

**Objective.** The present study explores differences between patient groups-that share stress-related physical complaints as common characteristic-in the recognition of distress in the body and how this relates to personality characteristics and early childhood adversity. **Methods.** 26 patients with fibromyalgia/chronic fatigue syndrome (MUS), 31 patients with panic disorder (PD), and 36 patients with emotional exhaustion (EE) filled out a self-observation form enquiring levels of psychological distress and somatic symptoms for every hour on seven consecutive days. Further, all patients filled out questionnaires measuring personality and early adverse experiences. **Results.** A within-subject correlation between self-reported psychological distress and somatic symptoms was calculated using all data points to investigate inter-individual differences in the relationship between psychological distress and somatic symptoms. Trait anxiety and anxiety sensitivity, which were higher in the PD group, were positively correlated with this within-subject correlation. Furthermore, the number of traumatic experiences was higher in the MUS group than in other groups, and was significantly negatively correlated with recognizing distress in the body. The within-subject correlation was not correlated with negative and positive affectivity or alexithymia. **Conclusion.** Differences between patient groups arise in trait anxiety and anxiety sensitivity as well as traumatic experiences. MUS patients are less anxious and often have experienced more early childhood adversity, which in turn relates to a worse recognition of distress in the body than patients with emotional exhaustion and panic patients. These differences in the ability to "recognize psychological distress in the body" may have important implications for clinical practice.