

Supplementary Table 1: All studies included in the systematic review.

Author (year)	Pain data reported in study	Risk of bias (score on NOS)
Delgado (2022) ¹	Patients with FMD reporting pain = 64/100 (64%)	Moderate (4)
Forejtova (2022) ²	Median PainDETECT (152 patients with mFND) = ~6/10 (IQR = ~4–8)	Low (8)
Gandolfi (2022) ³	Patients with FMD reporting pain = 44/64 (69%) Mean BPI in telemedicine group (32 patients with FMD): Before 5-day programme = 20.69/40 (SD = 14.8) intensity; 31.13/70 (SD = 24.21) interference After 12-week telemedicine programme = 15.44/40 (SD = 13.30) intensity; 20.84/70 (SD = 20.76) interference Mean BPI in self-management group (32 patients with FMD): Before 5-day programme = 17.91/40 (SD = 12.04) intensity; 27.47/70 (SD = 24.82) interference After 12-week self-management programme = 18.63/40 (SD = 13.11) intensity; 27.88/70 (SD = 24.57) interference	Moderate (6)
Geroin (2022) ⁴	Patients with FMD reporting pain = 72/100 (72%)	Low (7)
Gorenflo (2022) ⁵	Chronic pain was more common in female patients with PNES than female patients with epilepsy (odds ratio = 2.96; 95% CI = 1.20–7.34) Fibromyalgia was more common in patients with PNES than patients with epilepsy (odds ratio = 3.66; 95% CI = 1.10–12.25)	Low (7)
Massot-Tarrus (2022) ⁶	Patients with FS reporting pain = 33/194 (17%) Patients with FS and epilepsy reporting pain = 6/47 (13%)	Low (7)
Mostile (2022) ⁷	Patients with FMD reporting pain = 104/188 (55%)	Low (7)
Sandri (2022) ⁸	Patients with FMD reporting moderate or severe pain = 18/60 (30%) Mean pain score = 2.81/5 (SD = 1.37)	Moderate (5)
Teodoro (2022) ⁹	Median PainDETECT (19 patients with FCD) = 6/38 (IQR = 2–11) Median PainDETECT (23 healthy controls) = 1/38 (IQR = 0–5)	Moderate (6)
Gandolfi (2021) ¹⁰	Patients with FMD reporting pain = 26/33 (79%) Mean BPI in rehabilitation programme (33 patients with FMD): On admission = 19.21/40 (SD = 11.92) intensity; 33.58/70 (SD = 24.89) interference At 5-day discharge = 17.61/40 (SD = 11.89) intensity; 27.70/70 (SD = 24.16) interference At 3-month follow-up = 20.15/40 (SD = 12.01) intensity; 33.61/70 (SD = 23.16) interference	Low (7)
Gray (2021) ¹¹	Patients with FD referred to orthopaedic surgery reporting pain = 29/29 (100%) Patients receiving physiotherapy without improvement in pain = 22/29 (76%) Patients with worsening pain following surgery = 6/12 (50%)	High (2)

