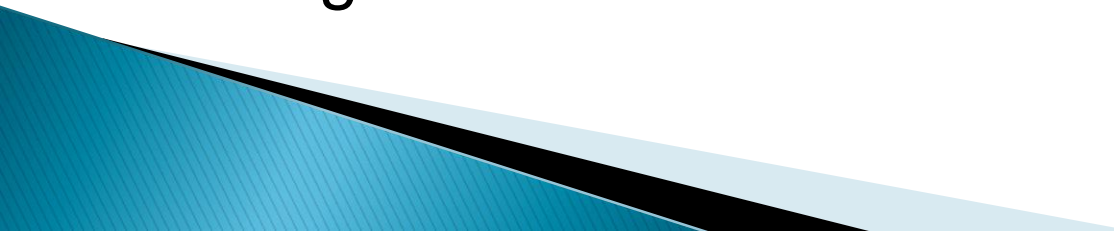


FIBROMYALGIA

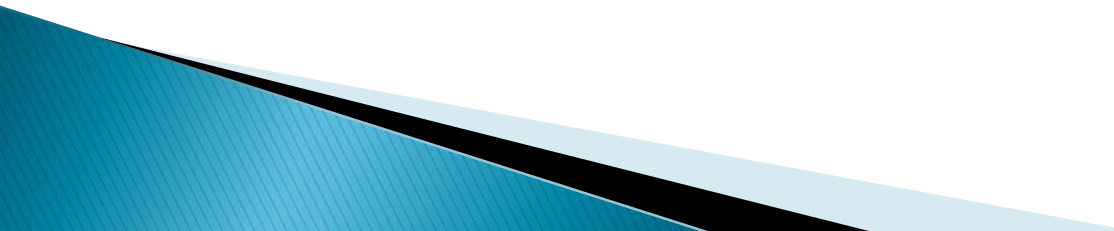
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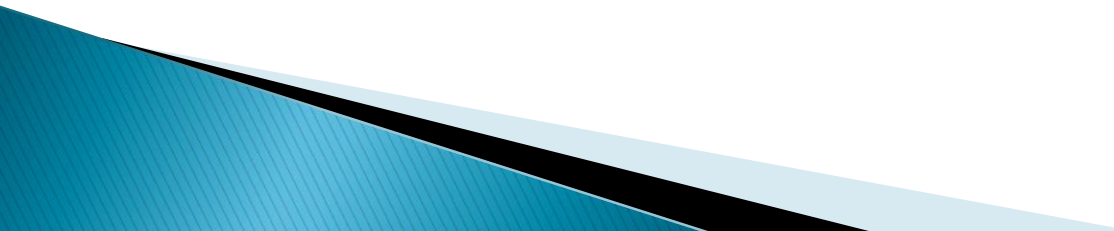
- ▶ **Fibromyalgia (FM)** typically presents in young or middle-aged females (30-50 yrs),
 - ▶ (9 females:1 male)
 - ▶ persistent widespread pain, stiffness, fatigue, disrupted unrefreshing sleep, and cognitive difficulties, often accompanied by multiple other unexplained symptoms, anxiety and/or depression, and functional impairment of daily living activities.
- 

