intake, weight, and activity level. Medication should be used if advised by a doctor. Many patients who lose weight, exercise, and meditate find they can reduce or in some cases stop medication under medical supervision.	Usually causes no symptoms in the short term but if very high (usually greater than 180/120) can lead to headaches or dizziness, visual changes or even cause the heart to be unable to pump sufficient blood to meet the needs of the body. This latter condition can cause shortness of breath or chest pain. In some cases psychosocial stress or an anxiety disorder can contribute to high blood pressure.
Blood Pressure, Low	When the pressure of the blood inside the arteries (vessels that carry blood from the heart to the tissues) is too low. Blood pressure is measured both when the heart is contracting (systolic blood pressure) and when the heart is relaxed (diastolic). Low blood pressure is usually diagnosed when these pressures cause symptoms or are lower than 90 and 60 (mm Hg) respectively.	Can result from a low level of body fluids (dehydration), a medication side effect or internal/external bleeding. Symptoms include lightheadedness and fainting. If those symptoms are present and no cause is found by diagnostic evaluation then assessment for neuroplastic symptoms (NS) should be done.
Blue Light Entoptic Phenomenon	The appearance of tiny bright dots moving quickly along squiggly lines in the visual field, especially when looking into bright blue light such as the sky. These lights are caused by white blood cells coursing through the tiny blood vessels (capillaries) in the back of the eyeball (the retina).	This is a normal phenomenon but if the condition is atypical in some way then neuroplastic symptoms (NS) might be contributing.
Blurred Vision	Loss of focus in the visual field.	When diagnostic evaluation reveals no eye disease then causes to be considered include eye rubbing, dry eyes, crying, aging, a bad eyeglass prescription or neuroplastic symptoms (NS).
Borreliosis	A tick-borne illness caused by the bacterium Borrelia burgdorferi and also called Lyme disease.	Treatable with antibiotics. Symptoms that persist after antibiotic treatment are most commonly due to neuroplastic symptoms (NS).
Brain Fog	Not a medical diagnosis but rather a term used for certain symptoms that can affect the ability to think including feeling confused or disorganized, finding it difficult to focus or put thoughts into words.	If no organ disease or structural abnormality is found to explain these symptoms then neuroplastic symptoms (NS) are a likely cause.
Bruxism	Excessive grinding of the teeth or clenching of the jaw. This condition can affect adults and children, and can occur during day or night.	There is often a link to anxiety. Evaluation for neuroplastic symptoms (NS) are recommended.

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Bulimia	An emotional disorder involving distortion of body image and an obsessive desire to lose weight, in which bouts of extreme overeating are followed by shame or depression and self-induced vomiting, purging (with laxatives or enemas), or fasting.	Many of the psychosocial stresses common in neuroplastic symptoms (NS) are also found in people with Bulimia.
Burning Mouth Syndrome	A burning sensation in the mouth that can affect the tongue and other parts of the mouth. It appears suddenly and can be severe, as if the mouth was scalded. In addition to a burning sensation, symptoms may include a dry mouth with increased thirst, loss of taste, or a bitter or metallic taste. Drinking more fluids and avoiding tobacco, alcohol, and spicy foods can help control pain.	If no organ/structure explanation is found or response to treatment is insufficient then an evaluation for neuroplastic symptoms (NS) are appropriate and likely to be helpful.
Bursitis	Inflammation of the fluid-filled pads (bursae) that act as cushions at the joints. Bursitis occurs most often at joints that perform frequent repetitive motion including the knees, shoulders, elbows, and hips. Symptoms include pain, swelling, and stiffness.Treatment includes rest, ice, and pain relievers. Surgery is rarely needed.	If no organ/structure explanation is found or response to treatment is insufficient then an evaluation for neuroplastic symptoms (NS) are appropriate and likely to be helpful.
CAM morphology (in the hip)	The top of the thigh bone (femur) has a ball-shaped area that fits into the socket (acetabulum) of the hip. This condition occurs when the ball-shaped area has an abnormal bump or ridge. With continued contact between the abnormal femur and the acetabulum, there is progressive destruction of cartilage (firm but flexible connective tissue that lines the joint), which ultimately results in swelling, pain and stiffness (osteoarthritis).	If the structural abnormality does not fully explain the patient's symptoms or response to treatment is atypical or insufficient then an evaluation for neuroplastic symptoms (NS) are appropriate and likely to be helpful.
Cancer	A group of diseases involving abnormal cell multiplication with the potential to directly invade or spread to distant parts of the body. These are also known as malignant tumors. This contrasts with benign tumors, which can enlarge but do not invade or spread to distant locations.	Not caused by neuroplastic symptoms (NS) but neuroplastic symptoms (NS) should be evaluated when symptoms are not fully accounted for by the cancer.
Candida, Systemic or Overgrowth	A condition where Candida, a yeast (fungus), invades the bloodstream and spreads throughout the body usually causing fever, chills and potentially life threatening complications. Usually associated with a compromised immune system and most patients need hospital care.	Some clinicians have incorrectly attributed long-term symptoms to this condition in patients outside the hospital with no fever or chills. Diagnostic evaluation of these patients using reputable clinical labs is usually negative and neuroplastic symptoms (NS) are the most likely explanation for their symptoms.

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Canker Sores	A painful small sore in the mouth that can make it hard to eat and talk. Can result after minor injury to the soft tissue of the mouth. Most canker sores clear on their own in one to two weeks.	Usually not linked to neuroplastic symptoms (NS) but if these are frequent, not linked to oral trauma or not responding to treatment then assessment for neuroplastic symptoms (NS) are reasonable.
Capsulitis, Toe	Ligaments surrounding the joint at the base of a toe (usually the 2nd) form a capsule, which helps the joint to function properly. Capsulitis is a condition in which these ligaments have become inflamed.	If this structural abnormality does not fully explain the patient's symptoms or response to treatment is atypical or insufficient then an evaluation for neuroplastic symptoms (NS) are appropriate and likely to be helpful.
Carpal Tunnel Syndrome	Also called median nerve compression, this can cause pain, numbness, tingling, or weakness in the thumb, index and middle fingers, half of the ring finger (adjacent to the middle finger) and the adjacent palm. The median nerve runs the length of the arm, goes through a passage in the wrist called the carpal tunnel and ends in the affected parts of the hand. Symptoms result from compression of this nerve where it passes through the carpal tunnel.	If this structural abnormality does not fully explain the patient's symptoms or response to treatment is atypical or insufficient then an evaluation for neuroplastic symptoms (NS) are appropriate and likely to be helpful.
Celiac Disease	An intestinal immune reaction to eating gluten. Gluten is a protein found in wheat, barley and rye. The reaction creates inflammation that damages the small intestine's lining, leading to medical complications such as limiting absorption of some nutrients (malabsorption). The classic symptom is diarrhea. Other symptoms include bloating, gas, fatigue, low blood count (anemia), thinning bones (osteoporosis) and loss of weight. Diagnosis is usually reliable either by TTG blood test or by obtaining a sample of tissue (biopsy) from the lining of the small intestine. However, these tests can return to normal if the patient has carefully avoided gluten for at least several months.	neuroplastic symptoms (NS) evaluation is appropriate in patients with confirmed Celiac Disease if their symptoms are not typical or if their response to treatment is not as expected. In addition, some patients who test negative for Celiac Disease believe they are sensitive to gluten. Their symptoms subjectively improve when they avoid gluten although gluten is present in many food products so some patients might be ingesting it more than they recognize. These patients also should be evaluated for neuroplastic symptoms (NS).
Central Sensitization Syndrome	Increased responsiveness of pain (nociceptive) nerves in the central (brain and spinal cord) nervous system to signals that are normal or below the threshold that would normally be sensed as pain.	This is a synonym for neuroplastic symptoms (NS).
Cerebral amyloid angiopathy	Proteins called amyloid build up on the walls of the arteries in the brain which increases the risk for stroke caused by bleeding and dementia.	Not associated with neuroplastic symptoms (NS).

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Cerebrospinal Venous Insufficiency	A term invented by Italian researcher Paolo Zamboni in 2008 to describe compromised flow of blood in the veins draining the central nervous system that might contribute to development of multiple sclerosis. The US Food and Drug Administration concluded in 2012 that is not clear if CSVI exists as a clinical entity and that treatments may cause harm.	This diagnosis lacks scientific support. Symptoms in patients labeled with this diagnosis are more likely due to neuroplastic symptoms (NS).
Cervical Dystonia	Also called spasmodic torticollis, this is a painful condition in which the neck muscles contract involuntarily, causing the head to twist or turn to one side. Cervical dystonia can also cause the head to uncontrollably tilt forward or backward. Causes include neurological disorders (such as Parkinson's), medication that blocks dopamine (such as some antipsychotics), injury to the head, neck, or shoulders or a genetic mutation, since 10 to 25 percent of people with cervical dystonia may have a family history of the disease.	If none of the known causes is present, if the symptoms are atypical or if response to treatment is not as expected then evaluation for neuroplastic symptoms (NS) are likely to be helpful.
Chemical Sensitivity, Multiple	Also known as idiopathic environmental intolerances (IEI), this is an unvalidated and controversial diagnosis characterized by chronic symptoms attributed to exposure to low levels of commonly used chemicals. Symptoms are typically vague and non-specific. They might include fatigue, headaches, nausea, and dizziness. This is not recognized as an organic illness. Clinical trials show that people with MCS react as often and as strongly to placebos as they do to chemical stimuli; the existence and severity of symptoms is seemingly related to perception that a chemical stimulus is present.	Symptoms attributed to this condition are more likely due to neuroplastic symptoms (NS).
Chondrocalcinosis	Also known as Pseudogout or calcium pyrophosphate deposition (Cneuroplastic symptoms (NS)) disease. A condition in which calcium pyrophosphate crystals build up in the joints. The deposits cause irritation that lead to inflammation and cartilage damage. The symptoms can be similar to gout and other types of arthritis.	Not linked to neuroplastic symptoms (NS) but, if this structural abnormality does not fully explain the patient's symptoms or response to treatment is atypical or insufficient then an evaluation for neuroplastic symptoms (NS) are appropriate and likely to be helpful.
Chondromalacia patellae	Also known as “runner's knee,” the cartilage (tough, rubbery tissue) on the undersurface of the patella (kneecap) deteriorates and softens. Causes include trauma/injury or dislocation of the kneecap or muscle imbalance around the knee. This condition is common among young, athletic individuals, but may also occur in older adults who have arthritis of the knee.	Not linked to neuroplastic symptoms (NS) but, if this structural abnormality does not fully explain the patient's symptoms or response to treatment is atypical or insufficient then an evaluation for neuroplastic symptoms (NS) are appropriate and likely to be helpful.

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Chronic Fatigue Syndrome	A disease characterized by profound fatigue, sleep abnormalities, cognitive difficulty, pain, and other symptoms that are made worse by exertion. Symptoms persist for at least six months and are not explained by an underlying medical condition. Also known as Systemic Exertion Intolerance Disorder and Myalgic Encephalitis.	Evaluation for and treatment of neuroplastic symptoms (NS) can alleviate symptoms in many of these patients but this condition might have more than one cause.
CIRS – Chronic Inflammatory Response Syndrome	A diagnosis with limited scientific support that attributes symptoms in any of multiple organs to exposure to biotoxins such as from mold.	Evaluation for and treatment of neuroplastic symptoms (NS) can alleviate symptoms in many of these patients.
Cluneal Nerve Entrapment	The superior cluneal nerves pass over the top of the hip bone (crest of the ilium) to the skin of the upper part of the buttocks. If the nerve is compressed against the ilium, symptoms can include pain in the low back which may radiate to the leg on the same side, tenderness at the iliac crest rim just above the dimple at the buttock and numbness of the buttock just below the iliac crest. The treatment includes elimination of inappropriate use such as forward bending or acute twisting of the low back, anti-inflammatory medication (such as ibuprofen) and local cortisone injection. Surgical treatment by nerve decompression is used for cases of severe pain with failure of conservative treatment.	Assessment for neuroplastic symptoms (NS) should be done when the symptoms, clinical course over time or response to treatment are not typical or not as expected.
Coccydinia	Tailbone pain can occur after an acute injury, but chronic tailbone pain is rarely due to any sort of ongoing injury.	As long as routine evaluation finds no acute injury, tumor, infection, or fracture, a diagnosis of neuroplastic symptoms (NS) are most likely.
Coccyx, Dislocated	A rare condition in which the tip of the tailbone (the coccyx) is separated from the remainder of the tailbone (the sacrum). Usually caused by physical trauma.	Usually will heal on its own in a month (if the coccyx is only bruised) or up to three months if the coccyx is fractured. If symptoms persist for longer than this evaluation for neuroplastic symptoms (NS) are reasonable.
Coccyx, Hypermobile	The coccyx is the lower tip of the tailbone and pain in that location is often attributed to its being excessively mobile.	Routine assessment for neuroplastic symptoms (NS) are recommended.
Colitis, Collagenous	A subtype of microscopic colitis (inflammation of the large intestine) in which an abnormal layer of connective tissue (made of the protein collagen) is present in the lining of the large intestine.	Not caused by neuroplastic symptoms (NS) but neuroplastic symptoms (NS) can sometimes be present simultaneously. Assessment for neuroplastic symptoms (NS) should be done when the symptoms, clinical course over time or response to treatment are not typical or not as expected for microscopic colitis alone.

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Colitis, Lymphocytic	A subtype of microscopic colitis (inflammation of the large intestine) in which white blood cells (lymphocytes) are increased in the lining of the large intestine.	Not caused by neuroplastic symptoms (NS) but neuroplastic symptoms (NS) can sometimes be present simultaneously. Assessment for neuroplastic symptoms (NS) should be done when the symptoms, clinical course over time or response to treatment are not typical or not as expected for microscopic colitis alone.
Colitis, Microscopic	An inflammation of the large intestine (colon) that causes persistent watery diarrhea. The disorder gets its name from the fact that it's necessary to examine colon tissue under a microscope to identify it, since the tissue may appear normal during a colonoscopy or flexible sigmoidoscopy.	Not caused by neuroplastic symptoms (NS) but neuroplastic symptoms (NS) can sometimes be present simultaneously. Assessment for neuroplastic symptoms (NS) should be done when the symptoms, clinical course over time or response to treatment are not typical or not as expected for microscopic colitis alone.
Colitis, Ulcerative	A disease that causes visible inflammation of the mucus membrane that lines the large intestine.	Not caused by neuroplastic symptoms (NS) but neuroplastic symptoms (NS) can sometimes be present simultaneously. Assessment for neuroplastic symptoms (NS) should be done when the symptoms, clinical course over time or response to treatment are not typical or not as expected for ulcerative colitis alone.
Computer Vision Syndrome	Also referred to as digital eye strain, describes a group of eye- and vision-related problems that result from prolonged computer, tablet, e-reader and cell phone use. Many individuals experience eye discomfort and vision problems when viewing digital screens for extended periods.	Not due to neuroplastic symptoms (NS). However, if symptoms are not typical or the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) as a contributing factor is reasonable.
Constipation	Occurs when bowel movements become less frequent (generally fewer than one every three days) and stools become difficult to pass. It happens most often due to changes in diet or routine, or due to inadequate intake of fiber.	neuroplastic symptoms (NS) are a common cause of constipation.
Cornea Pain, Neuropathic	The cornea is the transparent (clear) part of the eye that covers the front portion of the eye. It covers the pupil (the opening at the center of the eye), iris (the colored part of the eye), and anterior chamber (the fluid-filled inside of the eye). It is highly sensitive due to a dense layer of nerve fibers.	If there is no structural cause for the pain, the patient should be assessed for neuroplastic symptoms (NS) as part of a complete evaluation.
Costochondritis	An inflammation of the cartilage (firm but flexible connective tissue) that connects a rib to the breastbone (sternum).	Costochondritis causes chest pain at the site of the inflammation. However, pain in this location is often not due to inflammation but is rather a neuroplastic symptoms (NS).

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Cough	When something irritates the throat or airways it stimulates nerves that tell muscles in the chest and abdomen to push air out of the lungs to force out the irritant. An occasional cough is normal and healthy.	Persistent cough can have any of a wide range of causes. If diagnostic evaluation fails to detect an organ disease or structural abnormality to explain the cough then assessment for neuroplastic symptoms (NS) should be done.
Covid-19, Long Haul or Post-Covid Syndrome	A poorly defined condition afflicting approximately 10% of Covid-19 patients causing months of some combination of fatigue, exercise intolerance, insomnia, shortness of breath and "brain fog" (problems with memory, focus and other mental skills). Any of a large number of additional symptoms also can occur. The cause is unclear but might include some combination of slow healing of damage from Covid, autoimmune inflammation, ongoing injury from the Covid virus or a psychophysiologic disorder. This is a focus of highly active research so for up to date information see the page maintained by the Center for Disease Control at CDC.gov/coronavirus/2019-ncov/long-term-effects.html	New research evidence is reported frequently. Assessment for neuroplastic symptoms (NS) should be part of a complete evaluation because of its role in some patients with Post-Covid Syndrome.
Cramp Fasciculation Syndrome	A rare condition of the muscles characterized by persistent muscle cramping and twitching (fasciculations) in otherwise healthy individuals. The cramps are typically triggered by exertion and are due to peripheral nerve hyper-excitability rather than muscle fatigue or electrolyte (salt) deficiency.This can lead to muscle discomfort, pain, or tiredness.	Not caused by neuroplastic symptoms (NS). However, if the symptoms are not typical or the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) are reasonable.
Cranio-Cervical Instability	Refers to increased movement of the skull and the top two vertebrae (spinal bones) caused by stretching, weakness or rupture of the ligaments (connective tissue) that connect these bones. Causes include physical trauma, autoimmune disease, tumors and abnormalities present at birth (congenital). Numerous symptoms have been attributed to this condition including occipital (back of the head) headache, neck pain and nerve abnormalities such as numbness, muscle weakness, dizziness, and instability while walking. Patients sometimes describe the feeling that their head is too heavy for their neck to support (“bobble-head”).	When no structural cause for the symptoms is found then assessment for neuroplastic symptoms (NS) are recommended and likely to be helpful.
CRPS	see Pain, Complex Regional Pain Syndrome	x
Cryptogenic	A descriptor (adjective) for symptoms that do not match a common clinical pattern and have no known cause.	neuroplastic symptoms (NS) are the most likely explanation for symptoms with this label.