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Katyal (2021) ¹²	Patients with FS reporting pain = 72/149 (48%) Patients with epilepsy reporting pain = 38/230 (17%)	Low (8)
Lagrand (2021) ¹³	Patients with FMD reporting pain = 197/320 (62%) Patients with other hyperkinetic movement disorders reporting pain = 150/554 (27%)	Low (7)
Tinazzi (2021) ¹⁴	Patients with different forms of FMD reporting pain: FD = 18/38 (47%); FW = 22/58 (38%); FGD = 5/17 (29%); FJ = 5/23 (22%); FT = 7/40 (18%)	Moderate (5)
Stephen (2021) ¹⁵	Patients with FD reporting pain = 65/85 (76%) Patients with other dystonias reporting pain = 24/80 (30%) Opiate/opioid use in patients with FD = 25/85 (29%)	Low (7)
Aybek (2020) ¹⁶	Patients with FMD reporting pain: UK = 79/100 (79%); Canada = 50/90 (56%)	Moderate (4)
Gelauff (2020) ¹⁷	Patients with FMD reporting pain = 46/179 (26%) Median SF-36 (lower = worse) pain = 46/100 (IQR = 22–80)	Moderate (6)
Linden (2020) ¹⁸	Patients with FND reporting pain during WW1: Soldiers = 91/436 (21%); male civilians = 47/153 (31%); female civilians = 156/321 (49%)	Moderate (6)
O'Connell (2020) ¹⁹	Patients with mFND reporting pain = 46/98 (47%)	Low (7)
Stone (2020) ²⁰	Patients with FW reporting chronic back pain = 43/107 (40%)	Moderate (6)
Tinazzi (2020) ²¹	Patients with FMD reporting pain: 172/410 (42%)	Low (8)
Tomic (2020) ²²	Patients with FND reporting pain: Affected body part = 67/100 (67%); unaffected body part = 50/100 (50%)	Low (8)
Van der Feltz-Cornelis (2020) ²³	Patients with FND reporting pain = 54/62 (87%) Patients with BPI ≥ 3 ("pain of clinical significance") = 52/62 (84%) Patients with pain medication use (except opiates) = 24/64 (38%); opiates = 12/64 (19%) Mean BPI in psychotherapy group (38 patients with FND): Baseline = 5.68/10 (SD = 2.60) Post-intervention = 5.58/10 (SD = 2.51)	Moderate (6)

Author (year)	Pain data reported in study	Risk of bias (score on NOS)
Gelauff (2019) ²⁴	Median SF-36 (lower = worse) pain (107 patients with FMD): Baseline = 33/100 (IQR = 35) Follow-up (mean 14 years) = 20/100 (IQR = 20) Median SF-36 (lower = worse) pain (neurological controls): Baseline (38 patients) = 50/100 (IQR = 24) Follow-up (23 patients) = 20/100 (IQR = 20)	Low (8)
Hanzlikova (2019) ²⁵	Mean pain scores (22 patients with FMD): Current = 5.0/10 (SD = 2.9); average = 6.3/10 (SD = 2.4); maximal = 7.6/10 (SD = 2.4) Mean pain scores (22 healthy controls): Current = 0.1/10 (SD = 0.3); average = 1.9/10 (SD = 2.0); maximal = 1.0/10 (SD = 1.1)	Low (7)
Jennum (2019) ²⁶	Rheumatism-related pain in patients with FS: In 3 years pre-diagnosis = 19/455 (4%) In 3 years post-diagnosis = 26/472 (6%)	Low (8)
Jimenez (2019) ²⁷	Patients with FND reporting pain: Back = 26/49 (53%); neck = 15/49 (31%); joint = 9/49 (19%); neuropathic = 8/49 (16%); myofascial = 6/49 (12%); abdominal = 6/49 (12%) Mean PDI in multidisciplinary pain programme (49 patients with FND): Pre-intervention = 46.4/70 Post-intervention = 20.9/70	Moderate (4)
Serranova (2019) ²⁸	Patients with FMD reporting lower limb pain = 56/90 (62%) Mean VAS pain in past 4 weeks = 5.6/10 (SD = 3) Healthy controls reporting lower limb pain = 9/76 (12%)	Low (7)
Gelauff (2018) ²⁹	Median SF-36 (lower = worse) pain (181 patients with FMD) = 46/100 (IQR = 57)	Moderate (5)
Glass (2018) ³⁰	Chronic pain disorder in patients with motor FND = 22/100 (22%) Fibromyalgia in patients with motor FND = 10/100 (10%)	Low (8)
Morgante (2018) ³¹	Mean pain scores (12 patients with FD): Severity = 4.8/10 (SD = 2.0); duration = 3 years (SD = 1.3); disability = 2.3/5 (SD = 0.9) Mean pain scores (10 patients with idiopathic cervical dystonia): Severity = 7.2/10 (SD = 3.3); duration = 3.9 years (SD = 2.9 years); disability = 2.6/5 (SD = 1.6)	Low (7)
Petrovic (2018) ³²	Patients with FD reporting pain = 34/48 (71%)	Moderate (6)