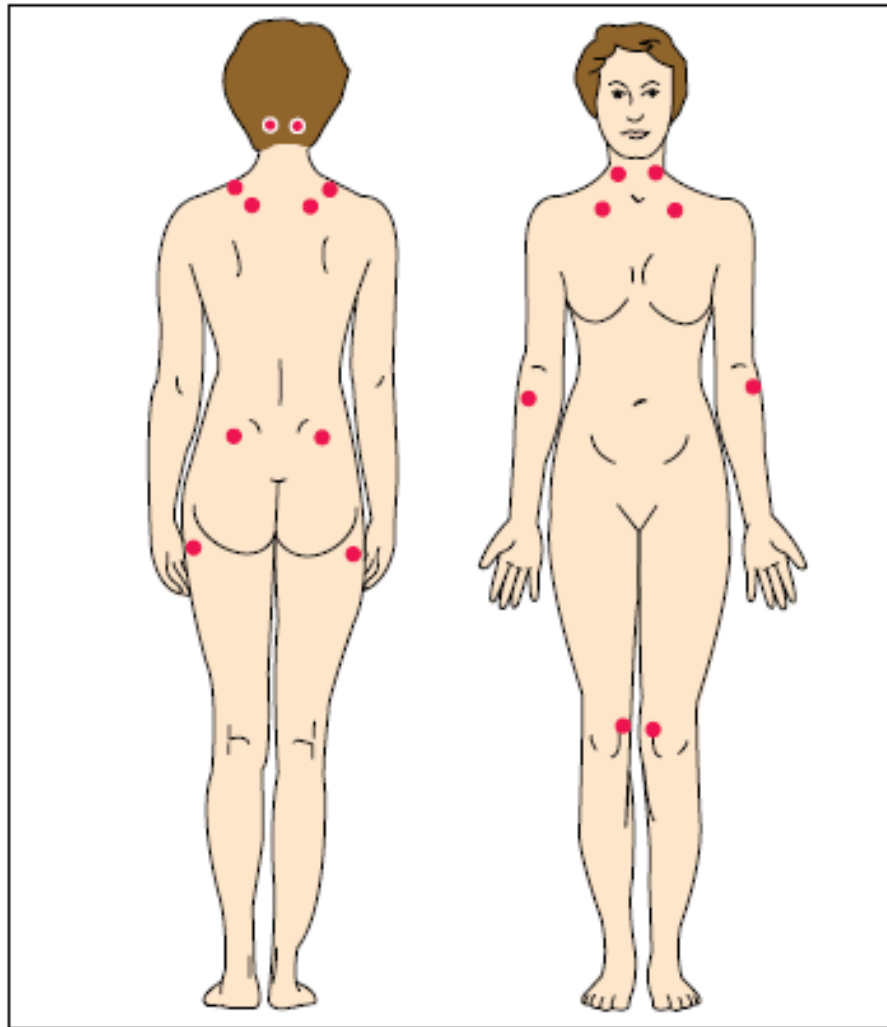
▶ Abnormalities of nervous system

- Disturbed, nonrestorative sleep
- Unrefreshed awakening
- Low levels of serotonin metabolites
- Autonomic dysfunction
- Psychological abnormalities (depression, anxiety, somatization and hypochondriases)

- ▶ Negative emotions (eg, depression and anxiety) and other negative psychologic factors (eg, loss of control, unpredictability in one's environment) and certain cognitive aspects (eg, negative beliefs and attributions, catastrophizing) act as stressors
 - ▶ Decrease in the pain perception threshold
 - ▶ Fatigue and poor sleep (similar to chronic fatigue syndrome)
- 

Other common symptoms

- ▶ Weight fluctuations
 - ▶ Allergic symptoms (eg, nasal congestion) and hypersensitivity to environmental stimuli (eg, odors, bright lights, loud noises) and medications
 - ▶ Regional pains - noncardiac chest pain, dyspepsia, headache, abdominal cramping (IBS), temporomandibular pain, chronic pelvic pain,
 - ▶ Syncope or dizziness
 - ▶ Shortness of breath
 - ▶ Urinary frequency and urgency (female urethral syndrome, interstitial cystitis)
- 



Tender points of fibromyalgia

TABLE 315-1 *The American College of Rheumatology 1990 Criteria for the Classification of Fibromyalgia^a*

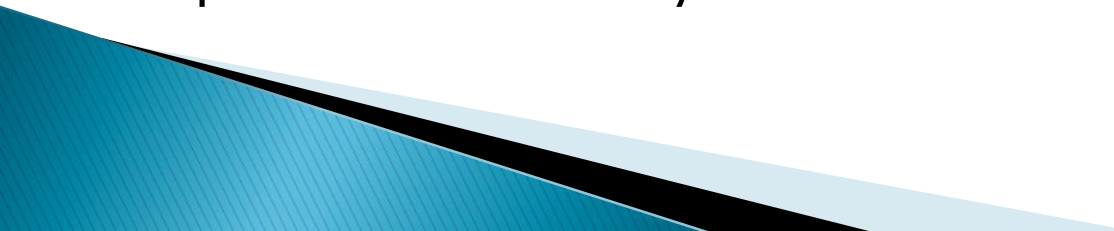
1. History of widespread pain. Pain is considered widespread when all of the following are present:
 - a. Pain in the left side of the body
 - b. Pain in the right side of the body
 - c. Pain above the waist
 - d. Pain below the waist
 - e. Axial skeletal pain (cervical spine or anterior chest or thoracic spine or low back)
2. Pain on digital palpation in at least 11 of the following 18 tender point sites (see Fig. 315-1):
 - a. Occiput: bilateral, at the suboccipital muscle insertion
 - b. Low cervical: bilateral, at the anterior aspect of the intertransverse spaces at C5–7
 - c. Trapezius: bilateral, at the midpoint of the upper border
 - d. Supraspinatus: bilateral, at the origin, above the scapular spine near the medial border
 - e. Second rib: bilateral, at the second costochondral junction, just lateral to the junction on the upper surface
 - f. Lateral epicondyle: bilateral, 2 cm distal to the epicondyle
 - g. Gluteal: bilateral, in the upper outer quadrant of the buttock
 - h. Greater trochanter: bilateral, posterior to the trochanteric prominence
 - i. Knee: bilateral, at the medial fat pad proximal to the joint line

Digital palpation should be performed with a moderate degree of pressure. For a tender point to be considered positive, the subject must state that the palpation was painful. “Tender” is not to be considered painful.

^a For purposes of classification, patients will be said to have fibromyalgia if both criteria are satisfied. Widespread pain must have been present for at least 3 months. The presence of a second clinical disorder does not exclude the diagnosis of fibromyalgia.

- ▶ **no laboratory abnormalities**, however may occur with systemic diseases (SLE, RA)

Fibromyalgia and chronic fatigue syndrome

- ▶ Have many similarities
 - ▶ Both are associated with fatigue, abnormal sleep, musculoskeletal pain, impaired memory and concentration and psychiatric conditions
 - ▶ CFS symptoms similar to a viral illness - mild fever, sore throat, and pain in the axillary and
 - ▶ anterior and posterior cervical lymph nodes.
 - ▶ The onset of chronic fatigue syndrome is usually sudden - patients are usually able to date the onset.
- 

treatment

- ▶ Assessment of pain
 - ▶ Psychologic and behavioral approaches
 - ▶ Physical therapy/physical modalities
 - ▶ Pharmacologic management
 - Tricyclic antidepressants
 - NSAIDs – little benefit
 - selective estrogen receptor modulator raloxifene
 - **Anxiolytics/hypnotics**
 - **Antidepressants**
 - glucocorticoids – little benefit
- 