
Preface

This issue of the journal is dedicated to sociology of health. Readers will find five articles that analyze medically unexplained disorders in primary health care. At first sight this topic may seem narrow and not very significant. However, the phenomenon of medically unexplained disorders encompasses very important issues of contemporary health care. Studies done abroad have shown that 50 % of primary care consultations involve physical symptoms without likely organic disease (e.g., lasting fatigue, different types of pain, dizziness, unexplained allergies, etc.). These disorders not only represent a significant clinical problem but also urge the health care system to rethink some of its fundamental assumptions about health and illness, and to realize how basic health care principles are changing, as well as to discuss possibilities for new tendencies in health care system development.

Paradoxically, the term *medically unexplained disorders* that is used in this journal issue is anachronistic to some degree because it emanates from the dominant biomedical approach to health and illness. The phenomenon of medically unexplained disorders is constructed by looking at it from this particular perspective. The biomedical approach focuses on objective physiological causes in defining medically unexplained disorders and it is skeptical about their “unexplainability”. It does not admit peculiarity of this phenomenon. However, at the moment there is no other term beside *medically unexplained disorders* that could be used to describe the phenomenon.

Medically unexplained disorders in many cases do not fit into a conventional framework of the orthodox biomedical approach. Therefore, they invite to broaden prevailing concepts of health and illness and at the same time the paradigm of primary health care itself. From a perspective of postmodern sociological theories the very phenomenon of medically unexplained disorders indicates that in order to improve the health status of contemporary society the biomedical or even the biopsychosocial conception of health is not sufficient. There is a need for a conception of

health and illness that would encompass ailments encoded by the term *medically unexplained disorders*.

Primary health care system involves three social actors – the patient, the doctor and the managers of health care system. Each of these social actors holds their own distinct social position, status and role, and, therefore, differently approaches medically unexplained disorders. First article in this issue focuses on the current situation of medically unexplained disorders in contemporary primary health care system. The authors explain why these disorders should be relevant to societies of late modernity or postmodernity and their sociology. The second article discusses medically unexplained disorders in relation to the International classification of diseases (ICD). It demonstrates how this Classification was modified and improved in order to embrace the postmodern conception of health and illness. The remaining three articles are based on qualitative interviews and survey data. Analyzing the ways in which three social actors (patients, family doctors and managers of primary health care institutions) perceive medically unexplained disorders, the articles disclose conceptions of health and illness that prevail within the primary health care system.

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Guest editor