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Vechetova (2018) ³³	Mean pain scores (61 patients with FMD): Current = 4.2/10 (SD = 3); average = 5.5/10 (SD = 3); maximal = 6.9/10 (SD = 3) Mean pain scores (61 healthy controls): Current = 0.9/10 (SD = 1); average = 1.4/10 (SD = 2); maximal = 2.7/10 (SD = 3)	Low (8)
Erba (2017) ³⁴	Patients with FS reporting pain after seizure = 10/17 (59%) Patients with epilepsy reporting pain after seizure = 1/11 (9%)	Moderate (6)
Kerr (2017) ³⁵	Patients with FS reporting pain = 30/332 (9%) Patients with FS and epilepsy reporting pain = 7/53 (13%) Patients with epilepsy reporting pain = 25/750 (3%)	Low (8)
Matin (2017) ³⁶	Patients with FMD reporting pain = 22/100 (22%)	Low (8)
Nielsen (2017) ³⁷	Patients with FMS reporting slight-to-moderate pain = 24/60 (40%); severe-to-extreme = 28/60 (47%) Mean SF-36 bodily pain in intervention group (30 patients with FMS): Baseline = 45.6/100 (SD = 33.5) At 6 months = 47.4/100 (SD = 33.1) Mean SF-36 bodily pain in control group (30 patients with FMS): Baseline = 32.1/100 (SD = 25.3) At 6 months = 33.9/100 (SD = 27.4)	Low (8)
Pleizier (2017) ³⁸	Patients with FNS reporting pain = 154/195 (79%) Baseline pain scores (195 patients with FNS): Mean SF-36 (lower = worse) pain = 42.6/100 (SD = 29.0); mean VAS pain = 48.6/100 (SD = 25.1); mean PCS = 18.1/52 (SD = 13.2) Pain scores at 12 months in immediate GP management group (100 patients with FNS): Mean VAS pain = 42.22/100 (SD = 26.56); mean PCS = 13.61/52 (SD = 12.86); mean SF-36 bodily pain = 50.14/100 (SD = 25.40) Pain scores at 12 months in initial neurologist management group (95 patients with FNS): Mean VAS pain 48.17/100 (SD = 25.98); mean PCS = 14.81/52 (SD = 12.51); mean SF-36 bodily pain = 49.55/100 (SD = 27.64)	Low (8)
Zutt (2017) ³⁹	Median SF-36 (lower = worse) pain (16 patients with FJ) = 49/100 (IQR = 52) Median SF-36 (lower = worse) pain (23 patients with cortical myoclonus) = 80/100 (IQR = 33)	Moderate (6)
Perez (2016) ⁴⁰	Chronic pain syndrome in patients with FNS = 15/49 (31%) Fibromyalgia in patients with FNS = 4/49 (8%)	Low (8)

