

1. Diagnosis

Make sure a tender point examination is done because this is a key clinical feature, along with pain in all four quadrants of the body, and poor sleep. Check with your local fibromyalgia support group for a doctor in the area who is experienced in fibromyalgia diagnosis if you are having difficulties finding medical answers. Sometimes keeping a pain diary (rating your pain on a scale from 1 to 10, also recording sleep, medication taken, etc.) can help both yourself and your doctor. Fibromyalgia appears to overlap with such conditions as irritable bowel syndrome, chronic fatigue syndrome and lupus erythematosus so it's not diagnostically easy.

2. Sleep

Sleep is the vital piece of the fibromyalgia puzzle. Deep (delta phase) sleep is required so that your body releases growth hormone to repair daily microscopic muscle damage. If you suspect sleep apnoea (blocked airway related to snoring) or bruxism (teeth grinding which can cause TMJ, a type of severe joint pain) (see point 12) then consider visiting a sleep clinic to clarify the sleeping problem. Most fibromyalgics are very light sleepers so make your bedroom quiet, dark and comfortable. Establish a relaxing pre-sleep routine and aim to get to bed at a similar time each night. Light aerobic exercise within four to five hours prior to bedtime can assist sleep by stimulating the release of the relaxant compound serotonin.

Many people benefit by using meditation or relaxing mental imagery as part of their sleep routine. Avoid caffeine, alcohol and sugars before bed as these can disrupt sleep. If you suffer from restless leg syndrome a quick short leg exercise routine before going to bed may be helpful. A light massage with Myopax can help relax the muscles and assist with sleep. Both over the counter and prescription sleeping tablets have a role if sleep remains difficult.

3. Serotonin

Many of the problems of fibromyalgia, including poor sleep, increased pain sensitisation and migraine can be explained (at least in part) by reduced amounts of the neurotransmitter serotonin.

Serotonin is a "relaxant" chemical messenger in the brain which is required for healthy sleeping patterns, digestion and many other functions. Serotonin is also involved in pain processing in the brain. In a study of a drug known as fenclonene (which blocks the production of serotonin) normal patients who took the drug experienced severe fibromyalgia symptoms.

An emerging treatment for fibromyalgia is 5-HTP (5-hydroxytryptophan). 5-HTP is a natural compound (produced from the African plant Griffonia simplicifolia) which is converted in the body to serotonin. A clinical study (by Caruso) comparing 5-HTP and placebo in treating fibromyalgia showed significant improvement in symptoms in the 5-HTP group. 5-HTP also has good anti-depressant properties and is well tolerated.

A combination used by many therapists for fibromyalgia is 5-HTP, St. John's Wort (*hypericum perforatum*) and magnesium (low magnesium levels are found in many fibromyalgia patients). See your health practitioner for treatment specific to your needs.

A very good food source of tryptophan (the amino acid the body uses to make serotonin) is turkey. Taking thiamin (vitamin B₁) and niacinamide (a form of vitamin B₃) maximises tryptophan's conversion to serotonin. An excellent "serotonin sandwich" is therefore turkey on wholemeal bread with some sliced mushroom followed by a glass of ovaltine!

4. Dealing with the many aspects of Fibromyalgia

Fibromyalgia is a complex syndrome of different, seemingly unrelated symptoms (although research is starting to find the links between them). The diversity of fibromyalgia symptoms can easily add confusion and stress to an already difficult illness. A helpful approach in managing the syndrome can be to balance specific measures for specific symptoms along with a generalised view of the syndrome. For example, massaging crampy leg muscles before going to bed is a specific treatment, but in allowing you to have better quality sleep, your entire fibromyalgia syndrome is being assisted.



Note also that many health workers specialise in quite narrow fields of interest, so that it can be easy to fragment a syndrome into a series of symptoms.