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Cubital Tunnel Syndrome	A condition where the ulnar nerve at the elbow is irritated or inflammed.	Careful examination can determine if there are ulnar nerve symptoms and careful history may explain why that patient has localized elbow pressure (e.g. cell phone use). If these criteria are not met and the diagnosis is therefore being used more loosely, then an assessment for neuroplastic symptoms (NS) should be done.
Cyclical Vomiting	Cyclic vomiting syndrome (CVS) is an uncommon disorder affecting both children and adults and characterized by recurrent episodes of severe nausea and vomiting with no organ disease or structural abnormality to explain it. An episode may last for a few hours to several days and then is followed by a period of time during which affected individuals are free of severe nausea and vomiting. Some can experience milder symptoms between attacks. Many patients also suffer from migraine headaches.	Assessment for neuroplastic symptoms (NS) are highly recommended.
Cystitis, Interstitial	Also called Painful Bladder Syndrome. Symptoms include bladder and pelvic pain or pressure and a frequent urge to urinate that can resemble a urinary tract infection but no infection is present.	Assessment for neuroplastic symptoms (NS) are highly recommended.
Depression	A mood disorder that causes a persistent feeling of sadness and loss of interest in previously pleasurable actitivities and can interfere with daily functioning. Can be accompanied by crying, withdrawal from family & friends, change in appetite, difficulty sleeping, reduced energy, irritability, hopelessness, feelings of being worthless or life not worth living, difficulty with thinking or concentrating and thoughts of self-harm or suicide.	Can be considered a type of, and is typically linked to the same issues as neuroplastic symptoms (NS).
Depression, Post-Partum or Post-Natal	Depression that occurs in the mother after childbirth.	Often linked to the same issues as neuroplastic symptoms (NS) which should be assessed.
DeQuervains tendinitis	A painful condition affecting the tendons on the thumb side of the wrist. Typically causes pain when turning the wrist, grasping something or making a fist. Any activity that relies on repetitive hand or wrist movement — such as working in the garden, playing golf or racket sports, or lifting a baby — can make it worse.	Usually a structural issue that can quickly be remedied by a local injection. But if the symptoms are atypical or response to treatment is not as expected then assess for neuroplastic symptoms (NS).
Dermatitis Herpetiformis	An uncommon rash consisitng of itchy bumps.	
Dermatitis, Eczema		

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Dermatitis, Neurodermatitis		
Diffuse idiopathic skeletal hyperostosis (DISH)	A bony hardening of ligaments (fibrous tissue that connects bones) in areas where they attach to your spine, this condition might not cause symptoms or require treatment. If it does cause symptoms, the most common are mild to moderate pain and stiffness in your upper back. DISH can also affect your neck and lower back, and some people have DISH in other areas, such as shoulders, elbows, knees and heels.	Because this condition often causes no symptoms, a thorough evaluation of a patient with symptoms should include assessment for neuroplastic symptoms (NS).
Disc, Herniation (See Spine, Disc Herniation)	x	x
Discs, Bulging (see Spine, Disc Herniation)	x	x
Diverticulosis, Diverticulitis	Diverticulosis refers to the presence of small pockets or pouches bulging from the large intestine (primarily) though they can be found in the small intestine as well. They can be a cause of acute (short-term) pain if they become infected (called diverticulitis) which requires antibiotics and sometimes surgery to treat successfully. They do not cause chronic pain.	Not caused by neuroplastic symptoms (NS). However, in some patients chronic abdominal pain is attributed to diverticulosis/itis and this is nearly always incorrect. These patients should be assessed for neuroplastic symptoms (NS).
Dizziness	A term used to describe a range of sensations, such as feeling faint, woozy, lightheaded, weak or unsteady. Dizziness that creates the false sense that you or your surroundings are spinning or moving is called vertigo.	If no organ disease is identified to account for this symptom then the patient should be assessed for neuroplastic symptoms (NS).
Double Vision	Seeing two images of a single object.	Careful eye, nerve, and brain evaluation is appropriate. If no documentable cause is identified then assessment for neuroplastic symptoms (NS) should be done.
Dry Eye Syndrome	Occurs when the tear gland fails to produce sufficient tears. Can be caused by a variety of medical conditions or from aging. The eye may become dry, red, and inflamed. The main symptoms are discomfort and sensitivity to light.	If no organ disease is identified to account for this symptom, or if the clinical course over time or the response to treatment are not as expected then the patient should be assessed for neuroplastic symptoms (NS).

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Dysautonomia	A diagnosis applied to a variety of symptoms linked to problems with the autonomic nervous system (ANS). This part of the nervous system controls involuntary body functions like heartbeat, breathing and digestion. When the ANS doesn't work as it should, it can cause heart and blood pressure problems, trouble breathing, loss of bladder control and difficulty with digestion or sexual function.	Diseases of organs and structures (including diabetes, multiple slcerosis, Parkinson's disease and many others) can cause this condition. If none of these is present then the patient should be evaluated for neuroplastic symptoms (NS).
Dysbiosis	A term for a bacterial (germ) imbalance or maladaptation on or inside the body. Typical bacterial colonies found on or in the body are normally benign or beneficial. These beneficial and appropriately sized germ colonies carry out a series of helpful and necessary functions, such as aiding in digestion. They also help protect the body from penetration by pathogenic (disease-causing) micro-organisms by competing with them for space and resources. In dysbiosis, bacteria on the skin, or in the gut or vagina are out of balance, with normally dominating species underrepresented and other species that are normally outcompeted or contained increasing to fill the void. Dysbiosis is most commonly reported as a condition in the gastrointestinal tract, particularly during small intestinal bacterial overgrowth (SIBO) or small intestinal fungal overgrowth (SIFO).	A range of symptoms has been attributed to this condition with little scientifc evidence thus far. Diagnostic tests for dysbiosis are unreliable as are available measures designed to correct the condition such as antibiotics, probiotics and fecal transplant. Patients whose symptoms are attributed to this condition should be assessed for neuroplastic symptoms (NS). (One exception to this is detecting the bacteria C Difficil in the large intestine which should be considered infection by a pathogen (disease-causing) rather than a form of dysbiosis.)
Dysmenorrhea	Painful menstrual period.	Multiple factors, including neuroplastic symptoms (NS) can contribute to the amount of pain a woman experiences during her menses.
Dyspepsia, Functional (see Non-Ulcer Dyspepsia)	x	x
Dysphonia, spastic or muscle tension	A change in the sound or feel of the voice due to excessive muscle tension in and around the voice box. This can include the vocal folds and the other accessory muscles of the larynx.	Assessment for neuroplastic symptoms (NS) are likely to be helpful.
Ectopic Heartbeats	Extra heartbeats generated outside the electrical circuits that coordinate normal heart contractions. Ectopic beats are common and usually not a cause for concern, though they can be associated with anxiety. People may feel like their heart is skipping a beat or is producing an extra beat.	If these are occurring often enough that they are a concern for the patient (and there is no biomedical explanation) then evaluation for neuroplastic symptoms (NS) can sometimes be helpful.
Eczema (see Dermatitis, Eczema)	x	x

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Ehlers Danlos Syndromes	A group of inherited disorders that mostly affect the skin, joints, and blood vessels. Symptoms include overly flexible joints that can dislocate, and skin that's translucent, elastic, and bruises easily. Less commonly some subtypes can lead to dilation and even rupture of major blood vessels. Diagnosis can be complex as there are many subtypes and Ehlers-Danlos is itself a type of Hypermobility Spectrum Disorder (HSD).	Joint pain in people with flexible joints is sometimes attributed to Ehlers-Danlos or to an HSD. However, many patients with an HSD have no pain so, for a complete evaluation of the source of pain, neuroplastic symptoms (NS) should be assessed. This is particularly important in patients who have no evidence of joint damage or dislocation.
Endometriosis	Tissue that normally lines the inside of the uterus (womb) — the endometrium — grows outside the uterus. This tissue is found most commonly on the ovaries, on or in the fallopian tubes (which link the ovaries and the uterus) or the lining of the pelvis.	At least one study has shown that women with pelvic pain have this condition no more often than women with no pain. In that study the women with pain had a past history of sexual abuse in childhood three times as often as the women with no pain. Women with chronic pelvic pain should therefore be assessed routinely for neuroplastic symptoms (NS) even if endometriosis is present.
Enthesitis	Enthesitis is inflammation of the entheses, the sites where tendons or ligaments insert into the bone. Early clinical manifestations are an aching sensation akin to "working out too much", and it gets better with activity.	Not caused by neuroplastic symptoms (NS) but if this condition fails to respond to treatment then assessment for a contribution by neuroplastic symptoms (NS) should be done.
Environmental Intolerances, Idiopathic	See Chemical Sensitivity, Multiple	x
Eosinophilic Esophagitis	A chronic immune system disease in which a type of white blood cell (eosinophil) builds up in the lining of the esophagus (the muscular tube that connects your mouth to your stomach). This buildup, which is a reaction to foods, allergens or acid reflux, can inflame or injure the esophageal tissue. Damaged esophageal tissue can lead to discomfort in the chest, difficulty swallowing or cause food to get stuck when you swallow.	Not caused by neuroplastic symptoms (NS) but if symptoms fail to respond to treatment then assessment for a contribution by neuroplastic symptoms (NS) should be done.
Epicondylitis	Inflammation of an epicondyle which is a projection of bone above a condyle (a rounded prominence at the end of a bone) where ligaments and tendons are attached. The inflammation often is caused by overuse. This is common in the elbow where it may be referred to as "tennis elbow" when on the outside of the joint (lateral) or "golfer's elbow" when on the inside (medial) of the elbow.	Not caused by neuroplastic symptoms (NS) but if there is no history of overuse of the joint, or the symptoms are atypical or fail to improve as expected then evaluation for neuroplastic symptoms (NS) should be done.

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Epididymitis, Chronic	Inflammation of the tube located at the back of the testicles that stores and carries sperm. When this tube becomes swollen, it can cause pain and swelling in the testicles. Acute (short term) cases are usually due to infection.	If infectious causes are treated (or not present) and symptoms persist for more than six weeks then the patient should be evaluated for neuroplastic symptoms (NS).
Epstein Barr Virus	A common virus of the herpes family that can cause infectious mononucleosis which usually resolves in a month or less.	This is a discredited diagnosis for chronic fatigue and other symptoms. Patients whose chronic symptoms are attributed to this virus should be evaluated for other causes and for neuroplastic symptoms (NS).
Erythromelalgia	A condition characterized by episodes of pain, redness, and swelling in various parts of the body, particularly the feet and hands. These episodes are usually triggered by increased body temperature, which may be caused by exercise or entering a warm room.	This condition can be triggered by a variety of causes but stress can be a contributing factor in some patients so an assessment for neuroplastic symptoms (NS) are reasonable.
Esophageal Spasm	Painful contractions of the muscular tube connecting your mouth and stomach (esophagus). Esophageal spasms can feel like sudden, severe chest pain that lasts from a few minutes to hours.	neuroplastic symptoms (NS) are not usually a factor but should be assessed if the symptoms, clinical course over time or response to treatment are not as expected.
Essential Palatal Myoclonus	This is a rare movement disorder consisting of continuous rhythmic jerks of the soft palate just behind the hard palate in the roof of the mouth; it usually develops due to abnormalities in the brain, particularly the brainstem or cerebellum. In some cases the patient will report hearing an auditory click.	When there is no evidence of disease in the brainstem or cerebellum then the patient should be assessed for neuroplastic symptoms (NS).
Eustachian Tube Obstruction	The Eustachian tube is a narrow tube which links the back of the nose to the middle ear. It is normally closed but opens when we swallow, yawn or chew. When it is obstructed or dysfunctional symptoms such as muffled hearing, pain, tinnitus (ringing sensation), reduced hearing, a feeling of fullness in the ear or problems with balance may occur.	Diagnostic criteria are not clearly defined so assessment for neuroplastic symptoms (NS) are reasonable, particularly if the symptoms, clinical course over time or response to treatment are not as expected.
Exercise induced anaphylaxis	A potentially life-threatening generalized (whole body) allergic reaction linked to exercise and sometimes to ingestion of a particular food prior to exercise. The reaction involves several organs and systems, particularly the skin (hives, itching, flushing), respiratory tract (narrowed airways causing wheezing or difficulty breathing), gastrointestinal tract (nausea, vomiting or diarrhea), and cardiovascular system (low blood pressure, rapid pulse).	Anaphylaxis is a serious allergic or allergic-like response and should be dealt with medically. However, assessment for neuroplastic symptoms (NS) are reasonable if the symptoms, clinical course over time or response to treatment are not typical or as expected.
Facet Syndrome (see Spinal Facet Syndrome)	see Spinal Facet Syndrome	x

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FAI	Femoroacetabular impingement (FAI) is a condition in which extra bone grows along one or both of the bones that form the hip joint — giving the bones an irregular shape. Because they do not fit together perfectly, the bones rub against each other during movement.	Not caused by neuroplastic symptoms (NS). However neuroplastic symptoms (NS) should be assessed if symptoms or the course over time are not typical or if the response to treatment is not as expected.
Failed Back Surgery	When surgery has failed to alleviate a patient's back pain. This occurs in 20-40% of patients.	These patients should be carefully assessed for neuroplastic symptoms (NS). They may not have needed surgery in the first place.
Fasciitis, Plantar	Inflammation of a thick band of tissue that runs across the bottom of the foot and connects the heel bone to the toes.	There is debate about this condition. Acute (short term) inflammation can occur due to overuse. However, there is little evidence for chronic inflammation of ligaments in the foot that can cause chronic pain. Therefore when pain in the bottom of the foot does not resolve with usual treatment for an acute injury or overuse syndrome, assessment for neuroplastic symptoms (NS) should be done.
Fibroids, Uterine	Benign growths in the uterus	Not caused by neuroplastic symptoms (NS). However, most fibroids do not cause pain so if pelvic pain is present an assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation. The decision regarding invasive treatment procedures should be carefully weighed.
Fibromyalgia	Widespread muscle pain and tenderness often accompanied by fatigue and altered sleep, memory, and mood.	There is no good evidence that fibromyalgia is caused by a structural disorder in the body. There have been many attempts to find this evidence, but none has stood up to careful investigation. When auto-immune disorders, hormonal disorders and peripheral disease conditions have been ruled out by standard medical evaluations, and when the diagnosis of fibromyalgia is confirmed, then the symptoms should be attributed to neuroplastic symptoms (NS).
Flat Back Syndrome	A condition in which the lower spine loses some of its normal curvature.	Anatomical variant that is usually of no significance. If symptoms have been attributed to this it is reasonable to assess the patient for neuroplastic symptoms (NS).
Flat Feet	Pes Planus is the medical term. Refers to feet that lack the usual arch.	Most people with this condition have no symptoms. Arch supports (orthotics), especially inexpensive over-the-counter ones, can be helpful. If symptoms are atypical or fail to respond as expected to treatment then assessment for neuroplastic symptoms (NS) should be done.

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Flatulence, Excessive	Passing excessive intestinal gas via the anus.	If treatment (avoiding carbonated beverages, not talking while eating, avoiding foods such as beans and lentils, foods with lactose, fruits containing fructose, and the sweetener sorbitol) doesn't help then evaluation for neuroplastic symptoms (NS) are reasonable.
Focal Dystonia	Focal dystonia is sustained or repetitive involuntary muscle contractions limited to a specific part of the body (such as the hand) during specific activities (such as writing or playing music).	Evaluation for neuroplastic symptoms (NS) are essential as part of a complete evaluation.
Food Allergy (see Allergy, Food)	x	x
Food Sensitivity	An adverse physical response to a certain food, beverage, or ingredient. The symptoms might be only digestive problems, such as abdominal pain, bloating, and gas but some people report fatigue, headache or "brain fog." A variety of methods, including blood tests are used to determine "food sensitvities" though many of these have questionable validity and so may be irrelevant clinically.	What is the underlying symptom? That symptom might better be explored as a neuroplastic symptoms (NS) than as 'food related', particularly if the symptom is not reliably reproduced every time the food is ingested.
Food Sensitivity, Dairy	Also called lactose intolerance, this consists of gastrointestinal symptoms caused by failure of the digestive system to break down milk sugar (lactose). Usually due age-related to loss of lactase, the enzyme that digests milk sugar.	Avoiding milk sugar usually provides complete relief. If symptoms, clinical course over time or response to treatment are not as expected then assess for neuroplastic symptoms (NS).
Foot neuropathy	Neuropathy is a condition of the nerves where there may be less sensation, or numbness, tingling, or pain.	Diagnostic evaluation should be done to look for the cause which might be diabetes, familial (genetic) or neuroplastic symptoms (NS). If none of these is found then neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.
Freiberg Disease	Freiberg disease, also known as a Freiberg infarction, is a form of tissue death due to poor circulation (avascular necrosis) in one of the metatarsal bones (behind the toes) of the foot. It generally develops in the second metatarsal, but can occur in any metatarsal. Physical stress causes multiple tiny fractures where the middle of the metatarsal meets the growth plate.	Not caused by neuroplastic symptoms (NS). However, if the symptoms are not typical or the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) are reasonable.
Functional	An adjective that indicates a condition is due to abnormal function of an organ rather than abnormal anatomy.	neuroplastic symptoms (NS) often contributes to symptoms in patients given a diagnosis containing this word.

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Gall Bladder Pain or Attack	Typically happens when gallstones block a duct leading from the gall bladder to the bile duct or block the bile duct itself. (The bile duct carries bile from the liver and gall bladder to the small intestine.) When this happens, bile builds up in the gallbladder. The blockage and swelling trigger pain, typically across the upper abdomen. The attack normally stops when the obstructing gallstones move and bile can flow out. If this fails to happen after a few to several hours then surgery may be necessary.	Not caused by neuroplastic symptoms (NS). However, most gallstones do not cause symptoms so judgment and experience are needed when a patient has abdominal pain and also gallstones to determine if the stones are causing the pain. If it is possible the stones are not causing the pain, then assessment for neuroplastic symptoms (NS) should be done.
Gastric Accomodation Syndrome	The accommodation reflex, in which the stomach relaxes to accomodate a meal, is an important mechanism of normal gastric (stomach) physiology. In functional dyspepsia (indigestion not caused by structural damage), impairment of accommodation has been found in 40% of cases. Impaired accomodation has also been described in several other upper gastrointestinal disorders, such as diabetic gastropathy and postfundoplication (after surgery for acid that regurgitates up the esophagus) syndrome. In these latter conditions stomach nerves are damaged by diabetes and surgery respectively.	neuroplastic symptoms (NS) can be a contributing factor in some patients diagnosed with this condition and should be assessed.
Gastritis	Inflammation of the lining of the stomach. Usually diagnosed via examination of the stomach using a camera tube (endoscope).	Can cause no symptoms or can cause abdominal discomfort, indigestion or nausea. If the symptoms fail to respond as expected to treatment then the patient should be assessed for neuroplastic symptoms (NS).
Gastro-Esophageal Reflux Disease (see GERD)	x	x
Gastroparesis	Impairment of the stomach's nerves and muscles cause slowing of digestion-related contractions leading to delayed emptying of the stomach. Symptoms include feeling full after meals but can progress to nausea, vomiting and abdominal pain. Diabetes is the most common cause though certain medications (opioids, tricyclic antidepressants and others) can exacerbate it.	neuroplastic symptoms (NS) are capable of causing severe delays in emptying. Therefore neuroplastic symptoms (NS) should be assessed, particularly when no other cause is apparent.
Geographic tongue	A condition where the tongue, on examination, has unusual ridges and valleys that make it look like a topographic map.	A harmless condition that is best ignored. Symptoms associated with this condition should be assessed for neuroplastic symptoms (NS).