Author (year)	Pain data reported in study	Risk of bias (score on NOS)
Salinsky (2016) ⁴¹	Mean number of emergency department presentations due to pain in 3 years pre-diagnosis: Patients with PNES (n = 28) = 2.50 Patients with epilepsy (n = 31) = 0.65 Mean number of emergency department presentations due to pain in 3 years post-diagnosis: Patients with PNES (n = 28) = 2.39 Patients with epilepsy (n = 31) = 0.42	Moderate (6)
Elliott (2014) ⁴²	Patients with FS reporting pain = 117/324 (36%) Patients with FS and epilepsy reporting pain = 23/84 (27%) Patients with epilepsy reporting pain = 35/281 (13%)	Low (8)
Parees (2014) ⁴³	Patients with FMD reporting pain before the onset of functional motor symptoms = 4/50 (8%)	Moderate (6)
Thomas (2013) ⁴⁴	Patients with FS reporting pain = 60/86 (70%)	Moderate (4)
Gazzola (2012) ⁴⁵	Patients with FS reporting pain = 40/85 (47%) Patients with idiopathic generalised epilepsy reporting pain = 10/85 (12%) Prescription pain medication use in patients with FS = 20/85 (24%); opiates = 12/85 (14%)	Moderate (6)
Driver-Dunckley (2011) ⁴⁶	Chronic pain in patients with PNES = 78/116 (67%) Chronic pain in patients with psychogenic movement disorders = 42/56 (75%)	Moderate (6)
Stone (2010) ⁴⁷	Patients with FW reporting pain: Other than affected limb = 68/107 (64%); back = 39/107 (36%); affected limb = 35/107 (33%); muscle = 30/107 (28%); joint = 29/107 (27%); neck = 20/107 (19%) Median SF-36 (lower = worse) pain = 33/100 (IQR = 22-44) Patients with other neurological weakness reporting pain: Other than affected limb = 16/46 (35%); back = 8/46 (17%); affected limb = 9/46 (20%); muscle = 6/46 (13%); joint = 4/46 (9%); neck = 1/46 (2%)	Moderate (6)
Ibrahim (2009) ⁴⁸	Patients with FD reporting pain = 3/35 (9%)	Moderate (5)
Kuyk (2008) ⁴⁹	Mean SF-36 (lower = worse) pain (22 patients with FS) = 58.5/100	Moderate (6)
Hantke (2007) ⁵⁰	Analgesic use in patients with FS = 79/170 (47%); "narcotic analgesics" = 55/170 (32%)	Low (8)
Reuber (2007) ⁵¹	Patients with FNS reporting pain = ~19/91 (>20%) Mean SF-36 bodily pain in psychotherapy group (63 patients with FNS): Baseline = 5.9/11 (SD = 2.7) Post-intervention = 6.0/11 (SD = 2.8)	Moderate (6)

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Dworetzky (2005) ⁵²	Patients with FD reporting pain = 19/22 (86%) Patients with epilepsy reporting pain = 13/26 (50%)	Moderate (6)
Schrag (2004) ⁵³	Patients with FD reporting pain = 38/41 (93%)	Moderate (5)
Stone (2004) ⁵⁴	Patients with FMS reporting pain = 15/30 (50%) Patients with FS reporting pain = 6/20 (30%)	Moderate (6)
Fishbain (2003) ⁵⁵	Non-dermatomal sensory abnormalities in patients with chronic pain = 74/283 (26%)	Low (7)
Birket-Smith (2002) ⁵⁶	Patients with FND reporting pain = 37/38 (97%)	Moderate (6)
Ettinger (1999) ⁵⁷	Patients with FS reporting pain = 43/56 (77%)	Moderate (4)
Barry (1998) ⁵⁸	Patients with FS reporting pain = 11/37 (30%)	Moderate (5)
Dula (1995) ⁵⁹	Patients with conversion disorder presenting to the emergency department due to pain = 5/42 (12%)	High (3)
Fishbain (1991) ⁶⁰	Non-dermatomal sensory abnormalities in patients with chronic pain = 100/247 (40%)	Low (9)
Lempert (1990) ⁶¹	Patients with FS reporting pain = 8/50 (16%)	Moderate (6)
Weintraub (1988) ⁶²	FND in patients with chronic pain syndrome = 15/35 (43%)	Moderate (4)
Fishbain (1986) ⁶³	Conversion disorder in patients with chronic pain = 108/283 (38%)	Low (7)
Reich (1983) ⁶⁴	Conversion disorder in patients with chronic pain = 1/43 (2%)	Moderate (6)

FND = functional neurological disorder; FMD = functional movement disorder; FS = functional seizures; FNS = functional neurological symptoms; mFND = motor FND; FMS = functional movement symptoms; FD = functional dystonia; FW = functional weakness; FJ = functional jerks; FGD = functional gait disorder; FT = functional tremor; GP = general practitioner; NOS = Newcastle-Ottawa Scale (scored out of nine); SF-36 = 36-Item Short Form Survey; VAS = Visual Analogue Scale; PCS = Pain Catastrophising Scale; BPI = Brief Pain Inventory; PDI = Pain Disability Index; SD = standard deviation; IQR = interquartile range.

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