

FIBROMYALGIE

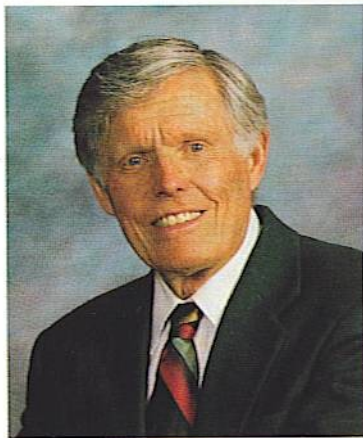


Photo by Trevor Gardner

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Guide

Fibromyalgia Syndrome (FMS)

Fibromyalgia

What is FMS? What is Fibromyalgia?

FMS (Fibromyalgia Syndrome) is a disease that affects the connective tissue and locomotor system with pain and fatigue disorder in muscles, ligaments and tendons (the connective tissues of the body which consist of fibres). "Fibro" describes the fibrous aspect, "my" the muscular aspect and "algia" the condition of pain. The term can be abbreviated to fibromyalgia.

How is FMS diagnosed?

For the most part, laboratory testing reveals nothing, it is particularly not possible to prove any changes as this can be done with classical rheumatism, the chronic polyarthritis (CP). This true and important fact leads to simplified diagnoses of "false rheumatism" in contrast to real rheumatism. While in the case of real rheumatism cortisone must be used, according to American rheumatologists, it may not be prescribed for fibromyalgia.

In 1990, American rheumatologists published the multi-center-criteria-study which defines the clinical and examination criteria. Patients must be in pain for a minimum duration of 3 months and at least 11 of the 18 specified tender points of the body must be painful to touch.

The physician will exercise pressure with his thumb or his index finger and for research purposes equipment will be used that exercises a precisely defined degree of pressure per cm². The spots that react painful to the pressure are called "tender points" and must not be confused with the trigger points of myofascial pain which hurt by themselves and can cause pain in a different part of the body – this is called long-distance effect, referred pain, comparable to the long-distance effect of acupuncture points.

It was possible to demonstrate that very often fibromyalgia begins at one quadrant and that the complete picture, which is described as generalized fibromyalgia and which is meant by some American rheumatologists when they require that the patients' pain must affect all four quadrants, is displayed only in the course of a decade.

In the case of a young girl, for instance, fibromyalgia begins when she starts her apprenticeship and is mistakenly diagnosed as tendosynovitis, years later the pain includes her shoulders, the back of her neck and of her head, and at a later time the opposite side of her body or her leg as well. In addition, pain in the small of the back will make itself felt particularly during and after a pregnancy. In the end, after 5, 10 or more years "everything hurts": according to this example, stage 1 affected one of the upper quadrants, stage 2 affected one/the neighboring quadrant(s) and stage 3 represents the complete picture – generalized fibromyalgia.

Symptoms and associated syndromes

Pain

The pain of fibromyalgia has no boundaries. Its intensity has no boundaries and its extension is boundless. The condition of pain can be continuous, but it can also vary with regard to the affected part of the body, intensity, duration and frequency, it can occur as a "everything hurts" syndrome or else as wandering pain.

Patients describe it as a deep muscular pain, burning, cramp, lancinating pain, as knife-thrust or as a sticking knife. Very often, the pain and the stiffness are worse in the morning, the groups of muscles which are frequently used are hurting more intensively.

Pain can occur in the mandibular joint and it can increase to the most severe facial neuralgia, toothaches and pain in the maxillary sinus can come up as well. The teeth are frequently extracted and the patient complains of phantom pain on the spots where the teeth were located.

Other frequent symptoms are

pain in the course of menstruation, chest wall pain, heart sensations/ cardioneurosis, prolapsed mitral valve.

Fatigue

This condition is described differently by the patients. Some of them feel physically washed out, others feel mentally exhausted or a weakness of concentration. Their entire energy has melted like ice and drained away. Some of them describe a leaden heaviness in their limbs which deprives them of all their energy.

Sleep-disorder

As a rule, patients fall asleep without difficulty. Their sleep, however, is disturbed, as if the pain would wake them up from their deep level sleep. Sleep apnoea occurs frequently, as well as muscular trembling, muscle twitch (night time jerking of arms and legs up to the restless leg syndrome) and teeth grinding. The sleep pattern is distinctly different from the pattern found in depressive patients.

Irritable-Bowel-Syndrome

20 – 40% of the patients suffer from abdominal pain, constipation, diarrhoea, meteorism and nausea, sometimes the pain seems to come from inside the body and to "hang at the front and at the back of the arch of the rib" or to be radiating from the gall-bladder.

