

## **Fibromyalgia**

Fibromyalgia is a disorder characterized by widespread musculoskeletal pain accompanied by fatigue, sleep, memory and mood issues. Researchers believe that fibromyalgia amplifies painful sensations by affecting the way your brain processes pain signals.

Symptoms sometimes begin after a physical trauma, surgery, infection or significant psychological stress. In other cases, symptoms gradually accumulate over time with no single triggering event.

Women are much more likely to develop fibromyalgia than are men. Many people who have fibromyalgia also have tension headaches, temporomandibular joint (TMJ) disorders, irritable bowel syndrome, anxiety and depression.

While there is no cure for fibromyalgia, a variety of medications can help control symptoms. Exercise, relaxation and stress-reduction measures also may help.

Symptoms of fibromyalgia include:

- **Widespread pain.** The pain associated with fibromyalgia often is described as a constant dull ache that has lasted for at least three months. To be considered widespread, the pain must occur on both sides of your body and above and below your waist.
- **Fatigue.** People with fibromyalgia often awaken tired, even though they report sleeping for long periods of time. Sleep is often disrupted by pain, and many patients with fibromyalgia have other sleep disorders, such as restless legs syndrome and sleep apnea.
- **Cognitive difficulties.** A symptom commonly referred to as "fibro fog" impairs the ability to focus, pay attention and concentrate on mental tasks.
- **Other problems.** Many people who have fibromyalgia also may experience depression, headaches, and pain or cramping in the lower abdomen.

Doctors don't know what causes fibromyalgia, but it most likely involves a variety of factors working together. These may include:

- **Genetics.** Because fibromyalgia tends to run in families, there may be certain genetic mutations that may make you more susceptible to developing the disorder.
- **Infections.** Some illnesses appear to trigger or aggravate fibromyalgia.
- **Physical or emotional trauma.** Post-traumatic stress disorder has been linked to fibromyalgia.

## **Why does it hurt?**

Researchers believe repeated nerve stimulation causes the brains of people with fibromyalgia to change. This change involves an abnormal increase in levels of certain chemicals in the brain that signal pain (neurotransmitters). In addition, the brain's pain receptors seem to develop a sort of memory of the pain and become more sensitive, meaning they can overreact to pain signals.

Risk factors for fibromyalgia include:

- **Your sex.** Fibromyalgia is diagnosed more often in women than in men.
- **Family history.** You may be more likely to develop fibromyalgia if a relative also has the condition.
- **Rheumatic disease.** If you have a rheumatic disease, such as rheumatoid arthritis or lupus, you may be more likely to develop fibromyalgia.

The pain and lack of sleep associated with fibromyalgia can interfere with your ability to function at home or on the job. The frustration of dealing with an often-misunderstood condition also can result in depression and health-related anxiety.

Because many of the signs and symptoms of fibromyalgia are similar to various other disorders, you may see several doctors before receiving a diagnosis. Your family physician may refer you to a doctor who specializes in the treatment of arthritis and other inflammatory conditions (rheumatologist).

### **What to expect from your doctor**

In addition to a physical exam, your neurologist may refer you to a rheumatologist—a specialist in the diagnosis and treatment of fibromyalgia. He/she will probably ask you if you have problems sleeping and if you've been feeling depressed or anxious.

In the past, doctors would check 18 specific points on a person's body to see how many of them were painful when pressed firmly. Newer guidelines don't require a tender point exam. Instead, a fibromyalgia diagnosis can be made if a person has had widespread pain for more than three months — with no underlying medical condition that could cause the pain.

### **Blood tests**

While there is no lab test to confirm a diagnosis of fibromyalgia, your doctor may want to rule out other conditions that may have similar symptoms. Blood tests may include:

- Complete blood count
- Erythrocyte sedimentation rate
- Thyroid function tests

In general, treatments for fibromyalgia include both medication and self-care. The emphasis is on minimizing symptoms and improving general health. No one treatment works for all symptoms.

### **Medications**

Medications can help reduce the pain of fibromyalgia and improve sleep. Common choices include:

- **Pain relievers.** Over-the-counter pain relievers such as acetaminophen (Tylenol, others), ibuprofen (Advil, Motrin IB, others) or naproxen sodium (Aleve, others) may be helpful. Your doctor might suggest a prescription pain reliever such as tramadol (Ultram, Conzip). Narcotics are not advised, because they can lead to dependence and may even worsen the pain over time.
- **Antidepressants.** Duloxetine (Cymbalta) and milnacipran (Savella) may help ease the pain and fatigue associated with fibromyalgia. Your doctor may prescribe amitriptyline or fluoxetine (Prozac) to help promote sleep.
- **Anti-seizure drugs.** Medications designed to treat epilepsy are often useful in reducing certain types of pain. Gabapentin (Neurontin, Gralise) is sometimes helpful in reducing fibromyalgia symptoms, while pregabalin (Lyrica) was the first drug approved by the Food and Drug Administration to treat fibromyalgia.

