

Fibromyalgia

www.arthritis.org.nz



**ARTHRITIS
NEW ZEALAND**

KAIPONAPONA AOTEAROA

*Improving the lives of
people affected by arthritis*

*Te whai kia pai ake te huinga
kua pōngia e te kaiponapona*

Did you know?

- Arthritis affects **one in six New Zealanders** over the age of 15 years.
- Fibromyalgia **affects more women** than men.
- Onset is often in ages of **25 – 55 years**.
- Fibromyalgia often runs in families.
- People with other forms of arthritis are **more likely** to develop fibromyalgia.

By working with health professionals and Arthritis New Zealand, you can find ways to cope with fibromyalgia.

Contents	Page
▪ <i>What is fibromyalgia?</i>	3
▪ <i>What are the symptoms?</i>	5
▪ <i>How is it diagnosed?</i>	6
▪ <i>Treatment options</i>	7
▪ <i>Medications</i>	7
▪ <i>Physical exercise</i>	9
▪ <i>Psychological interventions & relaxation techniques</i>	9
▪ <i>What else can I do?</i>	10

What is fibromyalgia?

The word 'fibromyalgia' comes from the Latin term for fibrous tissue (fibro), and the Greek for muscle (myo) and pain (algia). It is called a 'syndrome' because it is a collection of symptoms such as muscular pain, stiffness, fatigue, rather than a disease.

Who gets fibromyalgia?

Around 1 in 50 people will develop fibromyalgia at some time in their life. It most commonly develops between the ages of 25–55; and women are more likely to develop this syndrome than men. Fibromyalgia often runs in families, a person is more likely to develop fibromyalgia if a relative also has the condition.

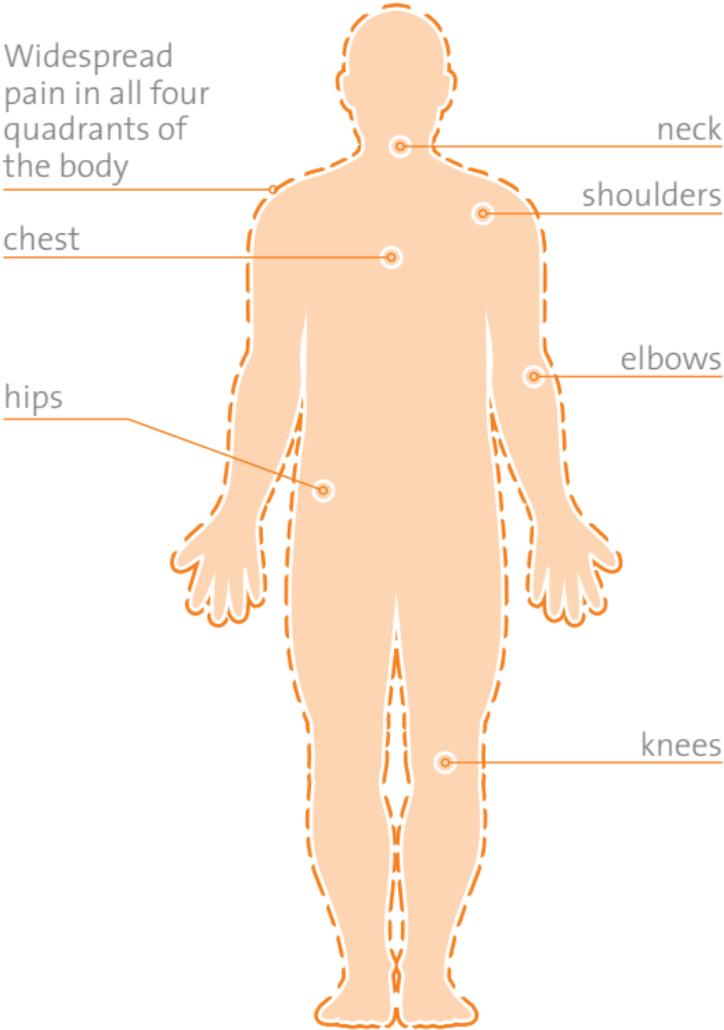
People with rheumatoid arthritis, lupus or ankylosing spondylitis are also more likely to develop fibromyalgia.

Often people with fibromyalgia are more likely to have a history of past psychological trauma, e.g. abuse in childhood, and may have been diagnosed with post-traumatic stress disorder.

What causes fibromyalgia?

No one knows what causes fibromyalgia. Researchers speculate that it may be many different factors, alone or in combination. It may be helpful to think of fibromyalgia as resulting from the loss of the pain blocking signals that flow down the spinal cord from the brain. Stress and sleep disturbance can weaken these blocking signals while exercise, good quality sleep, relaxation techniques and some medications can boost these pain blocking signals.

