

# Fibromyalgia/Myofascial Pain Syndrome Handout# 3

# A GUIDE FOR RELATIVES AND COMPANIONS

#### What exactly is fibromyalgia syndrome? (FMS)

FMS is a "chronic invisible illnesses". It is NOT just a form of muscular rheumatism. It's a type of neurotransmitter dysfunction. (Neurotransmitters are how the brain and body communicate.) It is a systemic, non-inflammatory, non-progressive pain amplification syndrome. If inappropriately treated, it may SEEM to progress. MPS, chronic myofascial pain syndrome, is a neuromuscular condition. It may SEE to be systemic and appear to progress if not appropriately treated. FMS and MPS are not uncommon, and together form the FMS/MPS Complex.

One major FMS symptom is a type of dysfunctional sleep called the alpha-delta sleep anomaly. As soon as people with FM reach the deep level sleep, alpha brain waves intrude and jolt them back to shallow sleep or awake. Not only are they denied refreshing sleep, but delta level is when the body does its repair work and chemical replenishment. If people with FMS are immobile at any time, such as during travel, or sitting in a meeting, their muscles get rigid and painful. Morning stiffness can be severe. Since neurotransmitters affect every part of the body, symptoms can show up all over, and yet the usual medical tests come back negative. FMS and MPS symptoms fluctuate from hour to hour and day to day, and often worsen with changes in barometric pressure. It's no wonder that they are so often misdiagnosed. Doctors often refer FMS patients to psychologists or psychiatrists, and yet recent studies show that psychologically, FMS patients have about the same amount of abnormal psychology as Rheumatoid Arthritis patients. An editorial in the Journal of the American Medical Association in 1987 stated that FMS,"...a disease which may have occupied five minutes of time in medical school really exists and is a major cause of morbidity and disability." People with FM have a history of being misunderstood and doubted. This worsens chronic pain conditions.

Research is showing that people with FMS have defects in the neuroregulatory system, especially neurotransmitters. They have low growth hormone, which is involved with muscle repair. Some researchers think that the key problem is a CNS abnormality upstream of the spinal cord. The FMS body is an engine idling at 35% power, rather than a normal 5%. Most FMS patients have memory and cognitive impairments.

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In FMS there is an abnormal production of neurotransmitters such as serotonin, melatonin, norepinephrine, dopamine, and other chemicals which help control pain, mood, sleep and the immune system. It looks like there is a genetic predisposition. Often there has been a trigger event, such as accident. An American College of Rheumatology study in 1992 found that the impact of FM on your life is as bad, or worse, than Rheumatoid Arthritis. They listed one major factor in this as "clinician bias". FM patients don't look sick, so they are often victimized by clinicians, family, and friends, leaving them with self-doubt, guilt, and loss of self-esteem.

People with FMS are hypersensitive to everything-sort of like the "Princess and the Pea" in nursery stories. Little things that others take for granted, like wringing out a wash cloth, or writing a letter, can become pain endurance sessions. A comparative analysis in the "Journal of Rheumatology" found that the quality of life for women with FMS is worse than for those who have Rheumatoid Arthritis, osteoarthritis, chronic obstructive pulmonary disease, or insulin-dependent diabetes.

#### How can someone know if they have FMS and/or MPS?

Suspect it if you have a history of widespread pain, and wake up every morning feeling like you've been run over by a truck. You may have headaches and loss of balance. Looking both ways when going into traffic can cause dizziness. You can't always find your car in a parking lot. On your best days you feel like you have the flu. You usually develop esophageal reflux. You put on weight. Some objective signs are ridges on the fingernails, goosebumps behind the upper arms and thighs, and mottling of the skin. Sometimes you get muscle twitches. You are electro-magnetically sensitive, and prone to "sensory overload". Technically, with FMS, you will have 11 of 18 specific "tender points". If these spots are pressed, you will have pain. Chronic myofascial pain syndrome is a musculoskeletal dysfunction that has "Trigger Points". These TrPs are incredibly painful areas that often feel like knots or hard lumps in the muscles. Taut bands of fibers form in the muscles. The TrPs refer pain to other areas. They can trigger gastritis, irritable bowel syndrome, grinding of teeth at night, pain when you put your hands in cold water, dizziness, chronic inversion sprains of the ankle, weak knees, weak ankles, pelvic pain, dysmenorrhea and painful intercourse in women, impotence in men, etc. The tightened and spasming of the muscles can entrap nerves, blood vessels, and ducts. You can have blurring of the eyes or double vision. With FMS and MPS, you also get leg cramps, hypoglycemic-like symptoms, problems swallowing, immune dysfunction, allergies and chemical sensitivities, sciatica, hives and rashes, numbness or tingling, mood swings, confusional states, loss of balance-the list sometimes seems endless.

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### What can we do for someone who has FMS or FMS/MPS Complex?

There is no cure for FMS or FMS/MPS Complex. When FMS and MPS occur together, it is more than the sum of the parts. The two conditions, seem to feed on each other. The muscle tightness causes more pain which causes more tightness.... There are medications that help some of the symptoms. Trigger points can be relieved by some types of physical therapy. It takes a commitment on the part of the patient to practice good nutrition, a program of gentle stretching and moderate exercise, and a recognition of both the patient and her/his companions in life that there are real limitations for people with FMS/MPS. It isn't easy to find the right balance to optimize the quality of life. Be kind. Be patient. Be compassionate. Listen. And ask if there isn't something you can to help.

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