

# **Fibromyalgia**

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## What is Fibromyalgia?

Imagine feeling like you've been hit by a truck. Your neck and shoulder muscles are tight and contracted and feel like they are pulling on your joints. Your arms are tingling as if pins and needles are stuck in. Your brain seems wrapped in cotton batting. You try to move but your muscles are stiff and the slightest touch makes you wince. You are tired, but sleep does not come easily and it isn't refreshing.

Such is life for people with Fibromyalgia. Fibromyalgia is a complex physical illness characterized by chronic widespread pain of the muscles, ligaments, and tendons and generally accompanied by other signs and symptoms.

# Who Can Get Fibromyalgia?

Fibromyalgia affects all age groups, including children, all racial/ethnic groups, and all socioeconomic strata. As in many painful conditions, such as arthritis, there is a higher prevalence of Fibromyalgia in females. Many people, particularly men, may go undiagnosed.

According to the Canadian Community Health Survey of 2010, about 440,000 Canadians have been diagnosed with Fibromyalgia. The illness is still not well known but this is changing.

# What Causes Fibromyalgia?

Most of the research findings point to a malfunctioning of the central nervous system (CNS), which includes the brain and spinal cord, with resulting pain amplification. Peripheral systems (soft tissue/muscles and nerves) also demonstrate some abnormalities. Body-wide symptoms may result from a dysfunctional interplay between the CNS and peripheral systems.

Various triggering events may precipitate the onset of Fibromyalgia including infection, trauma (e.g., physical injury, automobile accident, surgery, emotional trauma) or the development of another disorder, such as rheumatoid arthritis. It is now thought that these triggering events awaken rather than cause an existing physiological abnormality.

Abnormal pain processing has been demonstrated in brain scans. The systems involved are complex which may explain the individualized response to medication and other treatments.

Research studies are investigating a wide range of issues including genetic components, the role of stress hormones (e.g. cortisol) and neuro-chemical imbalances. Other studies are searching for biomarkers and diagnostic tests.

## How is Fibromyalgia Diagnosed?

You must have:

- Widespread pain that lasts at least 3 months. Widespread means that there is pain above and below the waist, and on both sides of the body.
- 11 or more of the 18 defined tender points. Tender points are specific, distinctive points on the body. When they are touched with a force that is not painful to healthy people, the tender points produce pain in Fibromyalgia patients. Many of the tender points are where ligaments, tendons, or muscles attach to bones.

There are additional clinical symptoms & signs that can contribute importantly to the patient's burden of illness. Some of the signs and symptoms are listed below.

Refer to publication no. 1 on the back for a more complete list of possible symptoms.

- Neurological Manifestations: Numbness and tingling in the muscles, cramps, muscle weakness, headaches, generalized weakness, sensitivity to light and sound
- Neurocognitive Manifestations: Poor concentration and short-term memory loss, impaired speed of performance, inability to multi-task, and/or cognitive overload
- Fatigue: There is persistent and reactive fatigue accompanied by reduced physical and mental stamina.
- Sleep Dysfunction: Sleep is unrefreshing. There may be disturbance in sleep quantity or rhythm including daytime hypersomnia or nighttime insomnia.
- Autonomic and/or Neuroendocrine Manifestations: irregular heartbeat, dizziness, heat/cold intolerance, respiratory disturbances, intestinal and bladder disturbances, stress intolerance, blunted emotions and/or reactive depression
- Stiffness: It is common to have generalized or regional stiffness that is
  most severe upon awakening and typically lasts for hours. Stiffness
  can return during periods of inactivity during the day.

Some health professionals are using different criteria to diagnose Fibromyalgia. Under the alternate criteria, diagnosis is based on the number of areas of the body experiencing pain combined with a measure of activity reduction, sleep problems, cognitive difficulties and other somatic symptoms.



## **Treatment / Management**

Symptoms as well as "functional capacity" vary widely among Fibromyalgia patients. While some are very disabled, some can function at a limited level and some are able work part or full time but have limited activities beyond work.

In spite of ongoing research, there is no cure for Fibromyalgia. The objectives of your treatment strategy are to reduce symptoms and improve quality of life. Discuss each symptom with your health care practitioner. Managing your illness involves a combination of pharmaceuticals, natural remedies, self-management strategies and lifestyle adjustments.

