

# The Screamers. Childhood Klazomania - A Case Series and Novel Formulation

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## Introduction

Klazomania has been described in postencephalitic parkinsonism and focal brain lesions but has previously principally been conceptualized as a phonic tic within a spectrum of other tics. The occurrence and management of childhood klazomania remains under explored. Compulsive screaming episodes in childhood have been mistaken for complex phonic tics. We would like to propose that these children are presenting with episodes of functional screaming, also termed klazomania, which should be differentiated from phonic tics. Once recognized, psychological and behavioural strategies can help in managing distressing intense and prolonged screaming.

## Methods

The case series was identified in a tertiary Paediatric movement disorder service, the Tics and Neurodevelopmental Movements Service (TANDeM), Evelina London Children's Hospital, London, UK. All children were 16 years and younger presenting with klazomania between 2022-2025. Klazomania was defined by loud, severe, high intensity prolonged screaming, often lasting for several hours. Main outcome measures included demographic data, co-occurring neurodevelopmental diagnoses, and description of klazomania including location of episodes and details of caregiver responses. Clinical approach, management and subsequent improvements were also documented.

## Results

The children range in age from 7-12 years old, with four boys and one girl. All six children were referred for concerns of new onset/worsening tic-like behaviour. One had been investigated with EEG and MRI brain, with physicians and parents questioning a possible brain tumour. Three of the children had previously recognized co-occurring neurodevelopmental disorders (Autistic Spectrum Disorder and/or Attention Deficit Hyperactivity Disorder). All children were given a diagnosis of functional screaming, also termed klazomania.

## Conclusions

Klazomania is distinguished from phonic tics by the absence of premonitory urge, non-suppressibility and by the prolonged duration of the vocalization, often occurring for several hours at a time. Co-occurring neuropsychiatric diagnoses contextualize klazomania as a likely response to operant conditioning. Episodes of klazomania were often triggered by the removal of a rewarding stimulus such as an electronic device

Case	Age (yrs); Sex	Co-occurring diagnoses	Klazomania description
1	11; Male	ASD, ADHD, TS, FTLB	Frequent shouting and screaming episodes associated with discontinuation of electronic device use
2	10; Female	ADHD, TS, FTLB, panic disorder	Sudden escalation of episodes of marked screaming and behavioural change associated with anxiety and not spending enough time with her Father
3	10; Male	Chronic phonic tic disorder	Episodes of an unusual screeching noise and more prolonged bouts of screaming with anxiety around school
4	7; Male	Chronic motor tic disorder, FND	Severe bouts of episodic intense screaming associated with discontinuation of electronic device use
5	12; Female	Chronic motor tic disorder, FLTb	Episodes of high-pitched repetitive screaming, sometimes accompanied by head or neck thumping, occurring multiple times daily, triggered by stress or anxiety around school/exams
6	11; Male	ASD, ADHD, Rare bone disorder	Episodes of extreme and prolonged screaming, triggered following a reported bullying incident in school

Associated feature	Klazomania	Phonic Tics
Premonitory urge	No	Yes
Suggestibility	No	Yes
Involuntary onset	Yes	Yes
Evolves with time	No	Yes
Made worse with negative reinforcement	Yes	No