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GERD: Gastro-Esophageal Reflux Disease	Stomach contents (including acid or bile) flow across the sphincter muscle at the junction of the esophagus (muscular tube between mouth and stomach) and stomach and into the esophagus where inflammation can result. Can cause a burning discomfort in the chest commonly called 'heartburn.' In some cases the stomach contents can reach the back of the throat (pharynx) and the vocal cords (larynx) (called laryngo-pharyngeal reflux or LPR) and cause inflammation and voice changes. Exacerbated by caffeine, nicotine, alcohol, lying down after meals, large meals and fatty foods.	This can be a complex diagnostic dilemma. X-ray studies with barium can show stomach contents that reflux (regurgitate) to any level of the esophagus and even to the pharynx (back of the throat). Endoscopy (swallowed tube with video) can show inflammation of the esophagus and esophageal acid (pH) monitoring studies can document acid getting into the esophagus. The more of these tests a patient has showing problems, the more likely their symptoms have an organic basis and are not neuroplastic symptoms (NS). Improvement in response to medication (and other treatments like avoiding caffeine, sleeping with your head elevated) also supports an organic diagnosis. On the other hand, lack of objective findings on tests, variability in symptoms from day to day and failure to respond to treatment (particularly failure to respond to Proton Pump Inhibitor meds) makes neuroplastic symptoms (NS) a more likely cause. The presence of significant psychosocial issues and improvement in symptoms in response to mind-body treatment techniques supports a diagnosis of neuroplastic symptoms (NS), too. Having said that, the diagnosis can remain unclear in some patients since some organic cases don't respond to meds (possibly due to bile reflux even in the absence of acid) and some neuroplastic symptoms (NS) cases don't respond rapidly to mind-body approaches.
Gingivitis	Inflammation of the gums.	Linked to dental hygiene, genetic factors, and other contributors. Not typically a neuroplastic symptoms (NS).
Globus Sensation	The feeling of having a lump in the throat when in fact there is nothing there. The sensation can come and go. It does not interfere with eating and drinking.	neuroplastic symptoms (NS) are often a contributing factor and should be assessed.
Gluteal Pain Syndrome	Causes pain and/or dysesthesias (burning, tingling, aching or squeezing sensation) in the buttock area, hip or posterior (back of the) thigh and/or pain that radiates along the path of the sciatic nerve due to entrapment of the sciatic nerve in the space underlying the gluteus muscles (but not squeezed by a spinal disc).	A complete evaluation should include assessment for neuroplastic symptoms (NS) as a potential contributing factor, particularly if symptoms are not typical or the clinical course or response to treatment are not as expected.

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Gluteal tendinopathy	The gluteal muscles are located in the buttocks and connect the thigh bone (femur) to the hip bone (ilium) and tail bone (sacrum). Tendinopathy is a term used to describe pain at the location of the connection between a muscle and its tendon's attachment to a bone. It has not been shown to be a separate entity however.	neuroplastic symptoms (NS) should be strongly considered when a diagnosis of a tendinopathy is made.
Golf Elbow (see Epicondylitis)	x	x
Gut Dysbiosis (see Dysbiosis)	x	x
H Pylori	A bacteria that can infect the stomach lining and cause peptic ulceration of the stomach or first part of the small intestine (duodenum).	Not related to neuroplastic symptoms (NS) but if symptoms persist despite eradication of H pylori and healing of the ulceration then evaluation for neuroplastic symptoms (NS) should be done.
Hair Loss (see also Alopecia areata & Telogen Effluveum)	There are many reasons for hair loss, including inflammatory diseases of the scalp. One condition has clearly been tied to stress, telogen effluvium. In this condition, a major stressful event causes all of the hair follicles to stop growing at one time, temporarily. This causes normal hair loss to be more noticed since new hairs are not growing to replace the ones that normally fall out. Once the stressful event is over, follicles resume growing and the condition resolves.	Hair loss should be evaluated by a physician to rule out inflammatory and other disease states. Telogen effluvium is clearly stress related. Alopecia areata consists of patches of hair loss that are usually reversible. It is not known how much of a role stress plays in this condition, but it is suspected to play a role.
Hallux rigidis, stiff big toe/bone on bone in joint	With aging, or years of activity such as running, the great toe of the foot can loose its range of motion. In many cases, this is asymptomatic. In some patients there is pain or a need to modify activities.	Not a neuroplastic symptoms (NS), but the patient's response to this problem may require some psychological as well as physiologic treatment.
Hay fever	Hay fever refers to a set of symptoms caused by allergies to common environmental factors, such as grasses, weeds, pollen, etc. The symptoms usually consist of runny nose, sneezing, coughing and sinus congestion. Although this is not thought to be purely neuroplastic symptoms (NS), there have been many patients in whom neuroplastic symptoms (NS) plays a major role in this syndrome. This may be due to conditioned responses.	When typical medical treatments do not work for this syndrome, consider that neuroplastic symptoms (NS) may be playing a role.

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Headache	There are many causes for headache and head pain. Headache specialists divide headache into primary and seconday headache. Secondary headache means that there is a specific cause for the pain, such as a brain tumor, an infection, an inflammatory condition, sinus or dental problems. These conditions need to be treated medically and are not due to neuroplastic symptoms (NS). However, primary headaches have no identifiable cause after a routine medical evaluation. Primary headaches, such as those due to tension or migraine, should be considered forms of neuroplastic symptoms (NS).	Evaluation for neuroplastic symptoms (NS) should be part of a complete assessment for primary, but not secondary, headaches.
Health Anxiety Disorder	A person who has frequent concern about their health out of proportion to the state of their health.	This is a type of anxiety disorder often linked to the same issues found in neuroplastic symptoms (NS).
Heart arrhythmia (pacs and pvcs)	Extra heartbeats generated outside the electrical circuits that coordinate normal heart contractions. These extra beats are common and usually not a cause for concern, though they can be associated with anxiety. People may feel like their heart is skipping a beat or is producing an extra beat.	If these are occurring often enough that they are a concern for the patient then evaluation for neuroplastic symptoms (NS) can sometimes be helpful along with medical evaluation for other causes.
Heart Palpitations (see Racing Heart)	x	x
Heavy Metal intoxication	A rare condition in which a person has inhaled or swallowed toxic amounts of one ore more heavy metals such as arsenic, cadmium, copper, iron, lead, mercury or zinc.	If symptoms are attributed to this condition it should be confirmed by a physician using a reliable clinical laboratory. Some patients have been incorrectly "diagnosed" by labs linked to sales of "chelation" treatment and their symptoms are more likely due to neuroplastic symptoms (NS).
Hemangioma, Spine	See Vascular tumor in spinal cord	
Hiatal Hernia (see also GERD)	A condition in which the stomach partially migrates above the muscle of breathing (diaphragm) and therefore into the chest. This can weaken the lower esophageal sphincter muscle (where the esophagus joins the stomach) which sometimes leads to Gastro-Esophageal Reflux Disease (see GERD).	This condition causes symptoms via GERD. If GERD is not present or does not respond as expected to treatment then assessment for neuroplastic symptoms (NS) are likely to be helpful.
High hamstring tendinopathy or tendonitis	The hamstrings are the muscles in the back of the thigh. This is a relatively uncommon injury that is often overlooked as a cause of chronic pain in the gluteus (buttock) muscle. This injury occurs most often in long distance runners and presents as persistent deep gluteal (buttock) pain that is aggravated by running and acceleration.	Evaluation for neuroplastic symptoms (NS) are reasonable as part of a complete assessment, particularly if the symptoms or the course over time are not typical or if the response to treatment is not as expected.

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Hip Flexor Pain	Hip flexors are muscles that connect the lower spine and hip bone to the long bone of the thigh (femur) which is lifted (flexed) when these muscles contract. Pain can result from trauma or from strain due to athletic activity.	If the pain lasts for more than a week or two despite appropriate treatment then the patient should be assessed for neuroplastic symptoms (NS).
Hip Impingement	Usually caused by abnormal bone growth and may cause a person to experience hip pain, usually in the groin area, and a decrease in the hip's range of motion. There are 3 different types of hip impingement—cam, pincer, and combined. The type of hip impingement is determined by the location of abnormal bone growth.	Assessment for neuroplastic symptoms (NS) are reasonable as part of a complete evaluation, particularly if symptoms or the course of the condition over time are atypical or the response to treatment is not as expected.
Hip Labrum Tear	A tear in the ring of strong, flexible cartilage that rims the outer edge of the hip socket (acetabulum) and allows for a significant range of motion. When damaged, it may cause front hip or groin pain that is often described as a deep, dull, ache. Pain from a labral tear can appear gradually over time or suddenly. Labral tears are commonly seen in people who play sports that involve running, kicking, or turning.	Studies show tears of the hip labrum in a high percentage of people with no symptoms. Therefore, when a person with groin or hip pain has a hip labrum tear it might be a mere coincidence. The hip pain might instead be due to a muscle or tendon problem or to neuroplastic symptoms (NS) which should be assessed.
Hip Misalignment	Asymmetry in the hip joint.	A wide range of symptoms has been attributed to this condition even though a certain degree of asymmetry is common in people with no symptoms. People with symptoms attributed to this condition should be assessed for neuroplastic symptoms (NS) routinely.
Hip Pincer Impingement (see Hip Impingement)	x	x
Histadelia	See Under-methylation	x
Histamine Intolerance or Sensitivity	A condition that results from excessive accumulation of histamine in the body due to excessive ingestion in food, or excessive release of the body's histamine or to reduced capacity of enzymes (chemically active proteins) that break down histamine. The latter is sometimes caused by medication. Symptoms can include diarrhea, headache, runny nose, irritation of the membrane covering the eyes (conjunctivitis), asthma, low blood pressure, irregular heartbeat, hives, itching or flushing of the skin. Symptoms can be reduced by a histamine-free diet or be treated with antihistamines.	Some people diagnosed with this condition actually have neuroplastic symptoms (NS), particularly if the symptoms are not clearly linked to diet, the patient is not taking any of the medications known to increase histamine in the body and response to treatment is less than expected.

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Hives, Chronic	Also known as urticaria, is a rash with red, raised, itchy bumps. They may also burn or sting. Often the patches of rash move around. Typically they last a few days and do not leave any long-lasting skin changes. Fewer than 5% of cases last for more than six weeks. The condition frequently recurs.	Assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Hormonal Migraines (see Pain, Headache, Migraines)	x	x
Hot Flashes	Nervous system activation causing redness of the skin, flushing, feeling warm or hot, and sweatiness. It typically occurs in women who are going through menopause. It is thought to be due to reduced estrogen levels. The condition typically improves over a few months or a year or two. Symptoms that persist longer than this might be due to neuroplastic symptoms (NS) as the brain has "learned" these neural circuits and can continue to activate them intermittently. Some research has linked persistent hot flashes to anxiety.	Consider neuroplastic symptoms (NS) in those who have persistence of hot flashes for longer than a year or two.
Hyperacusis	A hearing disorder that makes it difficult to cope with everyday sounds. Also called sound or noise sensitivity. Certain sounds seem unbearably loud to the patient even though people around them don't seem to notice.	Assessment for neuroplastic symptoms (NS) are strongly recommended.
Hyperhidrosis	A condition where the body perspires more than usual. May be localized (palms, underarms), or generalized.	If new in onset, stress and neuroplastic symptoms (NS) should be explored.
Hypermobility (see Joint, Hypermobile)	x	x
Hypermobility Spectrum Disorders or HSD	The ligaments, tendons, and other structures that support the joints stretch more than normal. Patients are able to bend their spines, fingers, toes, knees, elbows or legs more easily than others. Other conditions commonly attributed to HSD include “popping” or “cracking” of joints, flat feet, frequent ankle sprains, back pain, widespread aching pain or fibromyalgia, osteoarthritis, problems with healing (thin scars) or fragile skin, easy bruising, varicose veins, low blood pressure, dizziness when standing up or fatigue. A subtype of "Historical HSD" refers to people who had HSD when younger but not currently.	Evidence that this condition causes the symptoms attributed to it is limited. Assessment for neuroplastic symptoms (NS) are strongly recommended.

Hyperosmia	An increased sense of smell, usually of unknown cause but can be linked to pregnancy, epilepsy, low adrenal gland function, Lyme disease, migraines or multiple sclerosis.	Assessment for neuroplastic symptoms (NS) are reasonable as part of a complete evaluation, particularly if no other cause is found.
Hypertension	see Blood Pressure, High	x
Hyperthyroidism	Results from an overactive thyroid gland producing excess thyroid hormones. Frequent symptoms include nervousness, irritability, increased sweating, heart racing, hand tremors, anxiety, difficulty sleeping and weight loss due to an accelerated metabolism.	Not caused by neuroplastic symptoms (NS) but if symptoms are not typical or the response to treatment is not as expected (for example, symptoms persist even after hormone levels are normal) then assessment for neuroplastic symptoms (NS) can be helpful.
Hyperventilation	Breathing more rapidly and/or more deeply than is needed to meet the needs of the body.	Often linked to anxiety. Assessment for neuroplastic symptoms (NS) are recommended.
Hypochlorhydria	A low level of acid in the stomach. Rarely a cause of any symptom because the digestive system has multiple means for digesting food.	A seemingly endless list of symptoms has been attributed to this condition but most are due to neuroplastic symptoms (NS).
Hypoglycemia	Low Blood Sugar, most commonly linked to diabetes or its treatment. Symptoms commonly attributed to this condition include confusion, heart palpitations, shakiness, and fatigue.	In the absence of diabetes and with a negative medical evaluation, most symptoms attributed to this condition are linked to neuroplastic symptoms (NS).
Hypotension	see Blood Pressure, Low	x
Hypothyroidism	Low thyroid hormone level. Measurement by lab test of a low T4 or T3 and high TSH.	If correctly diagnosed, it's a biochemical deficiency of a hormone. Symptoms usually respond readily to treatment. If they do not then assessment for neuroplastic symptoms (NS) should be done.
IBS - C	see Irritable Bowel Syndrome	x
IBS - D	see Irritable Bowel Syndrome	x
Idiopathic	A descriptor (adjective) for symptoms that do not match a common clinical pattern and have no known cause.	neuroplastic symptoms (NS) are often, though not always, the most likely explanation for symptoms with this label.
Idiopathic environmental intolerances	See Chemical Sensitivity	x

Ilio-Tibial Band Syndrome	The ilio-tibial band consists of fibrous tissue on the outside of the thigh from the ilium (hip bone) to the tibia (the large bone that is just below the knee). The IT band syndrome refers to pain due to friction between the iliotibial band and a bony prominence (the lateral epicondyle) on the outside of the thigh bone (the femur). Pain is felt most commonly on the lateral (outside) part of the knee. As with many conditions linked to overuse of an area, pain can develop after a high level of exercise and also after injury. However, the IT band is made of fibrous tissue that, if overused or injured, will heal. Persistent (months or more) pain in this area is highly likely to be neuroplastic symptoms (NS).	Assess for neuroplastic symptoms (NS) if the symptoms become chronic (persist for longer than a few weeks).
Iliolumbar Ligament Tear	A tear in a ligament in the pelvic region between the ilium (hip bone) and bones in the low back (lumbar vertebrae).	Can be a difficult diagnosis to confirm. If not confirmed then it might simply be a label applied to pain that is actually caused by neuroplastic symptoms (NS). Therefore neuroplastic symptoms (NS) assessment should be done in patients with symptoms attributed to this condition.
Iliopsoas syndrome	The Iliopsoas muscle is a combination of two muscles that connect the spine and hip bone (ilium) with the femur (thigh bone). When this muscle contracts it lifts (flexes) the thigh. Pain in this region is sometimes labeled with this term.	Syndrome often means that the cause is not well understood and neuroplastic symptoms (NS) should be considered, particularly if diagnostic evaluation is unclear, if symptoms are atypical or if the response to treatment is not as expected.

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Inflammation	There are two types of inflammation: large scale (visible) local inflammation; and small scale (microscopic) inflammation that can exist throughout the body. They have vastly different significance. Large scale inflammation is the body's reaction to infection, injury or other offending agent and causes swelling, redness, pain/tenderness and loss of function of the affected area. This reaction is brought about by circulating protein and non-protein chemicals and by white blood cells that are activated to fight infection or other inflammatory agent. This kind of inflammation occurs in specific locations, such as the skin when it is infected (as with boils or cellulitis), in the appendix (in appendicitis) or in joints when they are infected. Other examples include the immune system attacking the joints in rheumatoid arthritis or crystals irritating joints as in gout. Another term for this is macro-inflammation because you can see it with the naked eye. Macro-inflammation causes tissue damage that affects sensory nerves, triggering a signal to the brain to activate the pain sensation. This warns us of danger in the affected part of the body. Microscopic scale inflammation can't be seen with the naked eye. It is caused by proteins called cytokines, one of which is called interleukin 6. They create inflammation that is less severe but more widespread. For example, the inflammation can occur in the walls of arteries (blood vessels that carry blood away from the heart to the tissues) that can eventually lead to narrowing of those vessels. It is difficult to measure this micro-inflammation but it can be approximated by blood tests such as a C-Reactive Protein (CRP) or erythrocyte sedimentation rate (ESR). Everyone has some degree of micro-inflammation that can occur in many parts of the body simultaneously. Micro-inflammation is a slow process that develops and recedes over long time frames. It doesn't turn on and off rapidly. Micro-inflammation does not trigger a danger signal and does not activate pain. This type of inflammation can lead to negative health consequences but over many years. For example, it can increase the risk of heart attacks, diabetes or cancer to some degree.	Large scale inflammation commonly causes pain. Small scale inflammation does not. If a patient with pain has no organ or structural abnormality other than small scale inflammation then they should be assessed for neuroplastic symptoms (NS).

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Inflammatory Bowel Disease (Ulcerative Colitis or Crohn's disease)	An umbrella term for chronic inflammation of the digestive tract. Subtypes of IBD include Ulcerative Colitis (inflammation and sores (ulcers) along the superficial lining of the large intestine (colon and rectum) and Crohn's disease (inflammation and sores anywhere in the digestive tract from mouth to anus but most commonly in the small or large intestine that often involves the full thickness of the bowel). Symptoms of IBD can include diarrhea, rectal bleeding, abdominal pain, fatigue and weight loss.	Not caused by neuroplastic symptoms (NS) but some patients simultaneously have Irritable Bowel Syndrome (defined elsewhere in this chapter) that can cause similar symptoms (though not bleeding or intestinal blockage). Therefore, if Inflammatory Bowel Disease symptoms are atypical or not responding as expected to treatment then neuroplastic symptoms (NS) should be assessed for its potential to exacerbate Irritable Bowel Syndrome.
Insomnia	Insomnia consists of difficulties in either falling asleep or in waking up during sleep or both. Medical or neuroplastic symptoms (NS) conditions that are painful can cause these difficulties. Other conditions can also affect sleep, such as hyperthyroidism or inflammatory conditions. However, the vast majority of insomnia is due to neuroplastic symptoms (NS).	Consider neuroplastic symptoms (NS) strongly unless there is a medical condition that affects sleep.
Interstitial Cystitis	see Cystitis, Interstitial	x
Irritable Bowel Syndrome (IBS)	A disorder of the muscle contractions of the large intestine and the perception of those contractions by the brain that can cause abdominal pain, changes in bowel habit (diarrhea, constipation or both at different times), bloating, or sometimes a sensation of incomplete defecation. No definitive diagnostic tests exist. The diagnosis is made based on typical symptoms and lack of alternative explanation for those symptoms.	neuroplastic symptoms (NS) are often a significant contributing factor and should be assessed.
Irritable Bowel Syndrome (IBS), Post-Infectious	Development of typical symptoms of IBS following an acute gastrointestinal infection. Symptoms might include diarrhea, constipation, bloating, excessive gas and abdominal pain.	These symptoms are often due to an acquired sensitivity or intolerance to a particular food, such as intolerance to milk sugar (lactose) due to temporary or permanent loss of the enzyme needed to digest lactose. If the symptoms are not uniformly reproduced by ingestion of the presumed dietary cause or if the symptoms persist for months (or longer) then assessment for neuroplastic symptoms (NS) should be part of a complete evaluation.
Ischiofemoral impingement	An often unrecognized cause of hip pain caused by abnormal contact between the lesser trochanter (a bone prominence on the upper part of the thigh bone) and the ischium (a bone forming the lower part of the pelvis). Usually occurs as a result of physical trauma or surgery.	Not due to neuroplastic symptoms (NS) but if the symptoms or the course over time are not typical or the response to treatment is not as expected then neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.