### **Improving Sleep**

Even small improvements in sleep will help to improve your symptoms. Try to find techniques that will improve sleep time and quality. Establish a routine; create a quiet environment; avoid getting overtired; try herbal remedies. Many find it helpful to take medication to assist sleep. It may be helpful to consult a sleep specialist.

#### **Nutrition**

It can be difficult to prepare meals when dealing with chronic pain but a good balanced diet is essential. Do not forget to eat as your body needs fuel to function. Many Fibromyalgia patients suffer from food sensitivities and irritable bowel syndrome. Patients get symptom relief when they eliminate offending foods from their diet. It will require trial and error to find which foods bother you but some common sensitivities include wheat, dairy, corn and refined sugar.

#### Pain Management / Lifestyle adjustments

Talk to your doctor. There are over-the-counter medications that will help with sleep and pain. A few drugs have been approved specifically for Fibromyalgia. As each individual responds differently to medications, your doctor may suggest other medications not specifically designed for Fibromyalgia. People with Fibromyalgia are often sensitive to medications and it may be necessary to start with a lower than recommended dose and increase gradually, monitoring the effects carefully.

Alternative therapies such as acupuncture, massage and hydrotherapy can be helpful for some but their effectiveness varies amongst individuals. Consider including a naturopathic doctor as part of your health care team.

Many studies have shown that exercise is effective in improving some symptoms. However, you should approach exercise with caution. Begin slowly and be careful not to aggravate your symptoms.

You will find that you don't have the same capacity for activity as you once did. It is essential that you manage your energy levels. You will need to pace your activities so that you can be as active as you are able without aggravating your symptoms. Listen to your body and respect what it is telling you. Plan ahead, know your limits, stop before you reach them. Do not push yourself.

Managing your illness will require lifestyle adjustments. You may need to reduce your daily activities but over time you will accomplish more with less pain.

#### Mind and Body

As in any illness, it is important to understand there is a connection between the mind and the body. While they will not cure your Fibromyalgia, many therapies are available that help to reduce stress, induce relaxation, generate positive thinking and gain a sense of control. Before starting any therapy ensure your therapist fully understands that your illness is real and serious and that they are using a collaborative approach.

You may benefit from activities such as meditation, breathing exercises, yoga and Tai Chi or from therapeutic activities such as writing and art.

## **Get Support**

One of the biggest challenges people with Fibromyalgia face is a lack of understanding from friends, family and even the medical community. Fibromyalgia can be very isolating and people with it may feel they are alone.

- It is important that friends, family, colleagues and caregivers are understanding and supportive. They too can become knowledgeable about Fibromyalgia.
- Look for and join a support group in your area or online.

#### THE NATIONAL ME/FM ACTION NETWORK

is a Canadian, registered, nonprofit organization dedicated to advancing the recognition and understanding of Myalgic Encephalomyelitis / Chronic Fatigue Syndrome and Fibromyalgia through education, support and research.

The network celebrated its 20th anniversary in 2013. By becoming a member, you can stay up to date on news and events while supporting our efforts.

View these publications on our website:

- Fibromyalgia Syndrome: A Clinical Case Definition and Guidelines for Medical Practitioners. An Overview of the Canadian Consensus Document. Carruthers BM & van de Sande MI. 2005/2006.
- TEACH-ME A Sourcebook for Teachers of Young People With Myalgic Encephalomyelitis / Chronic Fatigue Syndrome (ME/CFS) and Fibromyalgia Syndrome (FMS). Bell DS, Carruthers BM and the TEACH-ME Task Force. 2nd Edition 2005
- Canada Pension Plan Disability Application & Appeals Guide for Canadians with Myalgic Encephalomyelitis / Chronic Fatigue Syndrome (ME/CFS) and Fibromyalgia Syndrome (FMS). Neilson LE, Parlor M, Wodak J. 2012

Other Recommended Reading:

Bested AC, Logan, AC Howe R. Hope and Help for Chronic Fatigue Syndrome and Fibromyalgia. 2nd ed. Cumberland House 2008

Stein E. Let Your Light Shine Through. Stein 2012 Available at http://EleanorsteinMD.ca

The material in this pamphlet is informational only, it is not a substitute for the advice of your professional healthcare practitioner.