### **Therapy**

Talking with a counselor can help strengthen your belief in your abilities and teach you strategies for dealing with stressful situations.

Self-care is critical in the management of fibromyalgia.

- **Reduce stress.** Develop a plan to avoid or limit overexertion and emotional stress. Allow yourself time each day to relax. That may mean learning how to say no without guilt. But try not to change your routine completely. People who quit work or drop all activity tend to do worse than do those who remain active. Try stress management techniques, such as deep-breathing exercises or meditation.
- **Get enough sleep.** Because fatigue is one of the main characteristics of fibromyalgia, getting sufficient sleep is essential. In addition to allotting enough time for sleep, practice good sleep habits, such as going to bed and getting up at the same time each day and limiting daytime napping.
- **Exercise regularly.** At first, exercise may increase your pain. But doing it gradually and regularly often decreases symptoms. Appropriate exercises may include walking,

swimming, biking and water aerobics. A physical therapist can help you develop a home exercise program. Stretching, good posture and relaxation exercises also are helpful.

- **Pace yourself.** Keep your activity on an even level. If you do too much on your good days, you may have more bad days. Moderation means not overdoing it on your good days, but likewise it means not self-limiting or doing too little on the days when symptoms flare.
- **Maintain a healthy lifestyle.** Eat healthy foods. Limit your caffeine intake. Do something that you find enjoyable and fulfilling every day.

Complementary and alternative therapies for pain and stress management aren't new. Some, such as meditation and yoga, have been practiced for thousands of years. But their use has become more popular in recent years, especially with people who have chronic illnesses, such as fibromyalgia.

Several of these treatments do appear to safely relieve stress and reduce pain, and some are gaining acceptance in mainstream medicine. But many practices remain unproved because they haven't been adequately studied.

- **Acupuncture.** Acupuncture is a Chinese medical system based on restoring normal balance of life forces by inserting very fine needles through the skin to various depths. According to Western theories of acupuncture, the needles cause changes in blood flow and levels of neurotransmitters in the brain and spinal cord. Some studies indicate that acupuncture helps relieve fibromyalgia symptoms, while others show no benefit.
- **Massage therapy.** This is one of the oldest methods of health care still in practice. It involves use of different manipulative techniques to move your body's muscles and soft tissues. Massage can reduce your heart rate, relax your muscles, improve range of motion in your joints and increase production of your body's natural painkillers. It often helps relieve stress and anxiety.
- **Yoga and tai chi.** These practices combine meditation, slow movements, deep breathing and relaxation. Both have been found to be helpful in controlling fibromyalgia symptoms.

Besides dealing with the pain and fatigue of fibromyalgia, you also may have to deal with the frustration of having a condition that's often misunderstood. In addition to educating yourself about fibromyalgia, you may find it helpful to provide your family, friends and co-workers with information.

It's also helpful to know that you're not alone. Organizations such as the National Fibromyalgia Association and the American Chronic Pain Association can help put you in touch with others who have had similar experiences and can understand what you're going through.

## References

1. Fibromyalgia. National Institute of Arthritis and Musculoskeletal and Skin Diseases. [http://www.niams.nih.gov/Health\\_Info/Fibromyalgia/default.asp](http://www.niams.nih.gov/Health_Info/Fibromyalgia/default.asp). Accessed Aug. 19, 2013.
2. Clauw DJ, et al. The science of fibromyalgia. *Mayo Clinic Proceedings*. 2011;86:907.
3. Arnold LM, et al. A framework for fibromyalgia management for primary care providers. *Mayo Clinic Proceedings*. 2012;87:488.
4. Goldenberg DL. Clinical manifestations and diagnosis of fibromyalgia in adults. <http://www.uptodate.com/home>. Accessed Aug. 19, 2013.
5. AskMayoExpert. Fibromyalgia and myofascial pain. Rochester, Minn.: Mayo Foundation for Medical Education and Research; 2013.
6. Vincent A, et al. Prevalence of fibromyalgia: A population-based study in Olmsted County, Minnesota, utilizing the Rochester Epidemiology Project. *Arthritis Care & Research*. 2013;65:786.
7. Goldenberg DL. Pathogenesis of fibromyalgia. <http://www.uptodate.com/home>. Accessed Aug. 19, 2013.
8. Goldenberg DL. Treatment of fibromyalgia in adults not responsive to initial therapies. <http://www.uptodate.com/home>. Accessed Aug. 19, 2013.
9. Crofford LJ. Adverse effects of chronic opioid therapy for chronic musculoskeletal pain. *Nature Reviews Rheumatology*. 2010;6:191.
10. Fibromyalgia and complementary health approaches. National Center for Complementary and Alternative Medicine. <http://nccam.nih.gov/health/pain/fibromyalgia.htm>. Accessed Aug. 19, 2013.