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Itching, Chronic	Itching is self explanatory. Chronic means on-going.	Dry skin to be considered. Moisturizers would help that. Eczema is another skin condition that is treatable. Itching can also be a neuroplastic symptoms (NS).
Itching, Localized	Itching that is limited to a specific area.	Can have any of a variety of causes including neuroplastic symptoms (NS).
Joint Hypermobility Syndrome (JHS)	Joint hypermobility syndrome meaning larger than average mobility of one or more joints.	Most people with this condition have no symptoms. Therefore patients with hypermobile joints and discomfort or pain should be assessed for neuroplastic symptoms (NS).
Joint, Hypermobile	Greater than average range of mobility in the joints that can be linked to abnormality of a key protein (collagen) in the ligaments (short bands of tough, flexible fibrous tissue which connects two bones or cartilages or holds together a joint.)	Most people with this condition have no symptoms. Therefore patients with hypermobile joints and discomfort or pain should be assessed for neuroplastic symptoms (NS).
Joint, Misalignment	A joint that does not properly "line up" or align	Many people with the appearance of a joint misalignment on physical exam or x-ray have no symptoms. So care is needed in attributing chronic pain to this condition and assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Joint, Temporo-Mandibular	see Pain, Temporomandibular Joint	x
Labral Tear	Torn cartilage which lines the shoulder joint.	While large tears may require surgical repair, especially in younger athletes, smaller tears may be incidental findings that are not the cause of symptoms. In some people with smaller tears the symptoms are caused by neuroplastic symptoms (NS).
Lactose Intolerance	Inability to digest milk sugar (lactose) generally from a deficiency of lactase, the enzyme (protein) that digests the milk sugar.	Avoiding dairy products usually relieves the symptoms but if they persist, consider other causes including neuroplastic symptoms (NS).

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Laryngo-Pharyngeal Reflux (LPR)	Stomach contents traveling (regurgitating) across the sphincter (squeezing) muscle at the junction of the stomach and esophagus (muscular tube connecting the mouth cavity to the stomach) and reaching the back of the mouth cavity (pharynx) and the vocal cords (larynx) where it can cause inflammation. This can be a complex diagnostic dilemma. Barium studies can show regurgitation from the stomach to the pharynx, endoscopy (exam with video camera in a tube) can show inflammation in the esophagus and/or larynx and esophageal monitoring studies can document acid getting into the upper esophagus. The more of these tests a patient has showing problems, the more likely their symptoms have an organic basis and the less likely they are due to neuroplastic symptoms (NS). Improvement in response to medication (and other treatments like sleeping with your head elevated and avoiding caffeine) also supports an organic diagnosis.	A lack of objective findings on tests, marked variability in symptoms over time and failure to respond to treatment (particularly failure to respond to proton pump inhibitor medication like omeprazole) makes neuroplastic symptoms (NS) a more likely cause. The presence of significant psychosocial stresses in the patient's life and a good response to mind-body treatment techniques also supports a diagnosis of neuroplastic symptoms (NS). Having said all that, the diagnosis can remain unclear in some patients since some organic causes don't respond to meds (possibly due to bile regurgitation even in the absence of acid) and some neuroplastic symptoms (NS) cases don't respond rapidly to mind-body approaches. Even experienced clinicians are, at times, uncertain about the relative contributions of acid regurgitation and neuroplastic symptoms (NS) and just try the full range of medical and psychological treatment, only resorting to surgery (tightening the gastro-esophageal sphincter with an operation called a fundoplication) in the few who fail to improve and who have no strong indication of psychosocial issues.
Leaky Gut	In some conditions, injury to the lining of the gut allows substances to travel from the gut to the circulation that are not permitted to cross this barrier in healthy people. Crohn's disease, celiac disease, and radiation therapy are some of the conditions in which this can happen. But there is no evidence that this phenomenon, which isn't common, is responsible for symptoms or that it happens in people with no disease of the gut or that it can be modified by a change in diet.	Patients whose symptoms are attributed to this condition should be evaluated for neuroplastic symptoms (NS).
Leg Length Discrepancy (LLD)	A difference in length between the two legs. There is little consensus about the extent of LLD considered to be clinically significant, the prevalence, reliability, and validity of the measuring methods, the effect of LLD on function, or its role in various neuromusculoskeletal conditions.	Before attributing symptoms to this condition an assessment for neuroplastic symptoms (NS) should be done.
Levator Ani Syndrome	Intermittent burning or aching rectal or perineal pain or feeling of incomplete evacuation of the rectum caused by spasm of the levator ani muscle. Episodes are of longer than 30 minutes duration. (Shorter than 20 minutes duration is called proctalgia fugax).	Assessment for neuroplastic symptoms (NS) are often helpful, particularly when treatment measures have been unsuccessful.

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Lichen planus (oral)	A persistent inflammatory condition that affects mucous membranes lining the mouth. Caused by the immune system attacking these membranes. Oral lichen planus may appear as white, lacy patches; red, swollen tissues; or open sores. These lesions may cause burning, pain or other discomfort.	Not caused by neuroplastic symptoms (NS) but if the symptoms or the course over time are atypical or if the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) should be done.
Lichen Sclerosus	Lichen sclerosus (LIE-kun skluh-ROE-sus) is an uncommon condition that creates patchy, white skin that appears thinner than normal. It usually affects the genital and anal areas. Anyone can get lichen sclerosus but postmenopausal women are at higher risk.	Not caused by neuroplastic symptoms (NS) but if the symptoms or the course over time are atypical or if the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) should be done.
Ligaments, Loose	see Joint, Hypermobile	x
Light Sensitivity	See Photophobia	x
Livedo Reticularis	A condition in which the skin, usually on the legs, looks mottled and purplish, in sort of a netlike pattern with distinct borders. It is thought to be due to spasms of the blood vessels or an abnormality of the circulation near the skin surface	Not caused by neuroplastic symptoms (NS).
Longhaul COVID symptoms	See COVID-19, long haul	x
Low Blood Pressure	see Blood Pressure, Low	x
Lumbar radiculitis	Lumbar refers to the low back and radiculitis means inflammation of a nerve root. This can manifest as pain, numbness, or weakness of the buttock and leg. This is the medical term for sciatica.	Symptoms attributed to this condition are most likely to be neuroplastic symptoms (NS) when the symptoms (particularly when there is numbness or weakness in addition to pain), physical exam and imaging studies all correspond to the presence of the same compressed nerve root. Symptoms are not likely to be neuroplastic symptoms (NS) when symptoms (particularly if pain only), physical exam and imaging studies fail to correspond with each other. A typical example would be the presence of a mild nerve compression only on the left side in a patient whose pain is on the right side.

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Lumbosacral transitional vertebra	A vertebra is one of 33 bones comprising the spine. The term lumbosacral transitional vertebra refers to the transverse process (wing-like parts of the vertebra bone, one projecting to the right and one to the left) of the lowest lumbar (low back) vertebra being totally or partly joined (on both sides or just one side) to the sacrum (tailbone, located right below the lumbar vertebrae behind the pelvis). Low back pain is often blamed on this abnormality when it is found, particularly in young patients. However, this condition is present in 4-8% of the population most of whom do not have symptoms so it is a questionable cause of symptoms unless the patient has evidence of nerve damage (numbness or weakness) linked to the corresponding nerve being pinched on imaging study.	Pain in patients with this condition does not usually respond to interventional pain treatment. This lack of response often characterizes orthopedic abnormalities with a significant contribution from neuroplastic symptoms (NS). Unless the patient has evidence of nerve damage (numbness or weakness) linked to the corresponding nerve being pinched on imaging study, then the patient should be assessed for neuroplastic symptoms (NS).
Lupus	Also known as Systemic Lupus Erythematosus. See Autoimmune Disorders.	
Lyme Disease, Chronic	Chronic Lyme disease (CLD) is a poorly defined term in which a range of symptoms is attributed to protracted Borrelia burgdorferi infection. These symptoms are not typical for acute Lyme disease and lack the specific criteria used to diagnose acute Lyme disease. Within the scientific community, the concept of CLD has, for the most part, been rejected.	Assessment for neuroplastic symptoms (NS) are highly recommended.
Mast Cell Activation Syndrome	Mast cells circulate in the blood and are responsible for allergic reactions. Mast cell activation syndrome causes episodic symptoms consistent with mast cells releasing compounds into the circulation. Symptoms include hives (raised skin rash), swelling beneath the skin (angioedema), flushing, nausea, vomiting, diarrhea, abdominal cramping, lightheadedness or fainting due to low blood pressure, rapid heart rate, wheezing, redness of the whites of the eyes (conjunctival injection), itching of the skin and nasal stuffiness. Other diagnostic criteria include a decrease in the frequency or severity of symptoms with anti-mediator therapy including H(1) and H(2) antihistamines, anti-leukotrienes, or mast cell stabilizers. Laboratory data that support the diagnosis include an increase of a validated urine or blood chemical known to be released by mast cells.	This condition is rare. If the diagnosis is not definitive or the patient does not respond to treatment as expected, then neuroplastic symptoms (NS) should be considered and assessed.
ME/CFS	see Chronic Fatigue	x

Medial Epicondylitis	Also known as 'golfer's elbow', a condition of tenderness and pain near the elbow on the inside (next to the body when the palms face forward).	May be from over use, with acute tenderness and inflammation. However, when chronic, consider neuroplastic symptoms (NS) as a contributor or cause.
Median Arcuate Ligament Syndrome (MALS)	The median arcuate ligament is a fibrous arch formed by the tendons that attach the muscle of breathing (diaphragm) to the spine. In this rare syndrome, (aka the celiac artery compression syndrome, celiac axis syndrome, celiac trunk compression syndrome or Dunbar syndrome) symptoms are attributed to compression of the celiac artery and the celiac nerve ganglia. However, many people with no symptoms have similar degrees of this compression. Symptoms attributed to MALS include abdominal pain (particularly in the upper mid-abdomen (epigastrium) after meals), and sometimes nausea, poor appetite, weight loss, diarrhea or constipation. A minority of patients will have an audible (with a stethoscope) arterial murmur (bruit) due to turbulence at the site of celiac artery compression. Confirmation of the diagnosis can be accomplished with visualization of this compression by ultrasound or CT scan.	Not caused by neuroplastic symptoms (NS) but evaluation for neuroplastic symptoms (NS) should be done as part of a complete evaluation, especially if the symptoms and/or findings on diagnostic tests are not typical.
Meniere's Disease	An inner-ear condition that can cause vertigo, a specific type of dizziness in which the patient feels as though they are spinning. It also can cause ringing in the ear (tinnitus), hearing loss that comes and goes, difficulty with balance and a feeling of fullness or pressure in the ear.	Not caused by neuroplastic symptoms (NS) but if symptoms or the course over time are not typical or if the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Meniscus Tear	A mechanical tear in the cartilage (firm, flexible connective tissue) cushioning the knee joint, between the thigh bone and lower leg bones.	A tear is not a neuroplastic symptoms (NS). However, some people with a tear have no pain and do not require surgery, others have pain even after surgical treatment. So there should be an assessment for neuroplastic symptoms (NS) in patients with chronic knee pain as part of a complete evaluation, particularly when there is no clear cause for pain, when there are atypical symptoms or when response to treatment is not as expected.
Menopause	Cessation of the menstrual cycle for at least 12 consecutive months brought on by a natural decline in reproductive hormones. Common symptoms include hot flashes, vaginal dryness and sometimes sleep disturbances, anxiety or depression. Occurs at an average age of 51 in the U.S.	Not caused by neuroplastic symptoms (NS) but assessment for neuroplastic symptoms (NS) are reasonable as part of a complete evaluation of symptoms that are occurring at the same time as menopause.

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Menstrual Cramps	Throbbing, aching cramps in the lower belly and pelvis just before and during the menstrual period.	Not caused by neuroplastic symptoms (NS) but if symptoms are severe or the course over time is not typical or if the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Meralgia Paresthetica	Tingling, numbness or burning pain in the outer part of the thigh. The condition is caused by compression of the lateral femoral cutaneous nerve, which supplies sensation to the upper thigh. Usually improves significantly or resolves after a few weeks or months.	Not caused by neuroplastic symptoms (NS) but if symptoms are severe or the course over time is not typical or if the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Metatarsalgia due to short second metatarsal bone	The second metatarsal bone is located in the foot behind the toe that is adjacent to the big toe. Pain in this area often leads to x-rays which can reveal variations from normal anatomy though it is not always clear that these variations are the cause of the patient's pain.	neuroplastic symptoms (NS) can contribute to pain in this area. Evaluation for neuroplastic symptoms (NS) should be done, particularly when symptoms or course over time are not typical or the response to treatment is not as expected.
Microbiome Imbalance	see Dysbiosis	x
Middle Ear Myoclonus	An uncommon diagnostic label applied to patients with tinnitus (noise in one or both ears, sometimes of a clicking nature) that is presumed to result from abnormal movement of muscles in the middle ear.	neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.
Migraine	see Pain, Headache, Migraine	x
Misophonia	Misophonia is a disorder in which certain sounds trigger emotional or physiological responses that some might perceive as out of proportion to the circumstance. Those who have misophonia might describe it as when a sound “drives you crazy.” Their reactions can range from anger and annoyance to panic and the need to flee.	Assessment for neuroplastic symptoms (NS) are recommended.
Mitral Valve Prolapse	A condition in which the two valve flaps of the mitral valve (located between the upper (atrium) and lower (ventricle) chambers on the left side of the heart) don't close smoothly or evenly, but bulge (prolapse) upward into the left atrium. Mitral valve prolapse is also known as click-murmur syndrome, Barlow's syndrome or floppy valve syndrome. Symptoms that have been attributed to this condition include chest pain, irregular heartbeat, lightheadedness, shortness of breath and fatigue.	Not due to neuroplastic symptoms (NS) but often without symptoms so some symptoms attributed to this condition are actually due to neuroplastic symptoms (NS). Therefore assessment for neuroplastic symptoms (NS) should be part of a complete evaluation.
Mold Allergy	see Allergy, Mold	x

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Morton's Neuroma	A neuroma is a nerve bundle or growth and Morton identified painful nerves between the metatarsal bones of the feet. The presence of a neuroma can usually be determined by careful history and examination.	If the presence of a neuroma cannot be confirmed then assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation for foot pain which has many causes.
Mucopolysaccharidoses (MPS)	Mucopolysaccharidoses (MPS) and mucolipidosis (ML) are genetic lysosomal storage diseases (LSD) caused by the body's inability to produce specific enzymes. The missing or insufficient enzyme prevents cells from recycling waste, resulting in the storage of materials in cells throughout the body.	Not caused by neuroplastic symptoms (NS).
Multiple Sclerosis	This is an auto-immune structural disorder that has specific clinical criteria for diagnosis such as optic neuritis (inflammation of the main nerve of the eye), muscle weakness, an abnormal MRI of the brain/spinal cord and abnormal laboratory tests of spinal fluid.	Not due to neuroplastic symptoms (NS). However, as an auto-immune disorder, it may be influenced by stress and the psychoneuroimmune system. Therefore, changes in stress levels might link to worsening or alleviation of symptoms. In addition, having MS can cause excessive fear and worry, which can, in turn, activate neuroplastic symptoms (NS) symptoms.
Muscle Pain	see Fibromyalgia	x
Muscle Tear, non-healing	Muscle tears can vary from so-called micro-tears, which are not detectable by imaging studies such as MRIs and are only presumed to be "torn" due to acute muscle pain after an injury, to significant tearing of the fibers of a muscle due to a major injury. Muscles have excellent blood supply and therefore heal readily. Pain that occurs after a muscle injury will be present in the acute phase, which lasts anywhere from a couple of days to a couple of weeks. Pain that persists for much longer than that is highly likely to be due to neuroplastic symptoms (NS).	Pain immediately following a muscle injury is often due to the injury during this acute phase, although it is also common to have acute pain in the muscles due to neuroplastic symptoms (NS), in the absence of any injury. Pain in a muscle that persists after an injury has healed is due to neuroplastic symptoms (NS).
Muscle Tightness	see Musculoskeletal tension	x
Musculoskeletal tension	Refers to persistent contraction of muscles to a degree greater than is needed. Can occur in any muscle but often this diagnosis is made to explain changes in the voice, headaches or otherwise unexplained muscle pain.	Assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.

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Musculoskeletal weakness	Muscle weakness can be caused by a variety of illnesses affecting the muscles or their associated nerves. These include rare congenital disorders such as muscular dystrophy, Myasthenia gravis (also relatively rare), stroke (nerve damage in the brain due to blocked circulation) and multiple sclerosis (nerve damage due to an autoimmune disease). Conditions that are caused by a structural disorder that results in muscle weakness will show objective weakness of muscle on a neurological examination.	Some patients believe that one or more of their muscles are weak but a neurological examination shows they are not objectively weak. In this case, neuroplastic symptoms (NS) are the most likely explanation for their symptom.
Myalgic Encephalitis	see Chronic Fatigue	x
Myasthenia Gravis	This is an auto-immune structural disorder that has clear criteria for diagnosis, including muscle weakness with exercise, drooping of the eyelids, and a specific test using Tensilon (edrophonium).	Not due to neuroplastic symptoms (NS). However, as an auto-immune disorder, it may be influenced by stress and the psychoneuroimmune system. Therefore, stress levels may link to worsening or alleviation of symptoms. In addition, having MG can cause excessive fear and worry, which can, in turn, activate neuroplastic symptoms (NS) symptoms.
Narcolepsy	A chronic sleep disorder characterized by overwhelming daytime drowsiness and sudden attacks of sleep. People with narcolepsy often find it difficult to stay awake for long periods of time, regardless of the circumstances.	Not due to neuroplastic symptoms (NS). However, if the diagnosis is not confirmed by evaluation in an experienced Sleep Disorders clinic or lab then assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Nausea, Chronic	A symptom that can be caused by any of a variety of issues including GERD, peptic ulcer, slowed stomach muscle contractions with delay in emptying the stomach, partial blockage of the intestines, certain medications, migraines, problems with the organ of balance in the inner ear, increased pressure in the brain and certain tumors or infections.	When organ diseases and structural abnormalities are excluded, then neuroplastic symptoms (NS) are a common contributing factor and assessment should be done.
Navicular, Accessory	An additional bone in the foot. Usually of no significance, as are so many radiologic (x-ray) variants of "normal."	If pain is being attributed to this finding then neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.
Neuralgia due to demyelination of sensory nerves.	See Neuropathy, Small Fiber.	x

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Neuralgia, Facial	Also known as trigeminal neuralgia, this syndrome consists of pain in the face, that is usually of unknown cause. The pain is often triggered by mild stimuli, such as cold or wind. There are some patients who have pressure on the facial nerve due to an abnormal anatomic location of their facial blood vessels. This can be diagnosed by MRI. However, many people have such findings in the absence of pain. Surgery to correct this pressure is often unsuccessful and the benefit from surgery wanes over time.	Unless there is a very clear abnormality found on imaging, assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Neuralgia, Occipital	A condition in which the occipital nerves (that run through the scalp at the back of the skull) are injured or inflamed. This causes headaches that feel like severe piercing, throbbing or shock-like pain in the upper neck, back of the head or behind the ears.	Assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Neuritis, Brachial	Inflammation of the nerves that run from the spinal cord to the chest, shoulder, arm and hand that can cause pain and/or weakness in the muscles of the arm and shoulder on the affected side.	Assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation, particularly if the symptoms or the course over time are not typical.
Neuritis, Vestibular	An inner ear disorder that may cause a person to experience sudden, severe vertigo (spinning/swaying sensation), dizziness, balance problems, nausea or vomiting.	Assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation, particularly if the symptoms or the course over time are not typical or the response to treatment is not as expected.
Neurodermatitis	see Dermatitis, Neurodermatitis	x
Neurogenic claudication	Leg pain, heaviness and/or weakness when walking resulting from compression of the spinal nerves in the lumbar (lower) spine.	Not due to neuroplastic symptoms (NS) but if the symptoms or course over time are atypical or the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Neurologic Disorders, Functional	Functional neurologic disorder (FND) is a medical condition in which there is a problem with the functioning of the nervous system and how the brain and body sends and/or receives signals, rather than a structural disease process such as multiple sclerosis (autoimmune nerve damage) or stroke (nerve damage due to obstructed circulation).	This is nearly always a form of neuroplastic symptoms (NS).
Neuronal Hyperexcitability Disorder	Also known as Peripheral Nerve Hyperexcitability. A condition in which nerve cells generate a signal after less than the normal amount of stimulation. The main symptoms are muscle twitching and stiffness.	This condition can result from a variety of causes but if none is found then neuroplastic symptoms (NS) should be assessed as a potential contributing factor.

