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November 15, 2012

Margaret Parlor, President
National ME/FM Action Network
512, 33 Banner Road
Nepean, ON K2H 8V7 Canada

Dear Ms. Parlor,

Thank-you for your letter regarding the document entitled *Canadian Guidelines for the Diagnosis and Management of Fibromyalgia Syndrome* and congratulations on the achievements of your organization, as outlined in your letter. Please find attached an official response from the Chair of the fibromyalgia guidelines, Dr. Mary-Ann Fitzcharles, who, along with us, has reviewed your letter carefully. This letter addresses the issues you have raised and as such, reflects the position of the entire FM guidelines team on the matters discussed.

From the perspective of the Canadian Pain Society (CPS) Board of Directors, the FM guidelines underwent a rigorous development (as outlined by Dr. Fitzcharles) and peer-review process. Canadian Pain Society clinical practice guidelines (CPGs) are subject to comprehensive peer review according to international standards set forth by the Appraisal of Guidelines for Research & Evaluation (AGREE) Consortium evaluation criteria (http://www.agreetrust.org/).

Upon completion of the peer review, feedback and resubmission process, it was the unanimous opinion of our assigned reviewers that the FM team has produced a high-quality CPG. As such, this document provides reasoned recommendations, based upon appropriate evidence evaluation and weighting (which included due acknowledgment of the limitations of currently available evidence and related future directions).

Finally, it is critical to note that CPS CPGs do not replace expert clinician judgment, nor do they represent regulated practice standards of care. Instead, they are intended to assist healthcare providers' clinical decision making about treatment approaches for their patients. They are intended to supplement the expert judgment of trained health care professionals. Ultimately, judgment about the course of treatment must be made by healthcare professionals and their patients, taking into consideration patient preferences, context, available treatment options, clinical expertise, and regulations set forth by the relevant governing bodies and institutional mandates.

Again, thank-you for your correspondence; we would be pleased to address any questions you may have and wish you the very best in your important work for Canadians living with fibromyalgia and other challenging conditions.

With best wishes,

Michael McGillion RN, PhD Treasurer, Board of Directors

Clinical Practice Guideline Initiative Lead

Canadian Pain Society

Judy Watt-Watson RN, PhD
President, Canadian Pain Society