Headaches

Painful condition of the back of the head, tinnitus, eyelid oedema and, however, rarely migraine are accompanying the attacks of pain.

Neurological symptoms

Patients complain of numbness and tingling sensations in the extremities, hypersensitive skin areas, swelling of hands and legs, disturbed skilfulness and gait, but neurologists cannot find any pathological changes.

Diagnoses which are frequently made mistakenly instead of fibromyalgia are

osteoarthritis of the shoulder, cervical and low back degenerative diseases, backache, protrusive intervertebral disks (which are not "yet" worth operating on, because it is not a "real" dislocation of an intervertebral disc), facet syndrome, hip

joint and knee joint osteoarthritis, trochanterodynia, achillodynia, calcaneal spur, flat and spread foot and, in addition, osteoporosis and multiple sclerosis, as well.

The diagnosis which is most hated and feared by the patients is "somatoform disorder", as in the patient's colloquial language and particularly the language of his milieu it is translated as "Nothing, but the psyche!" and as patients are exposed to humiliation continuously, despite the fact that depression should be understood as a reactive neurosis to the pain.

Which are the cause of fibromyalgia?

In general, physicians hold the following view: pathogenesis is unclear, diagnosis is difficult and treatment is symptomatic. Fibromyalgia is incurable.

The stress theory includes without the slightest difficulty all the common factors which can worsen an existing fibromyalgia or cause a latent FMS to break out. Weather, draught, cold, a too rigorous training, house-building, renovation, hormonal changes, strokes of fate and mental stress. But also illnesses, virus and bacterial infections, injuries, real rheumatism, lupus, thyroid diseases. Many factors, but only one mechanism!

The Inflammatory Response

The process of inflammation is highly complex and is defined as the body's reaction to physical, chemical or biological injury, which – in a normal individual – results in the localization, regeneration or repair of damaged tissue.

Inflammatory response is, unfortunately, not always beneficial to the individual. In certain circumstances the process itself can cause damage and injury. The auto-immune (which is the body turning on itself as an enemy) disease, Fibromyalgia, and the hypersensitive states which lead to asthma and anaphylactic shock, are examples of uncontrolled inflammatory responses.

Initiation and control of that inflammatory process is complex and governed by an array of biochemical mechanisms. One important pro-inflammatory mechanism is closely associated with cell-membrane bound arachidonic acid, which in turn, is converted into potent inflammation supported products. This comes by two pathways: (1) The 5-lipoxygenase pathway leading to the formation of leukotrienes, and (2) the cyclooxygenase pathway which leads to the formation of prostaglandins and thromboxanes.

Many of the products of these pathways have potent inflammation-supporting properties. For instance, LTB₄ is a potent chemotactic agent capable of attracting large numbers of leukocytes to the site of injury. The blood and synovial fluid of persons with Fibromyalgie contain higher levels of LTB₄ than normal.

On the other hand, LCT4 and LTE4, which are metabolites of LTD4, are potent bronchoconstrictor agents and were formerly identified as SRS-A (slow reacting substances of anaphylaxis), a key factor on anaphylactic shock.

Currently used nonsteroidal anti-inflammatory drugs (NSAIDs) function mainly by inhibiting the cyclooxygenase pathway. Of course, NSAIDs may have adverse effects on the gastrointestinal, hepatic, renal, pulmonary and platelet aggregation system in susceptible persons.

For the first time, the realization that in the case of fibromyalgia, there is a possible cure:

CM Pure™, is the most potent fatty acid ever discovered in blocking metabolic pathways responsible for Fibromyalgia. Benefits are mediated through inhibition of the 5-lipoxygenase pathway which decreases leucotriene production, and the cyclooxygenase pathway which decreases production of the 2 series prostaglandins (PGs). CM Pure™ also leads to the production of the 1 series PGs (good) prostaglandins that help reduce pain, tenderness and stiffness.

Because of its proven inflammation inhibiting benefits, CM Pure™ is being recommended for use in the following conditions:

- All inflammatory conditions in general
- Rheumatoid arthritis and other autoimmune conditions
- Osteoarthritis
- Viral-induced arthritis, such as Ross River Fever
- Traumatic joint injury, e.g., sports injuries
- Fibromyalgia (as noted above)
- Tissue damage and inflammation associated with many chemotherapeutic agents used in the treatment of some cancers and as an alternative to cortisone.

Treatment of Fibromyalgia

During the first months, the classical treatment beside the anti-inflammatory **CM Pure™**, it is advisable and appropriate, careful remedial gymnastics, physiotherapy, cryo-applications and nutrition advice in case of Irritable Bowl Syndrome..

The information in this guide does not claim to be complete and the only purpose it serves is to introduce this quite unknown but frequent clinical picture and to prompt the reader to deal with fibromyalgia in future.