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Neuropathy due to subluxation, compression or inflammation	Nerve injury due to a structural abnormality. Subluxation is dislocation of the bones at a joint.	Not due to neuroplastic symptoms (NS) when the diagnosis is accurate but in some cases symptoms attributed to neuropathy caused by a structural abnormality are not caused by the abnormal structure. Therefore it is reasonable in most cases to assess for neuroplastic symptoms (NS) as part of a complete evaluation.
Neuropathy, Peripheral	Weakness, numbness, a pins & needles sensation or pain caused by nerve damage, usually in the hands and feet. A common cause of peripheral neuropathy is diabetes, but it can also result from injuries, infections, and exposure to toxins.	If structural conditions are ruled out, neuroplastic symptoms (NS) are a common cause of symptoms attributed to this condition.
Neuropathy, Small fiber	Small fiber neuropathy is a term given to individuals who present with numbness or a pins & needles sensation of the limbs, usually beginning in the feet. Neurological assessments of reflexes, muscles strength, and sensation confirm that there is not obvious nerve damage. Assessment should be conducted to rule out other causes of neuropathy such as diabetes mellitus, medication-related neuropathy, vitamin deficiencies, and toxicities due to alcohol or other drugs. In small fiber neuropathy, Electromyogram (EMG) and Nerve Conduction Velocity (NCV) testing are normal, which confirms the lack of nerve damage. Nerve biopsies (tissue samples examined with a microscope) often show minor abnormalities, but these can also be seen in individuals without symptoms.	When no definite cause is found, this disorder should be evaluated for neuroplastic symptoms (NS) as part of a complete assessment.
Noise Sensitivity	See Misophonia and Hyperacusis	x
Non-specific	Adjectives that indicate a condition is not linked to an organ disease or structural abnormality in a way defined by medical science.	neuroplastic symptoms (NS) are responsible for symptoms in many of these conditions.
Non-Ulcer Dyspepsia (NUD)	Symptoms resemble those of peptic ulcer but no ulcer is present on diagnostic evaluation. These symptoms include pain or discomfort in the upper abdomen, often accompanied by bloating, belching and nausea.	Evaluation for neuroplastic symptoms (NS) are often helpful.
Nosebleeds (epistaxis), recurrent	Nose bleeds are often from blood vessels in an area near the front of the nasal septum (membranous wall between the nostrils) called Hesselbach's plexus.	Causes may be irritation from scratching, dry mucous membranes, and rarely high blood pressure. Not typically a neuroplastic symptoms (NS).
Numbness	Diminished sensation of touch or pressure in the skin. Evaluation by an MD is important to assess for a nerve disease or damage.	Can be neuroplastic symptoms (NS), particularly when there is no evidence of nerve disease or damage.

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Occupational Neuralgia	Nerve pain caused by work. This is a vague diagnosis that is rarely used. More specific information is needed to confirm the link between the occupation and the symptom.	neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.
Ocular Motor Dysfunction	Abnormal function of the muscles that control eye movement. Can cause a wide range of symptoms including double vision, blurred vision, eye fatigue, headache and difficulty reading. Can result from a large number of disorders.	If no organ disease or structural abnormality that explains the condition is found then assessment for neuroplastic symptoms (NS) are reasonable.
Odontalgia, Atypical	Tooth pain with no diagnostic explanation. Other diagnostic labels for this condition are phantom tooth pain, atypical facial pain, atypical facial neuralgia, migrainous neuralgia, idiopathic toothache, traumatic neuralgia, or chronic orofacial pain.	Assessment for neuroplastic symptoms (NS) are essential as part of a complete evaluation.
Osgood Schlatter disease	A condition of adolescence with pain in the knee just below the knee cap.	A physical phenomenon. The amount of pain experienced can be influenced by the complex psychological state of teenagers so assessment for neuroplastic symptoms (NS) can be helpful, particularly when the symptoms, course over time or response to treatment are not typical or as expected.
Osteitis Pubis	Pain in the groin and pelvis caused by inflammation of the pubic symphysis, the joint of the two major pelvic bones at the front of the pelvis.	Assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation, particularly if there is no evidence for inflammation on MRI of the pubic symphysis.
Osteoarthritis	see Arthritis, Osteoarthritis	x
Osteoarthritis, "Bone on Bone"	As cartilage loss progresses in a joint, x-rays may show nearly complete loss of cartilage and a clincian or radiologist may call it 'bone on bone'.	Some people with minimal xray findings have a lot of pain and sometimes people with severe x-ray changes have little or no pain. Treat the patient as an individual by assessing for neuroplastic symptoms (NS) as a potential contributing factor. X-rays are helpful and important. But we treat patients, not x-rays.
Osteochondroma	An overgrowth of cartilage and bone that happens at the end of the bone near the growth plate. Most often, it affects the long bones in the leg, the pelvis, or the shoulder blade. Osteochondroma is the most common noncancerous bone growth. It most often occurs between ages 10 and 30.	Not caused by neuroplastic symptoms (NS) but if symptoms are atypical (most osteochondromas are painless) then assessment for neuroplastic symptoms (NS) are reasonable as part of a complete evaluation.
Osteoporosis	Loss of bone density, commonly in the spine or hip. More common in people who are older, female, slim, White or Asian.	Not a neuroplastic symptoms (NS). Exercise, calcium, and, where appropriate, medication are the treatments. Does not cause symptoms by itself though it increases the risk of a bone fracture. If pain is attributed to this in the absence of a fracture the patient should be assessed for neuroplastic symptoms (NS).

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Ovary, Cysts	A solid or fluid-filled sac or pocket (cyst) within or on the surface of an ovary.	Usually these do not cause symptoms. Symptoms attributed to ovarian cysts should be assessed for neuroplastic symptoms (NS) as part of a complete evaluation.
Pain, Abdominal	Pain in the abdomen, referring here to persistent (chronic) pain and not to new, short-term (acute) pain.	Abdominal Pain that lasts for weeks, months or longer with no cause found by diagnostic evaluation is likely to be due to neuroplastic symptoms (NS). This probability increases with more 'yes' answers on the neuroplastic symptoms (NS) Context Questionnaire and a higher score on the Hidden Stress Questionnaire. Characteristics of abdominal pain that particularly support a link to neuroplastic symptoms (NS) include migration of the pain from one location to another, brief (seconds at a time) duration, small area (especially silver dollar size or less) and triggering by light touch on the skin. However, there are a few uncommon structural causes of abdominal pain that can sometimes escape detection with diagnostic testing. Some of these are mild Crohn's disease (ulcerating inflammation) involving the small intestine, early stage lymph cell cancer infiltrating the stomach or bowel (a rare disease), insufficient adrenal gland function (Addison's disease), lead poisoning (rare, detectable if the correct test is ordered but often not considered unless the patient knows they have been exposed), insufficient circulation to the bowel (caused by hardening of the arteries) and widely distributed intra-abdominal cancerous tumors too small (at least initially) for detection by CT scan. Consequently, if the patient does not have significant psychosocial stresses and/or their pain does not improve in response to treatment of their stress, then reappraisal by a physician should be considered.
Pain, Complex hand pain syndrome.	See Pain, Complex Regional Pain Syndrome	x

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Pain, Complex Regional Pain Syndrome	CRPS is a term given to individuals who have a specific set of symptoms with no known cause. These include pain that can feel aching or electric-like and other sensations in an extremity or several extremities. The sensations can include tingling, burning, and numbness. This usually occurs in a hand or foot and often begins after an injury, though the injury might not be in the affected extremity. There are sometimes changes in skin color to red, blue or purple. There may also be swelling of the hand or foot. It can occur in only one limb or it can spread to others. There is no evidence that this is caused by a structural disease process. It is generally assumed to be caused by the brain and often the autonomic nervous system is involved to account for the changes in color and the swelling, when those are present. Since there is no disease process, the symptoms are due to the brain and the nervous system, and cases have resolved with mind body therapies, so it should be considered as a form of neuroplastic symptoms (NS).	neuroplastic symptoms (NS) should be assessed routinely and issues found should be treated. Some severe cases might benefit from conventional treatment (medication and/or injections) along with neuroplastic symptoms (NS) approaches.
Pain, Dental	Pain in the mouth or a tooth. See also Odontalgia, Atypical.	See a dentist to exclude dental abnormalities. If none is found then neuroplastic symptoms (NS) assessment should be done as part of a complete evaluation.
Pain, Facial	Pain in the face.	Pain in the face can be neuroplastic symptoms (NS). Appropriate history and physical examination can help the clinician to rule out other causes. Imaging is sometimes appropriate as well.
Pain, Flat Feet	A condition in which the entire sole of the foot touches the floor when standing. Most people with this condition do not experience pain.	If pain is present, consider the possibility that it is due to neuroplastic symptoms (NS), particularly if the pain or its course over time or response to treatment are not typical.

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Pain, Headache, Cervicogenic	This is a type of referred pain (pain perceived as occurring in a part of the body other than its true source) perceived in the head from a source in the neck. The cause is a disorder of the cervical (neck) spine and its component bone, disc and/or soft tissue elements. Such disorders include tumors, fractures, infections and rheumatoid arthritis of the upper cervical spine. There is debate as to whether cervical spondylosis (age-related wear and tear affecting the spinal disks in your neck) can cause cervicogenic headache. People with cervicogenic headaches often have a reduced range of motion of their neck and worsening of their headache with certain movements of their neck or pressure applied to certain locations on their neck. The headaches are on one side only, and the pain may radiate from the neck/back of the head up to the front of the head or behind the eye. The headache may or may not be associated with neck pain.	neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.
Pain, Headache, Cluster	Bouts of frequent headaches, known as cluster periods, may last from weeks to months, usually followed by long periods of relief (remission). During remission, attacks may stop for months or years. Pain is severe on one side of the head or around one eye, accompanied by symptoms such as nasal discharge, or red or tearing eyes.	neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.
Pain, Headache, Daily Persistent	Headache with no cause found by diagnostic evaluation. Occurs in people with no prior history of headache who then experience daily pain for at least three months. Often resembles migraine in its features, with days when there is light or sound sensitivity, nausea, and a throbbing quality to the pain. Or it may resemble a tension-type milder headache without any of those features.	neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.
Pain, Headache, Hemicrania continua	Hemicrania continua is a chronic and persistent form of headache marked by continuous pain that varies in severity, and always occurs on the same side of the face and head. Several times daily the ache/throbbing pain can be interrupted by more severe pain that is sharp or jolting.	If no organ disease or structural abnormality is found to account for this symptom then assessment for neuroplastic symptoms (NS) should be done.
Pain, Headache, Migraine	A head pain attack of varying intensity, often accompanied by nausea and sensitivity to light, sound or smells and sometimes preceded by warning symptoms. Triggers include hormonal changes, certain foods and drinks (including alcohol), lack of sleep, stress, and exercise.	neuroplastic symptoms (NS) can be an important contributing factor and should be assessed routinely in migraine patients as part of a complete evaluation.

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Pain, Headache, Migraine, Hormonal	Refers to migraine head pain attacks that occur just prior to the menstrual period.	neuroplastic symptoms (NS) can be an important contributing factor and should be assessed routinely in migraine patients as part of a complete evaluation.
Pain, Headache, Migraine, Optical	Vision loss in one eye that occurs prior to or accompanies a migraine attack. Other terms for this include visual, retinal, ophthalmic, or monocular migraines.	neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.
Pain, Headache, Migraine, Vestibular	The vestibule is located in the inner ear and is part of the system for maintaining balance. Vestibular migraine may or may not involve head pain attacks in combination with vestibular symptoms such as vertigo (dizziness, sensation that you or your surroundings are spinning), imbalance, nausea and vomiting.	neuroplastic symptoms (NS) can be an important contributing factor and should be assessed routinely in migraine patients as part of a complete evaluation.
Pain, Headache, Nummular	Also known as 'coin headache' these are of mild to moderate intensity and confined to a single (rarely two) round or elliptical unchanging area 2 to 6 cm in diameter. The pain is continuous or intermittent, although in a large minority of cases, spontaneous relief lasting weeks to months may occur. Superimposed on the continuous pain, sharp pain may occur that initially lasts seconds but may gradually increase in duration to minutes or hours. The affected area may be sensitive to touch. The parietal region (roughly the back half of the skull) is where these occur most often. They are not associated with nausea, vomiting, light or sound sensitivity, runny nose, tears, redness of the eyes or other nerve symptoms.	neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.
Pain, Headache, Occipital	Headaches in the back of the head near the connection to the upper spine.	A common soft tissue area of neck/head pain. The tight musculature that contributes to this pain can be related to posture and neuroplastic symptoms (NS) can also be a factor.
Pain, Headache, post-Traumatic Brain Injury	Chronic headache after head injury can result from damage to tissue inside and adjacent to the skull that causes chronic sensitization of these tissues. Alternatively, or in addition to this, this form of headache might result from damage to brain structures involved in pain processing. It is notable that a study of 452 TBI patients found 41% had headache 12 months after injury but this was more likely in those with a pre-injury history of headache and was not linked to the severity of the injury. J Neurotrauma. 2011 Sep; 28(9): 1719–1725. doi: 10.1089/neu.2011.1914	neuroplastic symptoms (NS) should be assessed as part of a complete evaluation, particularly for headaches that persist more than a year after injury or if there are atypical features to the symptoms.

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Pain, Joint (Shoulder, Elbow, Wrist, Hand,Hip, Knee, Ankle, Foot.)	Pain where two or more bones meet. Causes include osteoarthritis (when flexible tissue of the joint wears down), rheumatoid arthritis (the joint tissue is attacked by the body's immune system), bursitis (inflammation of a nearby shock absorbing tissue pad), gout (deposit of crystals in the joint), strains (injury to muscle from overuse), sprains (injury to a ligament that connects two or more bones from overuse or trauma), and other injuries.	Usually not due to neuroplastic symptoms (NS) but if symptoms develop in the absence of a detectable injury or inflammation, or if symptoms persist for longer than is expected or fail to respond to treatment as expected then assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Pain, Myofascial	Pain in muscle and fascia (soft connective tissue) that exists throughtout the body with emphasis on the thoracic (chest) and lumbar (low back) regions.	Often neuroplastic symptoms (NS) when chronic.
Pain, Neuralgia	Attribution of pain to injury or inflammation of a nerve whose anatomic location corresponds to the site of pain.	Evaluation for neuroplastic symptoms (NS) should be done as part of a complete assessment, particularly if the symptoms or clinical course over time are not typical or if the response to treatment is not as expected.
Pain, Patellofemoral syndrome	Pain in the soft tissues and bone around the kneecap (patella). These soft tissues include the tendons, the fat pad beneath the patella, and the connective tissue that lines the knee joint. Typically the pain is increased with climbing stairs or squatting.	Not usually due to neuroplastic symptoms (NS) when acute (short-term, ie less than a few months) but neuroplastic symptoms (NS) should be assessed as part of a complete evaluation if the pain persists for months, is atypical in some way or fails to respond to treatment.
Pain, Pelvic, Female	Pain in the pelvic region of a woman can come from a variety of sources in that area.	Often neuroplastic symptoms (NS), especially with history of sexual abuse or trauma and when structural causes are excluded by exam and imaging.
Pain, Pelvic, Male	Pain in the pelvic region of a man can come from a variety of sources in that area.	Often neuroplastic symptoms (NS), especially with history of sexual abuse or trauma and when structural causes are excluded by exam and imaging.

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Pain, Post-Herpetic Neuralgia	Acute infection by the varicella zoster virus (VZ, also known as shingles) consists of a specific rash and acute pain in a dermatomal area (an area that is supplied by a nerve root, such as on a part of the face or a part of the trunk). The rash and pain usually last for a few days to a week or two. In a small portion of people, the pain either persists following healing of the rash, or they experience episodes of pain in the same area over time. These recurrent episodes can last for a few minutes to hours or longer and are called Post-Herpetic Neuralgia. While the acute rash and pain are due to the virus, the persistence of pain and the recurrence of pain are not due to activation of the virus. This condition is known as post-herpetic neuralgia. Our experience with this disorder is that it does respond to neuroplastic symptoms (NS) treatment.	neuroplastic symptoms (NS) should be strongly considered and routinely evaluated in people with recurrent post-herpetic neuralgia.
Pain, Post-Surgical	Pain that occurs after a successful surgery.	Various types of post-surgical pain, once structural causes have been ruled out, can be neuroplastic symptoms (NS).
Pain, Pudendal Neuralgia	The pudendal nerve runs from the back of the pelvis to near the base of the penis or vagina, where it branches off into other nerves. It sends messages to the brain from the genitals, anus, and other nearby body parts. It also controls the sphincter muscles that open and close when you urinate or have a bowel movement. When this nerve is injured or inflamed it can cause intermittent pain, discomfort, or numbness in the pelvis or genitals and it can make it difficult to empty your bladder or rectum, have sex, or sit down.	neuroplastic symptoms (NS) will often be a significant contributing factor and should be assessed, particularly when there has been no recent pelvic injury or surgery, no recent childbirth and no evidence of pelvic tumor or infection.

Pain, sciatic	Sciatic pain radiates along the course of the sciatic nerve that begins with nerve roots emerging from 5 adjacent levels of the spine: Lumbar levels 4 and 5, plus Sacrum levels 1, 2, and 3. Once these nerve roots join together, they form the large sciatic nerve that enters the leg and sends off smaller nerves to all regions of the legs and feet. Technically, this term should refer to pain produced by pressure on or damage to the sciatic nerve though actual damage is rare. Most commonly, pain that is felt in the leg is due to pressure on a nerve root where it exits from the spine. This can occur due to severe narrowing (stenosis) of the exit from the spine (spinal stenosis). This is usually due to bulging of one or more of the rubbery, shock-absorbing discs that are located between the vertebrae (bones of the spine) or by inflammation of the joint between vertebrae. This can lead to pain going down a specific part of the leg (e.g., down the back of the thigh and calf for the S1 nerve root; or down the side of the thigh and calf for the L5 nerve root; these are the two most likely to have nerve root pressure or damage). However, pain that radiates down into the leg can also be caused by neuroplastic symptoms (NS) in the absence of any nerve root damage or pressure. In differentiating these conditions it is helpful to know that sciatic pain can begin with pressure from a bulging (herniated) disc, but the vast majority of these resolve on their own within a couple of weeks or months. Pain that persists for longer than this is often due to neuroplastic symptoms (NS). Another way to differentiate nerve compression from neuroplastic symptoms (NS) are a neurological exam. When this detects no muscle weakness, loss of reflexes or loss of sensation a serious nerve root problem is unlikely. Detailed characteristics about the pain also can help to clarify that symptoms are linked to neuroplastic symptoms (NS).	Careful evaluation for a structural problem should occur, including neurological exams and sometimes an MRI and EMG testing. Be aware that MRIs and EMGs are often abnormal in healthy people with no pain. Sciatic pain can occur due to structural disorders, but can also occur due to neuroplastic symptoms (NS). Chronic (for months or longer) sciatic pain is more likely due to neuroplastic symptoms (NS), since most acute structural disorders causing sciatic pain improve on their own.
Pain, Surgical Incision	Pain at the site of recent or prior surgery. Incisional pain is occasionally due to a suture that doesn't dissolve, a nerve entrapped by a suture, or other structural cause.	When structural abnormalities are absent, a neuroplastic symptoms (NS) assessment will usually be the most effective approach.
Pain, Temporo-Mandibular Joint (TMJ)	The TMJ joins the jaw to the skull just in front of the ear.	neuroplastic symptoms (NS) are a common cause of TMJ pain, particularly when the pain is atypical, when diagnostic evaluation shows no abnormalities or when response to treatment is not as expected.