5. Exercise

A number of studies show that light exercise improves fibromyalgia, both in terms of pain management and lifestyle. Stretching and aerobic exercises such as walking or swimming are quite beneficial. Fibromyalgic muscles do not repair easily so exercise should not be high impact, or repetitive with high loads. Many fibromyalgia sufferers find it painful to exercise, so try a light massage first and start slowly. Exercise releases pain-killing endorphins so things are often easier once you get started. Note that typical "rehabilitation" type exercises involving repetitive exercises generally do not help fibromyalgia, and may make symptoms worse.

6. Massage

Many fibromyalgia patients benefit from massage. Because fibromyalgic muscles often have microtrauma and decreased collagen content, the level of massage should be adapted to suit. The end point should be more relaxed muscles without excessive pain. Lymphatic drainage massage can be beneficial. This is where the lymph vessels are gently massaged to mobilise lymphatic fluid, thus helping to clear the body of toxins. It is worth finding a massage therapist who is experienced in fibromyalgia.

7. Pain relief

Research underlines the pain sensitisation mechanism whereby continual pain signals eventually lead to an increased pain response in the brain. It is, therefore, very important to minimise your degree of pain wherever possible. General measures include:

- Balneotherapy (bath therapy) – studies show decreased pain-scale ratings following both bathing therapy and pool based exercises.
- Ice – apply ice for a few minutes on painful areas.
- Medication – you may wish to minimise your pain relieving medication but do not do this to the extent that excessive or marked pain is not treated.
- Meditation – this may help relax tight muscles which are often the cause of pain.
- Posture – improved posture can help with many painful conditions associated with fibromyalgia including back pain and sciatica.
- Alpha stimulation – this is where a very low frequency small electrical current is applied by means of attaching a clip to the earlobe. The electrical signal produced mimics the alpha waves produced by the brain when we are very relaxed and pain free. Many people find alpha stim very useful for their pain management.

8. Diet

With the close association between fibromyalgia and irritable bowel syndrome the importance of diet is underlined. Fresh fruit and vegetables are the favoured foods. They contain many protective anti-oxidants, vitamins (which fibromyalgics often absorb poorly) and dietary fibre. They also release sugars slowly, which helps fibromyalgia patients in a number of ways including improved sleep, better energy and reduced risk of migraine (see item 9).

Wholemeal bread is much preferred to white bread, and brown rice in preference to white rice. Try wholemeal pasta instead of the more refined standard pasta. These less processed products have many more vitamins and other nutrients and their sugars are more slowly released than the more processed equivalent.

Avoid refined sugars and other heavily processed foods. These have very few nutrients and our digestive systems



do not thrive on them. Other “seemingly healthy” fast sugar release foods include fruit juices and potatoes. Dilute fruit juice with water, and if you love your potatoes, try potato salad – this is the form of potato that releases sugar the slowest.

Some of these dietary adjustments take some will power, but many health benefits are possible as a reward for perseverance.

Most importantly, take time to eat, enjoy and properly digest your food.

9. Migraine

Many fibromyalgics suffer from migraine. A common factor in the two conditions may be a shortage of the neurotransmitter serotonin. Migraine sufferers have low levels of serotonin in their tissues and low serotonin is associated with increased pain response and poor sleep, the two classic symptoms of fibromyalgia.

5-hydroxytryptophan (5-HTP) is converted in the body to serotonin. 5-HTP has been shown to markedly improve migraine. 5-HTP is also well tolerated. Another factor associated with migraine is fluctuations in blood glucose, with migraines often reported about 45 minutes after eating refined sugars (this corresponds to a high blood sugar level rapidly dropping). Avoiding refined sugars and foods which release sugar quickly can help control migraines. Avoid alcohol and common allergy foods such as cow’s milk, chocolate, eggs, oranges and cheese.

Relaxation therapy can assist as well as magnesium and vitamin B6.

10. Thinking Problems

Many fibromyalgia patients find “mental foggy” to be the worst aspect of the condition. This may be due to an imbalance of serotonin in the brain or simply lack of sleep. Making lists and being as methodical as possible can help, as well as simplifying your daily tasks.

