

Living with Fibromyalgia Syndrome

Fibromyalgia syndrome (FMS) is a chronic condition characterized by pain in specific trigger points in the muscles and joints of the body. It is more common in females, affects about two percent of the population and rises in incidence with increasing age. The cause is unknown.

Not long ago, the existence of fibromyalgia was questioned. With symptoms that mimic or co-exist with many other conditions FMS is difficult to diagnose. Symptoms usually start between 30 to 40 years of age and patients often suffer for years with fatigue, sleep disturbances, morning stiffness, depression, chronic headaches and swelling before being diagnosed. Patients will often suffer from other mood disorders, irritable bowel syndrome, restless leg syndrome and chronic infections. Whether these conditions are symptoms of FMS or if sufferers are merely more susceptible to them remains unknown. Often symptoms will worsen due to allergies, stress, anxiety, illness or changes in the weather. They can also be affected by fluctuations in hormones during menstruation or menopause.

The severity and location of pain varies from patient to patient. It is similarly unpredictable within an individual patient. It is often described as deep muscular, aching, throbbing, shooting and stabbing pain that sometimes burns. Diagnosis is made based on the amount of pain a patient experiences on at least 11 of the 18 specific pain points of FMS. The pain must occur for at least three consecutive months without any known cause.

Management of fibromyalgia is complex. Treatment is ongoing and may involve physical therapy, diet, exercise, patient education, behavioural therapy and medications, or any combination thereof.

Aerobic exercise and muscle strengthening have been shown to be helpful in FMS patients. Supportive behavioural therapy can improve pain, fatigue, mood and daily functioning. Avoiding any major changes or stressors in life is also essential in preventing flare-ups of pain.

Prescription medications are used to treat pain and depressive symptoms associated with FMS. Antidepressants that affect serotonin and norepinephrine levels in the body and brain are commonly used. These chemicals appear to affect pain transmission through the body. Some of the older agents may have more side-effects, but seem to be more effective for FMS. A muscle relaxant is often used not only to relax painful muscles but also to aid sleep due to its sedative effects. Pain relievers, including acetaminophen, anti-inflammatory drugs and other agents are used. Recent studies have shown that a drug traditionally used to treat epilepsy or its cousin used for neuropathic pain will be helpful for FMS sufferers.

Interestingly, approximately 90% of FMS patients will use some form of complementary therapy, whether it be acupuncture, biofeedback or herbal remedies. Evidence to support the use of the first two is lacking, but there's positive support for the use of SAMe or 5-hydroxytryptophan (5-HTP). A combination of malic acid and magnesium may help to relieve the pain and tenderness of FMS. Capsaicin cream applied topically to tender points may also be helpful. In any case, be sure to consult a health care provider before trying any supplements. Look for an NPN (Natural Product Number) on the product and be sure it is produced by a reputable company.

Living comfortably with fibromyalgia syndrome is possible, but treatment is extremely personal. Get to know your health care providers and work with them to help you devise a treatment plan that works for you. If you take care of yourself, get plenty of sleep and limit your stress, movement and pain will be improved.

For more information on fibromyalgia syndrome check out www.arthritis.org , www.fmnetnews.com , or www.canadian-health-network.ca, or as always, talk to your pharmacist.