Pain, Tendonitis	Pain due to inflammation of a tendon which is a flexible, fibrous cord made of the protein collagen that connects a muscle to a bone.	Evaluation for neuroplastic symptoms (NS) should be done as part of a complete assessment of long term tendonitis, particularly if the symptoms or clinical course over time are not typical or if the response to treatment is not as expected.
Pain, Trigeminal Neuralgia	A chronic pain condition that affects the trigeminal nerve, which carries sensation from the face to the brain. Even mild stimulation of the face — such as from brushing teeth or putting on makeup — may trigger a jolt of excruciating pain. Can be caused by pressure on the nerve from blood vessels, multiple sclerosis or tumor.	Evaluation for neuroplastic symptoms (NS) should be done as part of a complete assessment, particularly if the symptoms or clinical course over time are not typical or if the response to treatment is not as expected.
Pain, Vulvodynia	Pain in the opening of the vagina not associated with redness or swelling of the tissue.	Assessment for neuroplastic symptoms (NS) are recommended.
Painful Bladder Syndrome	see Cystitis, Interstitial	x
Palpitations, Heart	Extra heartbeats generated outside the electrical circuits that coordinate normal heart contractions. Isolated extra heartbeats are common and usually not a cause for concern, though they can be associated with anxiety. People may feel like their heart is skipping a beat or is producing an extra beat. Prolonged episodes of palpitations should be diagnostically evaluated.	If these are occurring often enough that they are a concern for the patient then evaluation for neuroplastic symptoms (NS) can sometimes be helpful along with medical evaluation for other causes.
Panic Disorder	Considered a psychatric condition where a person has episodes of feeling disoriented, anxious or fearful, with a racing heart, trouble breathing, etc.	Actually a form of neuroplastic symptoms (NS) in that both mind and body are involved in the process. Treatment may be medication, but an integrative approach including psychotherapy, meditation, and breathing techniques may be most effective.
Parasites	A parasite is an organism that lives on or in a host organism and gets its food from or at the expense of its host.	Many parasites cause no symptoms and nearly all enountered in developed countries can be eradicated with available treatment. Therefore, symptoms that persist after treatment often are due to neuroplastic symptoms (NS), particularly when tests done by a reputable laboratory show no evidence for ongoing presence of the parasite.
Paroxysmal Hemicrania	A rare, severe, throbbing, claw-like, or boring pain usually on one side of the face; in, around, or behind the eye; and occasionally reaching to the back of the neck.	neuroplastic symptoms (NS) could be a contributing factor and so should be assessed as part of a complete evaluation.

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Parsonage Turner Syndrome	Injury of unknown cause to the nerves that connect to the arm, shoulder and chest (brachial plexus) causing pain, numbness and weakness. Can last months to years and cause shrinkage (atrophy) of one or more affected muscles.	Evaluation for neuroplastic symptoms (NS) are reasonable as part of a complete assessment, particularly if the symptoms, the course over time or response to treatment are not typical or as expected.
Pattern Glare	Visual perceptual distortions (illusions of shapes, colors or motion) and visual stress or discomfort on viewing striped patterns. People with migraine or Meares-Irlen syndrome (visual stress causing difficulty with fine vision tasks such as reading) are especially prone to pattern glare.	Evaluation for neuroplastic symptoms (NS) should be done as part of a complete assessment.
PAWS (Prolonged Acute Withdrawal Syndrome). See Benzodiazepine	x	x
PCOS - Polycystic Ovary Syndrome	A hormonal disorder causing enlarged ovaries with small cysts on the outer edges. Symptoms include menstrual irregularity, excess hair growth, acne, and obesity.	Not caused by neuroplastic symptoms (NS) but pelvic pain attributed to this condition is more likely due to neuroplastic symptoms (NS) than to PCOS.
Pectoralis Minor Syndrome	Pectoralis minor syndrome (PMS) is a type of thoracic outlet syndrome (TOS) causing pain, numbness and tingling and sometimes weakness in the arm and the hand, particularly the ring and small finger. Neck and shoulder pain can also occur. The symptoms are caused by pressure from the PM muscle on the nerves (more common) or blood vessels (less common) between the collar bone, the first rib and the upper arm.	Not caused by neuroplastic symptoms (NS) but if the symptoms or the course over time are not typical or the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) should be done.
Pelvic Congestion Syndrome	Pelvic congestion syndrome is a label often applied to women with pelvic pain, particularly if enlarged veins are observed on imaging studies. Enlarged veins are common in women with no symptoms but many PCS patients are, nevertheless, treated with procedures designed to block the veins with clots (embolic therapy). This procedure often improves symptoms but has never been compared with a control group which would ideally be a sham procedure.	Evaluation for neuroplastic symptoms (NS) should be routine in patients with this diagnostic label.
Pelvic Floor Dysfunction	The inability to correctly relax and coordinate the pelvic floor muscles to have a bowel movement. Symptoms include constipation, straining to defecate, incomplete defecation, having urine or stool leakage and experiencing a frequent need to urinate.	Assessment for neuroplastic symptoms (NS) should be done routinely as part of a complete evaluation.

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Pelvic Floor, Hypertonic or Dyssynergic	The levator muscle group surrounding the rectum is pulled tight and won't relax, or may tighten even when the patient is actively trying to defecate. (Defecation normally relaxes these muscles). This keeps the rectum angled in a way that inhibits defecation which leads to straining and, when more severe, can lead to pain.	neuroplastic symptoms (NS) can be a significant contributing factor.
Pelvic Girdle Pain	See Pubic Symphysis, Degenerative Change	x
Pelvic Instability	Excessive mobility of the joint where the hip bones join in front (pubic symphysis). Most often diagnosed during pregnancy.	Assessment for neuroplastic symptoms (NS) should be routine in evaluation of symptoms attributed to this condition such as pelvic pain, low back pain, sacro-iliac joint irritation, and restricted mobility.
Pelvic Instability, Post-Natal	Excessive mobility of the joint where the hip bones join in front (pubic symphysis). Most often diagnosed during pregnancy but can persist for months after delivery.	Assessment for neuroplastic symptoms (NS) should be routine in evaluation of symptoms attributed to this condition such as pelvic pain, low back pain, sacro-iliac joint irritation, and restricted mobility.
Pelvis, Anterior Tilt	On examination, the pelvis may tilt forward.	Usually this is of no significance and not a cause of symptoms. Evaluate for neuroplastic symptoms (NS) if there is chronic pain.
Pelvis, Hypermobile	Increased mobility of the joints of the pelvic ring including where the hip bones join in front (pubic symphysis) and where the hip bones join the tailbone (sacro-iliac joint).	Pain attributed to this condition should be assessed for neuroplastic symptoms (NS) routinely as part of a complete evaluation.
Pelvis, Inflammation or Inflammatory Disease	An infectious disease of women, often caused by chlamydia or other microorganisms.	Treated with antibiotics and usually curable.
Peripheral Nerve Hyperexcitability	see Neuronal Hyperexcitability Disorder	x
Persistent Genital Arousal Disorder	see PGAD	x
Persistent idiopathic facial pain (PIFP)	See Pain, Facial	x
Persistent postural perceptual dizziness	A functional neurologic disorder that consists of persistent dizziness, non-spinning vertigo and/or unsteadiness. Patients often develop problems with walking (a functional gait disorder), anxiety, avoidance behavior and severe disability.	Diagnostic tests and conventional imaging usually are negative. When that is the case, evaluation for neuroplastic symptoms (NS) are appropriate.

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PGAD	Persistent genital arousal disorder (PGAD), previously called persistent sexual arousal syndrome, is spontaneous, persistent, unwanted and uncontrollable genital arousal in the absence of sexual stimulation or sexual desire, and is typically not relieved by orgasm.	Assessment for neuroplastic symptoms (NS) are recommended.
Photophobia	The term means light sensitivity, and is an intolerance of light. Sources such as sunlight, fluorescent light and incandescent light all can cause discomfort, along with a need to squint or close your eyes. Headaches (including migraines) may accompany light sensitivity. Light-sensitive people sometimes are bothered only by bright light.	Assessment for neuroplastic symptoms (NS) are recommended.
Phytic acid sensitivity	Phytic acid is a substance found in beans, seeds, nuts and unprocessed whole grains. The amount is reduced when these plant-based foods are soaked in water or cooked. There is no evidence for it causing physical symptoms.	People who believe they have developed symptoms due to ingestion of phytic acid should be assessed for neuroplastic symptoms (NS).
Piriformis syndrome	This condition is purported to be caused by tension and tightness of the gluteal (buttock) muscles, particularly the piriformis muscle. This then compresses nerve roots coming out of the spine. This theoretically would cause sciatic pain going down into the leg on the affected side, causing "muscular sciatica." However, most people diagnosed with piriformis syndrome do not have sciatic pain, but have localized pain in the buttock. This syndrome has never been validated to be a disease state. Most people diagnosed with this syndrome actually have neuroplastic symptoms (NS).	If routine testing shows no evidence for a disease state, neuroplastic symptoms (NS) should be strongly considered.
Pityriasis Rosea	A rash most often seen on the trunk or neck that typically begins with a "herald" (first sign) patch on the trunk and may have a Christmas tree pattern on the back.	Self-limited (typically goes away in 6-12 weeks) skin condition often found in younger people. No clear neuroplastic symptoms (NS) connection.
Plantar Fasciitis	Inflammation of a thick band of tissue that connects the heel bone to the toes.	Not caused by neuroplastic symptoms (NS) but if the symptoms or the course over time are not typical or the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) should be done.
PMS	see Pre-Menstrual Syndrome	x
Pollen Food Allergy Syndrome	see Oral Allergy Syndrome	x
Polycystic Ovary Syndrome	see PCOS	x

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Poor Posture	When the head, shoulders or spine deviate from ideal alignment.	Sometimes blamed for symptoms when no organ disease or structural abnormality is found but neuroplastic symptoms (NS) are a far more likely explanation.
Post surgical pain with no structural explanation.	Pain following surgery that is not explained by an abnormal organ or structure.	Assessment for neuroplastic symptoms (NS) are highly recommended.
Post-Cholecystectomy Syndrome	Describes symptoms occurring after the removal of the gallbladder. Most commonly refers to persistence of the symptoms that led to the surgical removal of the gall bladder.	Assessment for neuroplastic symptoms (NS) are recommended. Any condition labeled as a "syndrome" (which is a constellation of symptoms, or pain) that is vaguely associated with prior surgery, can be a neuroplastic symptoms (NS). Appropriate testing may be indicated first.
Post-Concussion Syndrome	Occurs when symptoms from a concussion last beyond the expected recovery period after the initial injury. The usual recovery period is weeks to months. These symptoms may include headaches, dizziness, irritability and problems with sleep, concentration and memory.	It is reasonable to assess for neuroplastic symptoms (NS) as a contributing factor, particularly when symptoms are atypical, when they persist for longer than expected or when the response to treatment is not as expected.
Postherpetic neuralgia	Pain that is linked to a prior herpes virus infection.	Often an incorrect diagnosis based upon a presumed but not confirmed herpes infection or can be a label applied to a patient with pain out of proportion to physical findings or pain in a location unlikely to be post-herpetic. Assess for neuroplastic symptoms (NS).
Postural Imbalance	When the head, shoulders or spine deviate from ideal alignment.	Sometimes blamed for symptoms when no organ disease or structural abnormality is found but neuroplastic symptoms (NS) are a far more likely explanation.
POTS (Postural Orthostatic Tachycardia Syndrome)	Postural Orthostatic Tachycardia Syndrome is an abnormal increase in heart rate that occurs after rising to a sitting or standing posture. Some typical symptoms include dizziness and fainting.	neuroplastic symptoms (NS) are often a significant contributing factor and should be assessed.
Pneuroplastic symptoms (NS)	see Persistent Postural Perceptual Dizziness	x
Pre-Menstrual Syndrome	Symptoms that occur during the week or two prior to the menstrual period that can include mood swings, tender breasts, food cravings, fatigue, irritability, and depression.	neuroplastic symptoms (NS) can be a significant contributing factor and should be assessed.

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Premenstrual dysphoric disorder (PMDD)	A severe form of premenstrual syndrome that begins a week or two before menses and causes extreme mood shifts that can disrupt work and damage relationships. Symptoms include extreme sadness, hopelessness, irritability, or anger, plus common premenstrual syndrome symptoms such as breast tenderness and bloating. Usually resolves 2-3 days after menstrual bleeding begins.	Issues linked to neuroplastic symptoms (NS) can be a contributing factor and should be assessed.
Proctalgia Fugax	A variant of Levator Ani Syndrome but the discomfort is of shorter duration (less than 20 minutes).	Assessment for neuroplastic symptoms (NS) should be done, particularly if not responding to biofeedback treatment. (One of Dr Clarke's patients had complete relief of this condition after successful treatment of his previously undiagnosed depression.)
Proctitis, Ulcerative	Inflammation of the rectum (the lower few inches of the large intestine, just inside the anus) caused by the body's immune system. Should improve with medication or medicated enemas.	This condition is not caused by neuroplastic symptoms (NS). However, stress management can play a role when Irritable Bowel Syndrome is present simultaneously so neuroplastic symptoms (NS) should be assessed, particularly if symptoms fail to respond to treatment as expected.
Prostatitis	Inflammation of the prostate that can be due to infection.	If infection is ruled out, or treated as such without success, consider a neuroplastic symptoms (NS).
Pruritus	see Itching	x
Pseudoarthrosis	This term is most commonly used to describe a lack of fusion that occurs after an attempted surgical arthrodesis (fusion) of two adjacent vertebrae (spinal bones). Multiple studies have shown that patients with pseudarthrosis are asymptomatic in approximately 30% of cases.	Because so many patients with this condition have no symptoms, when symptoms are present neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.
Pseudogout	See Chondrocalcinosis	x
Psoas Dysfunction or Syndrome	The psoas muscle connects the lumbar (low back) vertebrae (spinal bones) to the femur (long bone of the thigh). When this muscle contracts it lifts (flexes) the thigh. Symptoms attributed to this condition include low back pain, groin pain, pelvic pain, or buttock pain.	People with symptoms attributed to this condition should be evaluated for neuroplastic symptoms (NS) as a potential contributing factor.
Psoriasis	Psoriasis is an auto-immune disorder that can cause a specific rash and arthritic changes in some people. Since it causes some structural disorders, it is not technically neuroplastic symptoms (NS) per se. However, it is known that the brain, stress and emotions can affect the immune system. There are studies showing that psoriasis can respond to mind body interventions.	Consider neuroplastic symptoms (NS) as a potential contributing factor in psoriasis, especially when the disorder begins with or is exacerbated by stressful life events. One can treat psoriasis with medications, with neuroplastic symptoms (NS) treatment, or with a combination of both.

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Psychogenic Non-epileptic Seizures	The patient has the appearance of a seizure typically with uncontrolled movement of large muscle groups and apparent loss of consciousness. However, this occurs without the associated electrical disturbances in the brain (seen on electroencephalogram, also known as EEG or 'brain wave' tracings) that confirm a diagnosis of epilepsy.	This is a form of neuroplastic symptoms (NS). Research has shown a strong association with childhood sexual abuse.
Pubic Symphysis, Degenerative Change	The pubic symphysis is a joint between the left and right pubic bones and is in the front of the pelvis. Synonyms for this condition include pubo-sacroiliac arthropathy, pelvic insufficiency, symphysis pain syndrome, pelvic joint syndrome, pelvic girdle pain, pelvic relaxation syndrome and most of all symphysis pubis dysfunction. Symptoms attributed to this condition (often diagnosed during or soon after pregnancy) include discomfort and pain in the pelvic area, including pelvic pain radiating to the upper thighs and perineum (area between the genitals and the anus).	People with symptoms attributed to this condition should be assessed for neuroplastic symptoms (NS) which is often a significant contributing factor.
Pyloric Stenosis	Structural narrowing (stenosis) of the junction (the pylorus) between the stomach and the beginning of the small intestine (duodenum) usually caused by scar tissue due to past or present peptic ulcer.	Usually does not cause symptoms unless there is an active peptic ulcer or because the narrowing is delaying the emptying of the stomach. If neither of these is present the patient's symptoms might be due to neuroplastic symptoms (NS) so this should be assessed.
Pyroluria	Pyroluria promoters claim that it is a genetically-determined chemical imbalance associated with synthesis of hemoglobin (the molecule that carries oxygen in your blood). People with the condition are said to produce too much kryptopyrrole as a byproduct of hemoglobin production which is then excreted in the urine. Proponents suggest that this excess kryptopyrrole binds vitamin B6 and zinc, making them unavailable for their usual biological roles, and then excretes them through the urine as pyrroles. Accordingly, sufferers may exhibit signs of vitamin B6 and zinc deficiency which could possibly account for symptoms like depression, anxiety, mood swings, nervousness, and a litany of other suggested ills. There is no scientific evidence that supports this theory.	People with symptoms attributed to this condition should be assessed for neuroplastic symptoms (NS) and also have their symptoms assessed by a physician who practices evidence-based medicine.
Racing Heart	Also known as palpitations, this is a feeling of having a fast-beating, fluttering or pounding heart. Stress, anxiety, exercise, caffeine, medication or, rarely, a medical condition (such as an overactive thyroid) can trigger it.	Episodes of racing heart can definitely be triggered emotionally. Assessment for neuroplastic symptoms (NS) are recommended, especially if no other cause is found.

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Ramsay Hunt Syndrome	A rare neurological disorder caused by a virus and characterized by paralysis of the facial nerve (facial palsy) and a rash affecting the ear or mouth. Ear abnormalities such as ringing in the ears (tinnitus) and hearing loss may also be present.	Not caused by neuroplastic symptoms (NS).
Raynaud's Syndrome or Disease	A condition that causes some areas of the body — such as fingers and toes — to feel numb and cold in response to cold temperatures or stress. The cause is constriction of the smaller arteries that supply blood to the skin (vasospasm), limiting blood flow to affected areas which might also include the nose, lips or ears. This can cause the skin color of the affected area to become more pale or more blue. Most cases have no known cause other than exposure to cold but some result from an autoimmune disease, circulation disorders, past trauma to the affected area, smoking or certain medications.	Not caused by neuroplastic symptoms (NS).
Reactive Arthritis	Joint pain and swelling triggered by an infection in another part of the body — most often the intestines, genitals or urinary tract. Reactive arthritis usually affects knees, ankles or feet. Inflammation also can affect eyes, skin and urethra (the tube that empties the urinary bladder).	Not caused by neuroplastic symptoms (NS) but if symptoms or the course over time are not typical or the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Recurrent Corneal Abrasion	Recurring breakdown of the cornea which is the clear covering of the pupil (the dark opening in the center of the eye) and the iris (colored part or the eye surrounding the pupil). Can cause pain, light sensitivity and tears.	This is an eye scratch-- if accurately diagnosed it is not neuroplastic symptoms (NS)
Reflux	see GERD	x
Restless Legs syndrome	Restless legs syndrome (RLS) is a condition that causes an uncontrollable urge to move your legs, usually because of an uncomfortable sensation. It typically happens in the evening or nighttime hours when the patient is sitting or lying down. Moving eases the unpleasant feeling temporarily.	It is reasonable to assess for neuroplastic symptoms (NS) as a potential contributing factor.
Reversed Neck Curve	Normally the spinal bones (vertebrae) in the neck bend slightly forward (toward the chin) like the letter 'C'. When the neck curve is reversed the vertebrae bend in the opposite direction (toward the back). Symptoms attributed to this condition include neck stiffness or pain, reduced range of motion of the neck, shoulder stiffness and headache though these links can be difficult to prove.	This is a common x-ray finding that can be caused by chronic neck muscle spasm. This spasm might be due to neuroplastic symptoms (NS) which should be assessed.