11. Myofascial Pain Syndrome (MPS)

The connective tissue of muscles is known as the fascia and myofascial pain refers to pain coming from both the muscle fibres and the related connective tissue. Myofascial pain is generally a sharper more specific pain whereas fibromyalgia produces generalised aches. The majority of fibromyalgia sufferers report myofascial pain.

MPS can cause migraine or tension headache, tennis elbow, sciatica, carpal tunnel syndrome and many other conditions. MPS is characterised by trigger points which are very tight bundles of muscle and connective tissue that generate lots of pain when touched.

Treatment is with myofascial massage which is a specialised technique of long slow massage strokes that gradually “release” the trigger point. Myopax may be used to assist during this massage.

12. Temporomandibular Joint Disorder (TMJ)

Many fibromyalgia patients suffer from this painful jaw condition. This is where the hinge part of the jaw can become extremely painful and the associated muscle groups very tight. Massaging the muscles with Myopax may help relax them. Getting a mouth guard fitted may also help.

Further Reading and References

1. Fibromyalgia – What You Can Do About Chronic Pain and Fatigue
Miryam Ehrlich Williamson
Pub: Walker/Allen and Unwin
2. Encyclopedia of Natural Medicine
Michael Murray and Joseph Pizzorno
Pub: Little, Brown and Company



3. Fibromyalgia and Chronic Myofascial Pain: A Survival Manual
Devin J Starlanyl
4. Living Well with Chronic Fatigue Syndrome and Fibromyalgia:
What Your Doctor Doesn't Tell You...That You Need To Know
Mary J Shomon
5. University of Washington, Dept. Orthopaedics and Sports Medicine, www.orthop.washington.edu
6. Epidemiology of Fibromyalgia, Neumann L, Buskila D, Curr Pain Headache Rep 2003 Oct; 7 (5): 362-8
7. Fibromyalgia Syndrome: An Emerging but Controversial Condition JAMA 1987; 257: 2782-7
8. Overlapping Conditions among Patients with Chronic Fatigue Syndrome, Fibromyalgia and Temporomandibular Disorder. Aaron LA et al Arch Intern Med 2000 Jan 24; 160 (2): 221-7
9. Ideal versus Reality: Physicians Perspectives on Patients with Chronic Fatigue Syndrome (CFS) and Fibromyalgia. Asbring P, Narvanen AL Soc Sci Med 2003 Aug; 57 (4): 711-20
10. 1975 Harvey Moldofsky MD, University of Toronto, Canada
11. Collagen and Muscle Pathology in Fibromyalgia Patients. Gronemann et al Rheumatology (Oxford) 2003 Jul 16
12. Muscle Metabolism in Fibromyalgia studied by P-31 Magnetic Resonance Spectroscopy during Aerobic and Anaerobic Exercise. Lund E et al, Scand J Rheumatol. 2003; 32 (3): 138-145
13. Connective Tissue Massage in the Treatment of Fibromyalgia. Brattberg G Eur J Pain. 1999 Jun; 3 (3): 235-244
14. Exercise for Treating Fibromyalgia Syndrome, Busch A et al Cochrane Database Syst Rev. 2002; (3): CD003786
15. A Successful, Long term Exercise Program for Women with Fibromyalgia Syndrome and Chronic Fatigue Syndrome and Immune Dysfunction Syndrome. Karper WB, Stasik SC Clin Nurse Spec 2003 Sep; 17 (5): 243-8

Nutri-Pharm
Leaders in Innovative Scientifically Developed Natural Products

This document may be reproduced and freely circulated
only if published in full

For more information, or to find the Nutri-Pharm distributor nearest you,
please visit our website at www.nutripharm.net or contact Nutri-Pharm direct
at:

PO Box 7313
Karingal Centre, Vic, 3199
Australia

Ph: +61 3 5983 8525
Fax: +61 3 9789 6404
Email: info@nutripharm.net

