



National Fibromyalgia Partnership

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❖ What Is Fibromyalgia? ❖

Fibromyalgia (fy-bro-my-AL-juh), or FM for short, is a complex, chronic condition which causes widespread pain in the body's muscles, tendons, ligaments, and other soft tissues. Unlike arthritis, the joints are not directly affected, and no inflammation occurs. The pain of FM is often described as aching or burning and is unpredictable in nature. Its severity varies from day to day, and different parts of the body tend to be affected at different times. FM pain can be extremely severe and disabling, or it may cause only moderate discomfort. Despite its many symptoms and their potential severity, FM does not cause physical deformity nor interfere with normal life expectancy.

❖ Symptoms of FM ❖

In addition to pain/stiffness, the following symptoms may accompany FM:

Fatigue: Ranging from a "tired" feeling to all-consuming exhaustion, fatigue is a very common symptom of FM.

Unrefreshed Sleep: Despite getting adequate sleep, persons with FM may awaken feeling as if they've barely slept at all. They may also have difficulty falling asleep or staying asleep.

Stiffness: Stiffness can occur upon awakening or after remaining in one position for a prolonged period. It also frequently accompanies weather changes.

Head or Facial Pain: Head/face pain is often a result of extremely stiff or tender neck and shoulder muscles which refer pain upwards. It can also be the result of temporomandibular joint (TMJ) dysfunction, a condition

which occurs in about one-third of those with FM and affects the jaw joints and surrounding muscles.

Abdominal Discomfort: FM-related symptoms include indigestion, abdominal pain and bloating, constipation, and diarrhea. Together, such symptoms are known as "irritable bowel syndrome".

Pelvic Pain/Discomfort: FM patients may notice an increase in urinary frequency or feel a greater urgency to urinate, often without infection. Some may develop interstitial cystitis, a chronic, inflammatory condition of the bladder wall. Gynecological conditions such as vulvar vestibulitis or vulvodynia may also develop in women. Pre-menstrual syndrome (PMS) and/or painful menstruation may also be present.

Numbness or Tingling: Also known as "paresthesia", symptoms involve a prickling or burning sensation, particularly in the arms or legs.

Chest Wall Pain: Also known as costochondralgia or costochondritis, symptoms include intense muscular pain at the spot where the ribs meet the chest bone and shallow breathing.

Cognitive Disorders: Sometimes referred to as "fibro-fog", complaints include difficulty concentrating, "spaciness", memory lapses, word mix-ups when speaking/writing, and clumsiness.

Lightheadedness/Balance Problems: It is not unusual for individuals with FM to have difficulty with balance (particularly while standing) or with visual tracking/orientation when engaged in activities which require a lot of eye movement. Lightheadedness or dizziness may also be a problem and is frequently a result of myofascial trigger points in the neck or TMJ (jaw joint) dysfunction.

Sensory Sensitivity: Hypersensitivity to light, noise, touch, and odors is quite common. In addition, allergic-like symptoms (i.e., rhinitis, itching, rash etc.) may occur without involving a true allergy. Those with FM may also have cold or heat intolerance.

Emotional Responses: Because of its chronic nature and unpredictability, FM can make normal work and leisure activities difficult/impossible. Thus, it is not unusual for persons with FM to experience periods of irritability, anxiety, or depression. Because most of its symptoms are not visible, it is often referred to as the "invisible disability". This invisibility makes coping with the disorder especially isolating and challenging.

❖ Who Develops FM? ❖

Although still not well recognized as a medical condition, FM affects a large segment of the population. According to conservative estimates, between 4 and 6 million Americans have FM, more than rheumatoid arthritis. Some experts believe that the true number is

closer to 10 million. An estimated 80% of sufferers are women, most of them working-age, so FM has obvious consequences for employment and increased family stress. FM also occurs in all other age groups and in men, and it exists in all races worldwide.

❖ **What Causes FM?** ❖

At one time, FM was believed to be a disease of the muscles and other soft tissues. Recent research has documented abnormalities in the brain and central nervous system making it clear that FM is a centrally mediated condition rather than one originating in the periphery. FM seems to be triggered in pre-disposed individuals by acute illness (i.e., a severe virus), physical trauma to the body or brain, or severe emotional stress. There is also evidence that FM runs in some families, although genetic research is just beginning.

❖ **Diagnosis & Treatment** ❖

Because no simple lab test is currently available, FM diagnosis requires a "hands on" evaluation by a skilled medical professional (most often a rheumatologist) which usually consists of at least three parts: (1) Ruling out medical conditions that mimic FM (i.e., thyroid disease, MS, lupus, etc.); (2) Taking an extensive medical history which includes a discussion of the nature and duration of specific symptoms; and (3) Conducting a detailed clinical examination which includes a "tender point" exam. Persons with FM tend to be especially sensitive when pressure is applied to specific anatomical points on the body, known as tender points.

Because there is currently no cure for FM, treatment consists of managing symptoms as much as possible. The following approaches, used alone or in combination, are often helpful in improving symptoms:

Medication: Medicines which increase the body's level of serotonin (a brain chemical that regulates pain and sleep) are often prescribed for FM patients. Over-the-counter or prescription pain medications called non-steroidal, anti-inflammatory drugs, or NSAIDs, (i.e., aspirin, ibuprofen, celecoxib) can sometimes be useful in taking the edge off of pain. In severe cases, stronger pain relievers may be required (i.e., tramadol, codeine). Medicines which treat other FM-related conditions may also be added.

Physical Therapy: A physical therapist can often be helpful in identifying problematic muscle groups or mechanical misalignments. Treatment may consist of therapeutic massage, myofascial release, cranial-sacral work, stretching, muscle/joint reeducation, and posture work, among other things.

Exercise: Gentle exercise (i.e., stretching and/or low-impact exercise such as walking or aquatic exercise in a 85 ° F. heated pool) can be helpful in easing sore muscles by increasing blood circulation and range of motion. To avoid symptom flares, persons with FM must begin very slowly and build up tolerance gradually.

Alternative Approaches: FM patients also find relief from a wide range of treatment modalities including acupuncture, biofeedback, EEG-driven stimulation, relaxation therapy, osteopathy, and nutritional counseling.

Why You Should Become A Member Of The National Fibromyalgia Partnership

New research findings on FM and related conditions are released with increasing frequency. At the National Fibromyalgia Partnership (NFP), we carefully track new research and travel to professional conferences to hear presentations on cutting edge work in the field. We also offer our own educational programs featuring prominent FM researchers and clinicians. Drawing on all of these sources, we produce medically accurate articles for our popular national quarterly journal, «Fibromyalgia Frontiers» as well as information for the resource packets we make available to health professionals and the public.

Thanks to our close proximity to the Washington, DC, area, we also have access to the National Institutes of Health, the national headquarters of health organizations, and leading university research centers. Such access allows us to stay abreast of issues of importance to persons with FM.

When you send us your tax-deductible NFP membership, you will receive a New Member Packet containing information on FM and a variety of resource materials, a subscription to «Fibromyalgia Frontiers», and discounts on NFP products and programs. Your support will also help us increase FM awareness among patients, health professionals and the general public. Join today!

A one-year NFP membership costs \$25.00/yr. (\$30/yr. outside North America) You needn't be a FM patient to join. Many of our members include medical/legal professionals and family members of patients. Payment may be made by check/money order payable to "NFP, Inc." (U.S. dollars) or by Visa/ Mastercard. Mail payment to: NFP, Inc., P.O. Box 160, Linden, VA 22642-0160 USA. Fax credit card orders to: 866/666-2727 (toll-free), or join via our website: www.fmpartnership.org.