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Rheumatoid Arthritis	A chronic (long-term) inflammatory (characterized by swelling, redness, pain and loss of function) autoimmune (the body's immune system is attacking elements of the body itself) disorder affecting many joints, including those in the hands and feet.	Not caused by neuroplastic symptoms (NS). However, a study showed that in addition to medication, journaling about emotions can help alleviate pain from this condition.
Rosacea	A skin condition that causes redness, flushing, dilation of blood vessels, pimples and/or pus-bumps on the face. Rosacea is most common in middle-aged women with fair skin. It can be mistaken for acne.	Emotional stress is the second most common trigger for Rosacea after sun exposure.
Ross River Virus	A virus endemic to Australia, Papua New Guinea and other islands in the South Pacific that can cause joint inflammation that can last up to 3-6 months.	Not caused by neuroplastic symptoms (NS). However, patients with symptoms of longer than six month's duration that are attributed to this virus should be evaluated for neuroplastic symptoms (NS).
Rotator Cuff Tendonitis	Inflammation of one of the tendons of the rotator cuff, a structure that consists of four muscles and their associated tendons around the shoulder.	Often caused by overuse of the shoulder. Usually treated successfully with physical therapy and anti-inflammatory medications. If there is no response to treatment and no significant structural abnormality on imaging studies, then evaluate for neuroplastic symptoms (NS).
Sacro-Iliac Instability	Instability of the joint between the tailbone (sacrum) and hip bone (ilium) found most often following pregnancy or physical trauma. Symptoms attributed to this condition include pain in the low back, buttocks, hips and/or groin.	People with persistent symptoms attributed to this condition should be evaluated for neuroplastic symptoms (NS), particularly if the symptoms are not typical or if recovery is prolonged.
Sacrum Subluxation	When the joint between the tailbone (sacrum) and the hip bone (ileum) is out of alignment (is subluxed). A vague diagnosis, more commonly made by chiropractors.	Pain in the sacral area is often a neuroplastic symptoms (NS) and more likely soft tissue than bone related.
Scar tissue	Tissue that is replaced largely by collagen (a tough, fibrous protein) after an accident, injury or surgery. May be thickened on or under the skin.	See adhesions. Symptoms are often incorrectly attributed to scar tissue which does not contain nerves. Look for other reasons for the symptoms, including neuroplastic symptoms (NS).
Sciatica	see Pain, Sciatica	x
Scoliosis	Sideways (to the left or right) curvature of the spine.	Patients whose spine pain is attributed to this condition should be evaluated for neuroplastic symptoms (NS) as a potential significant contributing factor.

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Seasonal Affective Disorder	Depression or depressive symptoms that occur during winter months.	Some people respond to light therapy, others to a change in scenery or a vacation in a sunnier location. For others, the emotional and physiological aspects of shorter days and less sunlight can be addressed with psychotherapy. Evaluation for neuroplastic symptoms (NS) can be helpful.
Seborrhea	A skin condition that causes scaly patches and red skin, mainly on the scalp. It can also occur on oily areas of the body, such as the face, upper chest, and back. In addition to scaly patches and red skin, seborrheic dermatitis can cause stubborn dandruff.	Evaluation for neuroplastic symptoms (NS) should be done as part of a complete assessment.
Seizures, Absence	A form of epilepsy that causes the patient to blank out, lose awareness and stare into space for up to 15 seconds. They were previously called petit mal seizures. Absence seizures are most common in children and typically don't cause any long-term problems.	Not due to neuroplastic symptoms (NS) but if the symptoms are atypical or response to treatment is not as expected then neuroplastic symptoms (NS) should be evaluated as a potential cause.
Seizures, PNES	see Psychogenic Non-Epileptic Seizure	x
Shin Splints	Pain in the large bone of the lower leg caused by overworking of muscles, tendons and bone.	A biomechanical issue treated by changing shoes, exercises, ice. If it becomes chronic, neuroplastic symptoms (NS) can be a component.
Shingles	Shingles consists of a specific rash over one region of the body, which is often acutely painful. It is caused by an infection with the Varicella zoster virus (VZV), which is a type of herpes virus. The acute pain is due to irritation of the nerve roots affected by the virus. Once the rash is healed, the pain usually subsides. Persistent pain after the rash has healed is likely due to neuroplastic symptoms (NS), especially when the pain persists for longer than a few weeks to a few months and when the pain becomes intermittent.	Consider neuroplastic symptoms (NS) for post-herpes zoster pain. The acute shingles infection is not due to neuroplastic symptoms (NS).
Shortness of Breath	A sensation that breathing is insufficient for the body's needs that can cause intense tightening in the chest, air hunger, difficulty breathing, breathlessness or a feeling of suffocation. The medical term is dyspnea.	Many reasons and medical causes (heart, lungs) must be excluded. There are people with 'dyspnea' or shortness of breath for whom it is a neuroplastic symptoms (NS) (anxiety/stress) so this should be assessed when no other cause is found.
Shoulder Impingement	Shoulder pain caused by inflamed connective tissue due to a tendon rubbing on a shoulder blade (scapula). Pain is usually increased with lifting or reaching movements.	Not caused by neuroplastic symptoms (NS) but if the symptoms are not typical or the course over time or response to treatment are not as expected then neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.

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Shoulder, Frozen	Frozen shoulder, also known as adhesive capsulitis, is a condition characterized by stiffness and pain in the shoulder joint most often caused by inflammation (swelling, pain and irritation) of the tissues surrounding the joint. The tissue that envelops the shoulder and holds it together is called the capsule. Normally the capsule has folds that can expand and contract as the arm moves into various positions. In a frozen shoulder, the capsule has become inflamed and scarring (called adhesions) develops. As the capsule's folds become scarred and tightened, shoulder movement becomes restricted and moving the joint becomes painful. Signs and symptoms typically begin gradually, worsen over time and then resolve, usually within one to three years.	neuroplastic symptoms (NS) can be a contributing factor in some patients, particularly those whose condition is prolonged or fails to respond as expected to treatment. Therefore assessment for neuroplastic symptoms (NS) should be done, particularly before any treatment that carries significant risk.
Shoulder, Separation	Usuallly from acute trauma.	Not neuroplastic symptoms (NS). This is an acute structural issue.
SI Joint Instability or Incompetence	See Sacro-Iliac Instability	x

SIBO	Small Intestinal Bacterial Overgrowth (SIBO) occurs in people with reduced propulsive contractions of the small intestine, a 5-meter long organ that connects the stomach to the large intestine. Reduced contractions can develop for any of a variety of reasons but partial obstruction (from scar, inflammation or tumor) and reduced neuromuscular activity are the most usual.	Biomechanical causes of SIBO are not common and most people who get tested for SIBO don't have them. Instead, they have GI symptoms with no biomechanical explanation. So these patients actually suffer from a form of Irritable Bowel or Functional Dyspepsia which usually have a strong Psychophysiologic Disorder contribution. But the SIBO test is prone to false positives (an abnormal result in a healthy person) so some of these patients have a positive test (that is incorrect) and get treated with antibiotics. This happens regularly because so many physicians are not aware of neuroplastic symptoms (NS) and are glad to find an abnormal test that "explains" a patient's symptoms. Adding to the difficulty, in some patients their neuroplastic symptoms (NS) are severe enough to slow their gastrointestinal motility. One of Dr Clarke's patients had a paralyzed stomach that was completely relieved with treatment of her neuroplastic symptoms (NS). Another averaged one bowel movement per month despite four different laxatives (simultaneously) in double the recommended doses. Had they been tested for SIBO, both likely would have had a true positive test. But antibiotics would not have been appropriate because of the significant psychosocial issues in these patients. Both of those patients (and quite a few others like them) had complete relief of their symptoms with mind-body treatment in 2-3 months. Bottom line: unless the patient with a positive SIBO test has a biomechanical or neuromuscular reason for reduced small bowel contractions, they will likely respond best to neuroplastic symptoms (NS) treatment.
Sinuses, Obstructed	Sinuses are hollow air chambers in the skull that are linked to the airway in the nose.	A blockage of the sinus orifice (opening) can cause pain. This can be treated with irrigation by a salt solution or certain nasal sprays and this usually relieves the problem. If the symptoms are not typical, their course over time is not typical or the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) should be done.
Sinusitis, Chronic	Sinuses are hollow air chambers in the skull that are linked to the airway in the nose (the nasal cavity). Some people with allergies develop chronic inflammation of a sinus (sinusitis) as they age.	Topical treatments can help. Patients should be evaluated for allergies. Rarely this can be a chronic pain condition that might benefit from a neuroplastic symptoms (NS) assessment.

Sleep Problems	Refers to conditions that affect sleep quality, timing, or duration and impact a person's ability to properly function while they are awake. Subtypes include insomnia, sleep apnea, narcolepsy, restless leg syndrome, shift work disorder and disruptions of circadian (24 hour cycle) rhythm.	neuroplastic symptoms (NS) can be a contributing factor in many patients with a sleep disorder.
Slipping Rib Syndrome	Ribs are the bones in the chest that wrap around the upper body linking the breastbone (sternum) to the spine. This diagnosis refers to pain in the lower chest or upper abdomen which is attributed to the lower ribs (the ones not directly connected to the breastbone) moving a little more than normal.	neuroplastic symptoms (NS) should be assessed in patients whose pain is attributed to this condition as an essential part of a complete evaluation.
Small Intestinal Bacterial Overgrowth	See SIBO	x
Sneezing	A sudden involuntary expulsion of air from the upper airway (primarily nose and mouth) due to irritation of one's nostrils. Sneezes can also be triggered by cold air, a bright light or following a seizure.	Frequent sneezing can result from an allergy or chronic inflammation of the nasal cavity but if evidence of these is lacking then assessment for neuroplastic symptoms (NS) are reasonable.
Spasmofilia	An abnormal tendency to convulsions or tetany (muscle spasms) from even slight mechanical or electrical stimulation. Can be associated with stress, anxiety or panic.	Assessment for neuroplastic symptoms (NS) are recommended as part of a complete evaluation.
Spastic Colon	see Irritable Bowel Syndrome	x

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Sphincter of Oddi Dysfunction	Spasm of a small muscle that controls the flow of bile (flowing down a duct that connects to the liver and gall bladder) and digestive proteins (from a duct in the pancreas). The flow is into the beginning of the small intestine where food enters as it leaves the stomach. This spasm is an uncommon cause of pain attacks in the upper abdomen. When a pain attack in the upper abdomen is associated with increases in blood tests that indicate impaired bile flow (the Alkaline Phosphatase test) or an inflamed pancreas (the amylase test) then the most likely cause is a gallstone that is at least temporarily obstructing the sphincter of Oddi. If no gallstones are found then muscle spasm of the sphincter of Oddi is a possibility. If so, the pain attacks will likely be alleviated by cutting this muscle (under sedation) using a camera tube (endoscope). This procedure has a small but definite risk of complications, however. In some cases gallstones and sphincter of Oddi spasm can cause pain even when these blood tests are normal. Some physicians will attribute abdominal pain to this condition with no evidence apart from a lack of other causes for the pain being found.	This uncommon condition is sometimes considered as an explanation for attacks of abdominal pain when more common causes for the pain are not present. Assessment for neuroplastic symptoms (NS) are strongly recommended in such patients before invasive treatment is done, especially when blood tests obtained during an episode of pain are normal.
Spinal Facet Syndrome	Inflammation of the facet joints where the bones of the spine (vertebrae) meet. These joints lie behind (posterior to) the main body of the vertebral bone.	Back pain is often attributed to this condition but this is often inaccurate. Evaluate for neuroplastic symptoms (NS), especially when the patient has failed injections and nerve blocks for facet issues.
Spinal Instability	Spinal discs are made of fibrous connective tissue and are located between the vertebrae (spinal bones) where they serve as shock absorbers. Spinal instability refers to a condition that occurs when the spinal discs begin to degenerate. The bulge of the disc decreases and begins to lose height. This causes the vertebrae to displace from their anatomical position and override the disc.	Spinal instability can be found in people with no symptoms. Therefore, before attributing symptoms to this condition, patients should be assessed for neuroplastic symptoms (NS) and (when found) treated for it before invasive treatment of the spine.
Spinal Stenosis	Narrowing (stenosis) of the spinal canal. The spinal canal is a long hollow tube surrounded by the vertebrae (spinal bones) that contains the nerves of the spinal cord. This narrowing commonly accompanies aging and can put pressure on the spinal cord or on the spinal nerves as they exit from the canal.	neuroplastic symptoms (NS) are a common contributing factor in symptoms attributed to spinal stenosis. A combination of careful history and exam help determine the likelihood that this condition is causing symptoms. For example, when the location of pain, numbness or weakness fails to match the MRI findings, neuroplastic symptoms (NS) are more likely.
Spinal Stiffening	Spines can become more stiff as we age, but this is not a source of pain. There is a small number of pathologic conditions that cause true rigidity such as Anklylosing Spondylitis.	If symptoms are attributed to this condition then neuroplastic symptoms (NS) should be assessed as part of a complete evaluation.

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Spine Anterolisthesis (see Spondylolisthesis, Anterior)	x	x
Spine, Degenerative Disc Disease	Spinal discs are made of fibrous connective tissue and resemble shock absorbers between the vertebrae (bones of the spine). With normal aging they can become thin or crack but most people with these changes experience no symptoms.	A majority of people with spine pain have neuroplastic symptoms (NS) even when x-ray/MRI show disc degeneration. So assessment for neuroplastic symptoms (NS) are highly recommended as part of a complete evaluation, particularly when there is no evidence of damage to a nerve such as numbness/tingling, muscle weakness or bowel/bladder problems.
Spine, Disc Degeneration	See degenerative disc disease.	x
Spine, Disc Herniation	Spinal discs are made of fibrous connective tissue and function as shock absorbers between the vertebrae (bones of the spine). Disc bulging and disc herniation describe rupture of the material holding the spinal discs in place and oozing of disc material outside of this capsule. These phenomema occur in all people at some point in their lives, but usually this does not cause any symptoms. Magnetic Resonance Imaging (MRI) studies of healthy people with no back pain shows that an increasing proportion have evidence of disc bulges (40% at age 30; 60% at age 50; and 80% at age 70) and disc herniations (30-40% at all age ranges of adults). Small to medium disc bulges rarely cause any symtpoms, while very large herniations may do so. However, even large herniations tend to resolve on their own within weeks to months. Persistent pain should rarely be attributed to these bulges or herniations.	Acute pain can occur due to very large disc herniations, but chronic pain is rarely due to this. neuroplastic symptoms (NS) can be ruled in with a careful evaluation and should be routinely assessed as part of a complete evaluation.
Spine, upper cervical instability	In this condition the cervical vertebrae (bones of the spine in the neck) are able to move beyond their normal range of motion, usually due to ligaments that are unnaturally loose or stretched out. Symptoms attributed to this condition include inability to hold up the head for an extended period of time, upper neck pain near the skull, referred pain to the shoulders, the head feeling heavy, tightness or stiffness in neck muscles, tenderness of the neck, headaches, shaking or unstable feeling in the neck/head, and dizziness/imbalance. This condition does not have reliable diagnostic criteria.	Most symptoms attributed to this condition are likely due to neuroplastic symptoms (NS) which should be assessed routinely as part of a complete evaluation.

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Spondyloarthritis, Axial	A chronic inflammatory disease predominantly affecting the axial skeleton which consists primarily of the sacroiliac joints (between tailbone and hip bones) and the spine. This diagnosis is applied to people with pain and stiffness of these joints but who have not developed abnormalities visble by x-ray. (These might develop in the future in some cases.)	Not due to neuroplastic symptoms (NS) but some people whose pain and stiffness are attributed to this condition have neuroplastic symptoms (NS) instead or as a significant contributing factor. Therefore neuroplastic symptoms (NS) should be assessed as part of a complete evaluation, particularly if the response to treatment (usually non-steroidal anti-inflammatory medication such as ibuprofen and physical therapy) is less than anticipated.
Spondylolisthesis, Anterior	A disorder in which a vertebra (spinal bone) has moved anteriorly (forward) relative to the bone below it. Can cause compression of a nerve as the nerve passes from the spinal cord to the body.	Not caused by neuroplastic symptoms (NS) but neuroplastic symptoms (NS) could be a contributing factor if symptoms are not typical (such as pain not at the location of the compressed nerve) or do not respond to treatment as expected.
Sternoclavicular dislocation	Dislocation at the joint of the sternum (breastbone) and clavicle (collarbone). Occurs as a result of physical trauma. The collarbone can be dislocated away from the spine (anteriorly) or toward the spine (posteriorly).	Not due to neuroplastic symptoms (NS) but if pain persists for longer than a few weeks to a few months (which is not usual) then neuroplastic symptoms (NS) should be assessed as a possible contributing factor.
Sub-acromial impingement syndrome (shoulder)	Inflammation and irritation of the shoulder tendons (rotator cuff tendons) as they pass through the space on top of the humerus (upper arm bone) in the shoulder joint. This can result in pain, weakness, and reduced range of motion within the shoulder.	Usually a biomechanical issue that improves with Physical Therapy or injections. However, as with so many conditions listed here, if the symptoms are atypical or fail to respond as expected to treatment then evaluation for neuroplastic symptoms (NS) are reasonable as part of a complete evaluation.
Superior Mesenteric Artery Syndrome	A rare condition in which the duodenum (beginning of the small intestine), is compressed a few inches from its connection to the stomach. The compression is between the abdominal aorta (AA) and the overlying superior mesenteric artery (SMA). Signs and symptoms include feeling full sooner than usual, nausea, vomiting, extreme "stabbing" abdominal pain after meals, abdominal distention/distortion, burping, tenderness of the abdominal area, reflux, and heartburn. Diagnosis can usually be confirmed by Upper GI Series x-ray or Abdominal CT scan. Most often occurs in people who are underweight since low levels of fat in the abdomen can predispose to the condition.	neuroplastic symptoms (NS) should be assessed as part of a complete evaluation, particularly if the diagnostic evaluation does not completely confirm the diagnosis.

