How Is Fibromyalgia Treated?

Treatment of fibromyalgia requires a comprehensive approach. The physician, physical therapist, and patient may all play an active role in the management of fibromyalgia. Studies have shown that aerobic exercise, such as swimming and walking, improves muscle fitness and reduces muscle pain and tenderness. Heat and massage may also give shortterm relief. Antidepressant medications may help elevate mood, improve quality of sleep, and relax muscles. Patients with fibromyalgia may benefit from a combination of exercise, medication, physical therapy, and relaxation

Where Can People Get More Information About Fibromyalgia?

Arthritis Foundation 1330 West Peachtree Street Atlanta, GA 30309 404/872-7100 800/283-7800 or call your local chapter (listed in the telephone directory) World Wide Web address: http://www.arthritis.org

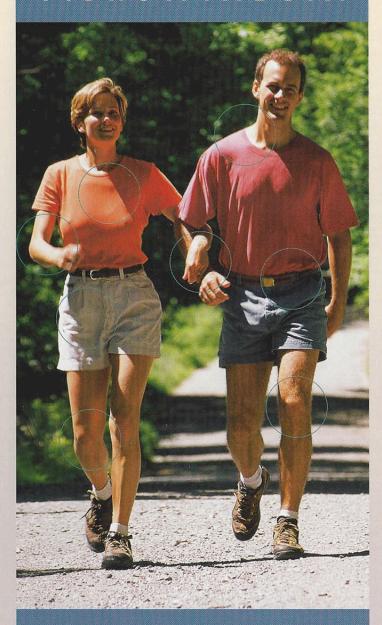
This is the main voluntary organization devoted to all forms of arthritis. The Foundation publishes a pamphlet on fibrositis. Single copies are free with a self-addressed stamped envelope. The Foundation also can provide physician referrals.

- Fibromyalgia Network
 P.O. Box 31750
 Tucson, AZ 85751-1750
 800/853-2929
 Contact: Ms. Kristin Thorson
- National Fibromyalgia Partnership P.O. Box 160 Linden, VA 22642--0160 Phone: 866/725-4404 (toll-free) Fax: 866/666-2727 (toll-free) Email: mail@fmpartnership.org Website: http://www.fmpartner-ship.org
- National Fibromyalgia Association 2200 N. Glassell Street, Suite A Orange, CA 92865 714/921-0150 E-mail: fna@fmaware.org Web site: fmaware.org

These organizations publish newsletters and provide pamphlets on the disease.

The National Institute of Arthritis and Musculoskeletal and Skin Diseases Information Clearinghouse is a public service sponsored by the NIAMS that provides health information and information sources. The NIAMS, a component of the National Institutes of Health, leads and coordinates the Federal medical effort in arthritis, musculoskeletal, bone, muscle, and skin diseases by conducting and supporting research projects, research training, clinical trials, and epidemiological studies, and by disseminating information on research initiatives and research results.

FIBROMYALGIA



A Patient Guide

What is Fibromyalgia?

Fibromyalgia is a chronic disorder characterized by widespread musculoskeletal pain, fatigue, and multiple tender points.



"Tender points" refers to tenderness that occurs in precise, localized areas, particularly in the neck, spine, shoulders, and hips. People with this syndrome may also experience sleep disturbances, morning stiffness, irritable bowel syndrome, anxiety, and other symptoms.

Pain of Fibromyalgia Syndrome

Pain – The pain of FMS has no boundaries. People describe the pain as deep muscular aching, burning, throbbing, shooting and stabbing. Quite often, the pain and stiffness are worse in the morning and you may hurt more in muscle groups that are used repetitively.

Fatigue—This symptom can be mild in some patients and yet incapacitating in others. The fatigue has been described as "brain fatigue" in which patients feel totally drained of energy. Many patients depict

this situation by saying that they feel as though their arms and legs are tied to concrete

blocks, and they have difficulty concentrating.

Sleep Disorders—Most FMS patients have associated sleep disorder called alpha-EEG anomaly. This condition was uncovered in a sleep lab with the aid of a machine, which recorded the brain waves of patients during sleep. Researchers found that FMS patients could fall asleep without much trouble, but their deep level sleep was constantly interrupted by bursts of awake-like brain activity.

Patients appeared to spend the night with one foot in sleep and the other out of it. In most cases, a physician doesn't have to order expensive sleep lab tests to determine if you have disturbed sleep. If you wake up feeling as though you have just been run over by a Mack truck—what doctors refer to as unrefreshed sleep-it is reasonable for your physician to assume that you have a sleep disorder. It should be noted that most patients diagnosed with CFS (Chronic Fatigue Syndrome) have the same alpha-EEG sleep pattern. Some FMS-diagnosed patients have been found to have other sleep disorders, such as apnea, sleep mypoclonus (nighttime jerking of the arms and legs), restless leg syndrome and bruxism (teeth grinding). The sleep pattern for clinically depressed patients is distinctly different from that found in FMS or CFS.

Irritable Bowel Syndrome-

Constipation, diarrhea, frequent abdominal pain, abdominal gas and nausea represent symptoms frequently found in roughly 40-70% of FMS patients.

Chronic headaches—Recurrent migraine or tension headaches are seen in about 50% of FMS patients and can pose as a major problem in coping for this patient group.

Temporomandibular Joint
Dysfunction Syndrome (TMJ)—This
syndrome causes tremendous face
and head pain in one quarter of FMS
patients. Most of the problems associated with this condition

are thought to be related to the muscles and ligaments surrounding the joint and not necessarily the joint itself.

Other common symptoms-

Premenstrual syndrome and painful periods, chest pain, morning stiffness, cognitive or memory impairment, numbness and tingling sensations, muscle twitching, irritable bladder, the feeling of swollen extremities,

skin sensitivities, dry eyes and mouth, frequent changes in eye prescription, dizziness, and impaired coordination can occur.

Aggravating factors-Changes in weather, cold or drafty environments,

hormonal fluctuations (premenstrual and menopausal), stress, depression, anxiety and over-exertion can all contribute to symptom flare-ups.

What Causes Fibromyalgia?

Although the cause of fibromyalgia is unknown, researchers have several theories about causes or triggers of the disorder. Some scientists believe that the syndrome may be caused by an injury or trauma. This injury may affect the central nervous system. Fibromyalgia may be associated with changes in muscle metabolism, such as decreased blood flow, causing fatigue and decreased strength. Others believe an infectious agent such as a virus in susceptible people may trigger the syndrome, but no such agent has been identified.

How Is Fibromyalgia Diagnosed?

Fibromyalgia is difficult to diagnose because many of the symptoms mimic those of other disorders. The physician reviews the patient's medical history and makes a diagnosis of fibromyalgia based on a history of chronic widespread pain that persists for more than 3 months. The American College of Rheumatology (ACR) has developed criteria for fibromyalgia that physicians can use in diagnosing the disorder. According to ACR criteria, a person is considered to have fibromyalgia if he or she has widespread pain in combination with tenderness in at least 11 of 18 specific tender point sites.



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