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Surgical Incision Symptoms	The skin is cut open during most surgical procedures. This is a form of injury. Like other injuries it will heal, with or without the formation of a scar. Once the incision has healed (or often before), the pain associated with it resolves even if there is a scar, because scars have no nerve fibers and don't cause pain. Scars also do not disrupt the underlying tissues. Pain that persists in an area of an injury that has healed, whether the injury was due to surgery or some other damage, is not due to a structural cause. It is due to neuroplastic symptoms (NS).	neuroplastic symptoms (NS) are highly likely in individuals with pain following the healing of a surgical incision or other skin or soft tissue injury.
Systemic Exertion Intolerance Disorder	See Chronic Fatigue Syndrome	x
Tarlov Cyst	Benign cyst of the spine that rarely, if ever, causes pain.	neuroplastic symptoms (NS) are a more likely cause of spine symptoms than this condition. Before attributing symptoms to this condition, assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Tarsal Tunnel Syndrome	The tarsal tunnel is a structure in the foot akin to the carpal tunnel of the wrist.	While nerve compression can occur and detailed exam and nerve testing may confirm, some clinicians attribute a vague type of foot pain to this condition that is more likely due to neuroplastic symptoms (NS). Therefore, if nerve compression is not confirmed, assessment for neuroplastic symptoms (NS) should be done.
Teeth Grinding (see Bruxism)	Excessive clenching or grinding of the teeth, worse at night	Caused by tension, stress, neuroplastic symptoms (NS). Measures like bite plates and night guards are temporizing measures.
Telogen effluvium	Stress-related hair loss that is typically short-term and transitory. It can be triggered by many stressors including: emotional stress, chronic illness, pregnancy, autoimmune disease, poor diet, certain medications.	After ruling out relevant medical conditions, such as thyroid disease or other endocrine (gland/hormone) problem, or nutritional deficiencies, neuroplastic symptoms (NS) evaluation is appropriate in patients with this diagnosis and neuroplastic symptoms (NS) treatment can reverse it.
Temporo-Mandibular Joint Pain (see Pain, Temporo-Mandibular Joint)	x	x
Tendonitis (see Pain, Tendonitis)	x	x

Tendonitis, Rotator Cuff	Inflammation of the tendons of the rotator cuff which consists of four muscles attached to the shoulder blade and the tendons that connect them to the humerus (upper arm bone).	If the symptoms or the course over time are not typical or the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) should be done.
Tennis Elbow	Tennis elbow describes an inflammation of ligaments at the inside or the outside of the elbow due to an overuse injury, i.e., using the arm to the point of damage to it. This sort of injury will heal with rest. Pain that increases with rest or persists after rest is highly likely to be due to neuroplastic symptoms (NS). A careful evaluation will determine the source of the pain. Pain that persists with movements of the elbow can be due to conditioned responses rather than ongoing injury.	Consider neuroplastic symptoms (NS) as highly likely when elbow pain persists after healing would have occurred.
Thoracic Outlet Syndrome	Thoracic outlet syndrome affects the space (called the thoracic outlet) between the clavicle (collarbone) and first (top) rib. Nerves and/or blood vessels in this space can be compressed by trauma, repetitive injuries, pregnancy, and anatomical defects, such as having an extra rib. Symptoms include pain, numbness and tingling, and sometimes weakness in the arm and the hand, particularly the ring and small finger. Neck and shoulder pain can also occur. Symptoms typically increase when raising the affected arm.	If the symptoms or the course over time are not typical or the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) should be done.
Thrush	Candidal (yeast) infection in the mouth.	In infants due to moisture in the mouth from milk. In adults, a variety of causes but not neuroplastic symptoms (NS).
Thyroid, Grave's Disease	A disease in which the body makes antibodies (proteins) that attack the thyroid gland causing levels of thyroid hormones in the body to rise. This increase is called hyperthyroidism. See Thyroid, Hyperthyroidism below for symptoms.	Not caused by neuroplastic symptoms (NS) but if symptoms are atypical or fail to respond to treatment as expected then assessment for neuroplastic symptoms (NS) should be done as part of a complete assessment.
Thyroid, Hyperthyroidism	An increased level of thyroid hormones. Symptoms can include an enlarged thyroid gland, nervousness, anxiety, irritability, having a lot of nervous energy, mood swings, difficulty sleeping, feeling tired all the time, sensitivity to heat, muscle weakness, or diarrhoea.	Not due to neuroplastic symptoms (NS) but symptoms that are atypical or that do not respond to treatment as expected should be assessed for neuroplastic symptoms (NS).
Thyroid, Hypothyroidism	A decreased level of thyroid hormones. Symptoms can include fatigue, sensitivity to cold temperatures, a puffy face, constipation, enlargement of the tongue, pale dry skin and brittle nails, hair loss, weight gain, muscle aches and joint pain, depression, memory lapses, or heavy menstrual bleeding.	Not due to neuroplastic symptoms (NS) but symptoms that are atypical or that do not respond to treatment as expected should be assessed for neuroplastic symptoms (NS).

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Thyroiditis, Autoimmune	The thyroid is a small butterfly-shaped gland located in the neck in front of the windpipe. It makes hormones that help regulate the body's weight, energy levels, internal temperature, skin, hair, nail growth, and more. When your body makes antibodies that (by mistake) attack the thyroid, the condition is called autoimmune thyroiditis, chronic lymphocytic thyroiditis, Hashimoto's thyroiditis, or Hashimoto's disease. If not treated, thyroid hormones can increase initially (see Thyroid, Hyperthyroidism for symptoms) follwed by damage to the thyroid that can result in reduced levels of thyroid hormones (see Thyroid, Hypothyroidism for symptoms).	Not caused by neuroplastic symptoms (NS) but if symptoms are atypical or fail to respond to treatment as expected then assessment for neuroplastic symptoms (NS) should be done as part of a complete assessment.
Thyroiditis, Hashimoto's. See Thyroiditis, Autoimmune	x	x
Tietze Syndrome	Tietze syndrome is an inflammation of the costochondral (rib) cartilages (tough, rubbery connective tissue) of the upper front of the chest. This causes swelling of the joint between the rib(s) and the breastbone (sternum). Costochondritis, a similar condition involving pain in the same area of the front of the chest, is not associated with this swelling, whereas in Tietze syndrome swelling is characteristic.	Not caused by neuroplastic symptoms (NS) but if symptoms or the course over time or response to treatment are atypical or not as expected then assessment for neuroplastic symptoms (NS) should be done.
Tight hip flexors	The hip flexors are a group of muscles that connect the spine and ilium (hip) to the femur (long bone of the thigh). When they contract they lift the leg.	Many symptoms have been attributed to this condition that are more likely due to neuroplastic symptoms (NS) which should therefore be assessed. As for the muscles themselves: Stretch them.
Tingling Sensation	The technical term is paresthesia which refers to a skin sensation that can be described as tingling, numbness, skin crawling, itching, burning or prickling that is usually felt in the hands, arms, legs, or feet, but can also occur in other parts of the body. The sensation, which happens without warning, is usually painless.	If diagnostic evaluation fails to uncover any nerve disease or damage responsible for the sensation then assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Tinnitus	The perception of noise or ringing in the ears that affects about 15 to 20 percent of the population and is usually a symptom of an underlying condition, such as age-related hearing loss, ear injury or a circulatory system disorder.	Hearing Evaluation should be done first. neuroplastic symptoms (NS) are often a significant factor so this should be assessed as part of a complete evaluation. Less attention to the symptom can help a lot, too.
TMJ (see Pain, Temporo-Mandibular Joint)	x	x

Torticollis, Spasmodic	See Cervical Dystonia	x
Transverse Myelitis	Inflammation of the spinal cord. The spinal cord carries nerve signals to and from the brain through nerves that extend from each side of the spinal cord and connect to the body. Myelitis refers to inflammation of the spinal cord; transverse refers to the pattern of changes in sensation—there is often a band-like sensation across the trunk of the body, with sensory changes below. Causes include infections, immune system disorders, and other conditions that may damage or destroy myelin (the fatty white insulating substance that covers nerve cell fibers) such as multiple sclerosis. Myelin damage interrupts communications between nerves in the spinal cord and the rest of the body, affecting sensation and nerve signals below the injury. Symptoms include pain, sensory problems, weakness in the legs and possibly the arms, and bladder and bowel problems. The symptoms may develop suddenly (over a period of hours) or over days or weeks. Some people recover from transverse myelitis with minor or no residual problems, in others the healing process may take months to years or lead to permanent impairments. Some individuals will have only one episode of transverse myelitis; other individuals may have a recurrence, especially if an underlying illness caused the disorder.	Though most patients with this condition do not have neuroplastic symptoms (NS), it is reasonable to assess for neuroplastic symptoms (NS) when diagnostic evaluation shows no definite cause, when symptoms are atypical (or don't correspond to the neuroanatomically damaged area) or when the clinical course or response to treatment differ from what is expected.
Tremor, Essential	A nervous system disorder that causes involuntary and rhythmic shaking. It can affect almost any part of the body, but occurs most often in the hands — especially when doing simple tasks, such as drinking from a glass or tying shoelaces.	Can occur in more than one member of a family. Can be worsened by stress. Assessment for neuroplastic symptoms (NS) are often reasonable as part of a complete evaluation, particularly if the symptoms are not typical or not consistently present.
Tremor, Intention	A shaking of the hand that occurs with intentional movement.	Not neuroplastic symptoms (NS)
Trigeminal Neuralgia	see Neuralgia, Facial	x
Trigger Finger	A finger that seems to catch when bending and may need the other hand to straighten it out or bend; can be intermittent.	This is a mechanical issue and not neuroplastic symptoms (NS).
Trochanteric bursitis	Inflammation of this bursa (fluid-filled sac near a joint) is a common cause of hip pain. The bursa is next to the lateral (outer) part of the upper femur (thigh bone) that is called the greater trochanter which is part of the hip.	Not neuroplastic symptoms (NS). If correctly diagnosed, inflammation of the bursa is treated by ice, non-steroidal anti-inflammatory drugs (example is ibuprofen) or injection.

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Tumor	Benign (non-cancerous, usually localized) or malignant (cancerous, capable of spread to distant locations) collection of cells or tissue growing independently of the associated organ or structure. Might be detected as part of a diagnostic evaluation for a symptom caused by the tumor or might be found incidentally by a test that was investigating for something else. Benign tumors found incidentally are less likely to be responsible for the patient's symptoms.	Not caused by neuroplastic symptoms (NS) so the first step is to determine if the patient's symptoms are linked to the tumor. If it is possible they are not linked, then assessment for neuroplastic symptoms (NS) should be done.
Ulcerative Colitis	See Inflammatory Bowel Disease	x
Under-methylation	Many physical and mental symptoms have been attributed to this condition which has no scientific foundation.	Patients labeled with this term should be assessed for neuroplastic symptoms (NS).
Unspecified	Adjective that indicates a condition is not linked to an organ disease or structural abnormality in a way defined by medical science.	neuroplastic symptoms (NS) are a common cause of symptoms or conditions with this label.
Upper Crossed Syndrome	In UCS the muscles in the back of the neck and shoulders (upper trapezius, and levator scapula) become overactive and strained while the muscles in the front of the chest (the major and minor pectoralis muscles) become shortened and tight. Often attributed to sitting (or standing) with the head forward for prolonged periods (such as when using a computer/smartphone or driving) and associated with exaggerated spinal curvature. A wide range of symptoms has been attributed to this condition including pain, particularly in the neck and upper back, but also headache, shoulder pain and low back pain and even pain in the jaw or restricted range of motion of the neck or shoulder.	Patients labeled with this term should be assessed for neuroplastic symptoms (NS) which can contribute significantly to the symptoms attributed to UCS.
Urinary Frequency (without infection)	See Urination, Frequent.	x
Urinary Tract Infection, Chronic	Bacterial infection of the urinary bladder, the kidney or the tube that connects them (the ureter) that persists or recurs frequently.	Not due to neuroplastic symptoms (NS) unless the symptoms persist despite elimination of the infection in which case assessment for neuroplastic symptoms (NS) are likely to be helpful.
Urination, Frequent	Urination more than the usual 4-8 times per day can have any of a number of causes including drinking too much water, anxiety, diabetes, pregnancy, prostate enlargement, urinary tract infection or bladder or kidney disease.	If no organ disease or structural abnormality is found that can explain this condition then the patient should be assessed for neuroplastic symptoms (NS).
Urticaria (see Hives)	x	x

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Uterine Fibroids	Benign muscular growths in the wall of the uterus that can develop during childbearing years.	Usually not associated with pain so before attributing pelvic pain to uterine fibroids it is important to assess for neuroplastic symptoms (NS).
Uveitis	Inflammation of the middle layer of tissue of the eyeball, often involving the iris (colored part surrounding the pupil). Symptoms include redness, pain, light sensitivity, blurred vision, and dark floating spots in the field of vision.	Not due to neuroplastic symptoms (NS) but if the symptoms or course over time are not typical or the response to treatment is not as expected then assessment for neuroplastic symptoms (NS) can be helpful.
Vaginal Atrophy	Thinning, drying and inflammation of the vaginal walls that may occur when the body has less estrogen. Vaginal atrophy occurs most often after menopause. For many women, vaginal atrophy not only makes intercourse painful but also leads to distressing urinary symptoms.	Not caused by neuroplastic symptoms (NS) but if symptoms attributed to this condition are not typical, or if the course over time is not as expected or if the response to treatment is less than anticipated then evaluation for neuroplastic symptoms (NS) should be done as a potential contributor to symptoms.
Vaginismus	The muscles of a woman's vagina squeeze or spasm when something is entering it, like a tampon or a penis. It can range from mildly uncomfortable to quite painful.	neuroplastic symptoms (NS) should be assessed as a potential contributing factor.
Vascular tumor in spinal cord	Also called spinal hemangiomas these are benign tumors composed largely of blood vessels that are most commonly seen in the thoracic (mid-back) and lumbar (lower back) spine. Hemangiomas most often appear in adults between the ages of 30 and 50. They are very common and occur in approximately 10 percent of the world's population. Most cases show no symptoms. Symptomatic hemangiomas represent less than one percent of all hemangiomas, and are more common in women than in men. If left untreated, hemangiomas that are causing symptoms can cause serious neurological damage.	The key diagnostic distinction here is whether the patient has a hemangioma that is causing symptoms or they have an asymptomatic hemangioma and their symptoms are due to neuroplastic symptoms (NS). The former is more likely when the size and location of the hemangioma correspond closely to the nature and location of the patient's symptoms. If there is reason to doubt that the hemangioma is responsible for symptoms then assessment for neuroplastic symptoms (NS) should be done as part of a complete evaluation.
Vertebral Misalignment	A vague term that fails to specify the particular type of misalignment of the vertebrae (bones of the spine).	Rarely of significance if there is no evidence of nerve damage. Symptoms of nerve damage include numbness or weakness that corresponds anatomically to the damaged nerve, pain that occurs from the lower back down the back of the leg affected by the damaged nerve, difficulty walking, pain exacerbated by bending or twisting or (rarely) bladder or bowel control problems. Assessment for neuroplastic symptoms (NS) are recommended if pain is the only symptom, if pain is atypical, if symptoms do not correspond to the particular damaged nerve(s) seen on imaging studies (x-ray or MRI) or the response to treatment is not as expected.

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Vertigo	A patient's sudden sensation that they are spinning or that the inside of their head is spinning.	If no organ disease or structural abnormality is found to explain this condition then the patient should be assessed for neuroplastic symptoms (NS).
Vertigo, Benign Positional	Benign paroxysmal positional vertigo (BPPV) is one of the most common causes of vertigo — the patient has a sudden sensation of spinning or that the inside of their head is spinning, causing brief episodes of mild to intense dizziness. It is usually triggered by specific changes in the head's position.	Not due to neuroplastic symptoms (NS) but if the symptoms or course over time are not typical or the response to treatment is unsatisfactory then assessment for neuroplastic symptoms (NS) can be helpful.
Vestibular Neuritis	Inflammation of the nerves that connect the inner ear to the brain. Can cause symptoms such as sudden, severe vertigo (spinning/swaying sensation), dizziness, balance problems, nausea and vomiting.	Not due to neuroplastic symptoms (NS) but if the symptoms or course over time are not typical or the response to treatment is unsatisfactory then assessment for neuroplastic symptoms (NS) can be helpful.
Vestibulitis	Also called vaginal or vulvar vestibulitis. This causes a stinging or burning pain with redness of the skin & membranes at the vaginal entrance that is provoked by sexual intercourse or the insertion of objects such as a tampon or speculum into the vagina. Vestibulitis usually develops between the ages of 20 and 50 years, often following an infection of the lower genital tract.	If the course of the symptoms over time is not typical or the response to treatment is unsatisfactory then assessment for neuroplastic symptoms (NS) can be helpful.
Vibration sensations inside the body	A shaking or vibrating sensation also known as internal tremors, can affect people with Parkinson's disease, multiple sclerosis, essential tremor or an anxiety disorder. Internal tremors are not harmful.	If there is no Parkinson's disease, multiple sclerosis or essential tremor then assessment for neuroplastic symptoms (NS) are likely to be helpful.
Visual Snow	Also known as visual static, this is a condition in which people see white or black dots in parts or the whole of their visual fields.The condition is typically always present and can last years. There is an association with migraine headache. The cause is unclear.	Assessment for neuroplastic symptoms (NS) as a potential contributing factor is reasonable.
Vitamin deficiency	Inadequate amount of one or more vitamins confirmed by blood test. Can occur due to inadequate intake of a vitamin or to poor absorption from the gut into the circulation.	Depending on the vitamin can cause any of a range of symptoms but these respond rapidly to replenishment of the deficient vitamin. Symptoms that persist after vitamin levels are restored to normal (and that are not due to ongoing disease that caused poor aborption from the gut) should be assessed for neuroplastic symptoms (NS).
VMO, Weak, leading to knee instability and pain	The VMO, or vastus medialis oblique, is one of the four muscles of your quadriceps, located on the anterior (front) thigh. If you flex your quadriceps, the large muscle toward the inner part of your thigh is your VMO.	Not due to neuroplastic symptoms (NS) but if symptoms are considered atypical or if they fail to respond as expected to treatment then assessment for neuroplastic symptoms (NS) should be done.

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Vulvar Vestibulitis (see Vestibulitis)	x	x
Vulvodynia (see Pain, vulvodynia)	x	x
Weight loss, unexplained	Loss of weight that is not intended, particularly if more than 5%, should be evaluated by a physician.	If no organ disease (such as a cancer, adrenal gland insufficiency, gut malabsorption, diabetes, emphysema) is identified to explain the weight loss then assessment for neuroplastic symptoms (NS) are recommended.
Whiplash	Persistent (chronic) neck pain commonly attributed to neck injury due to forceful, rapid back-and-forth movement of the neck, like the cracking of a whip. Neck pain attributed to whiplash most commonly follows rear-end car accidents but can also develop after sports accidents or other trauma.	Several studies cast doubt on the idea that persistent (chronic) pain following these injuries is due to structural damage. These include the absence of this condition in Lithuania (where compensation and litigation for whiplash are absent) and development of typical whiplash pain in about 10% of people subjected to a whiplash simulation that did not actually traumatize the spine. Assessment for neuroplastic symptoms (NS) are recommended in people with persistence of this diagnosis.
Winging Scapula	Protrusion (like a wing) of one of the edges of the shoulder blade (scapula). The particular edge that protrudes depends on which of the muscles attached to the scapula is weak. This weakness is usually due to injury of one or more of the three nerves controlling function of these muscles.	Usually not due to neuroplastic symptoms (NS) and improves with conservative treatment over 6 -24 months but if symptoms, clinical course or response to treatment are not typical or as expected then assessment for neuroplastic symptoms (NS) are reasonable.
Yeast Infection, Chronic	Candida (yeast) infection that persists despite treatment. This is not common but some clinicians attribute a wide range of symptoms to this diagnosis without definitive evidence that the infection persists or even occurred in the first place. This is an "alternative medicine" diagnosis of unclear significance and usually the treatment is worse than the symptoms.	Assess for neuroplastic symptoms (NS).

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