Sites tested for tenderness in diagnosing fibromyalgia syndrome – clustering around the neck, shoulder, chest, hip, knee and elbow regions.



What are the symptoms?

Fibromyalgia affects people in different ways. The most common symptoms include:

- pain – usually widespread muscle aching and stiffness. It can feel like your whole body is hurting. The neck and back are most commonly affected. Pain can vary throughout the day. It can be worse after rest (e.g. first thing in the morning), and/or after activity.
- overwhelming tiredness or fatigue making it difficult to do your normal daily activities
- insomnia or poor sleep – waking up without feeling refreshed
- tingling, numbness in the hands or feet due to poor circulation
- irritability or feeling low
- forgetfulness and/or poor concentration
- tender points in certain areas of the body.

The good news is that fibromyalgia is not progressive and does not cause permanent damage to your muscles, bones or joints.

How is it diagnosed?

Fibromyalgia is often difficult to diagnose as the symptoms vary considerably. It often overlaps with other conditions such as tension headache, irritable bowel syndrome, chronic fatigue syndrome, non-specific low back pain, restless leg syndrome and anxiety/depression. Your doctor may suggest some tests to rule out other conditions.

New diagnostic criteria have recently been developed that include the full spectrum of fibromyalgia symptoms and related conditions. Most people diagnosed with fibromyalgia have symptoms of widespread pain not explained by other conditions, and tenderness in at least 11/18 specific sites. However some people may still have fibromyalgia even without these symptoms.



Relaxation techniques may help ease muscle tension and anxiety. They can also improve mobility and decrease muscle tightness.

Treatment options

There is currently no known cure for fibromyalgia. It is important to remember that, with help and better understanding, the symptoms can be effectively managed. Contact your doctor when the pain is more severe and affecting your normal activities.

Medications

Medications alone are seldom successful in treating fibromyalgia but they can be part of the management of this syndrome. Medications will be prescribed based on each individual's experience of the variety of fibromyalgia symptoms. Medications can help reduce the pain of fibromyalgia and improve sleep, they may include:

- **Painkillers** such as paracetamol or non-steroidal anti-inflammatory drugs (NSAIDs), they are usually ineffective or only minimally effective in fibromyalgia, although they may still be useful for the treatment of underlying arthritic pain.
- **Tricyclic anti-depressants** such as amitriptyline and nortriptyline, are usually used in very low doses to improve quality of sleep and to address the imbalance of neurotransmitters in the pain conduction pathways. You do not need to suffer from depression to benefit from this type of medication.
- **Newer drugs** like gabapentin and pregabalin can help by acting directly on the pain pathways.



Physical exercise

Aerobic exercise will help to improve your mood, increase muscle tone, improve blood flow, ease digestive problems and aid sleep. The key to an exercise programme, especially if you are in pain, is to start gradually. Ideally the programme should include stretching, strengthening and aerobic exercise. The best way to begin a fitness program is to start with short sessions of just a few minutes of gentle, low-impact exercises such as walking and swimming. Warming-up before exercise is very important.

Psychological interventions and relaxation techniques

A psychological technique known as Cognitive Behavioral Therapy (CBT) has been shown to help people with fibromyalgia. This should be undertaken with a trained therapist or clinical psychologist. For people with severe psychological trauma, counseling or psychotherapy may be required.

Other therapies and relaxation techniques may help ease muscle tension and anxiety. They can also improve mobility and decrease muscle tightness.

They include:

- acupuncture
- massage
- Tai Chi & Qi Gong
- hypnotherapy
- infrared heat
- hydrotherapy
- hot and cold packs
- yoga
- meditation.

What else can I do?

Balance activity and rest – learn to listen to your body and be guided by it. Try to plan your day's and week's activities by breaking them into small manageable tasks with regular breaks, this will help to prevent overwhelming fatigue and decrease your pain.

Reduce stress – learn to relax, it will help to reduce pain and promote restful sleep. Choose a variety of ways to relax both physically and emotionally.

Talk to your doctor and healthcare team – learn about fibromyalgia and play an active role in your treatment, not all information you read or hear about fibromyalgia treatments is trustworthy so always discuss with your health professionals treatments you are thinking about trying.

Seek support – living and coping with a chronic condition can be difficult. At times you may feel angry, depressed and isolated. Talk to your family, health professionals and Arthritis New Zealand Educators, they can provide you with resources to help to cope with fibromyalgia.

Self-management programmes for people with chronic conditions including fibromyalgia, provide useful information, resources and support to manage symptoms of fibromyalgia.

For more information:

Visit our website www.arthritis.org.nz
or call **0800 663463**

Other resources:

- Arthritis Research UK – www.arthritisresearchuk.org
- Australian Rheumatology Association – information about conditions and medicines
- American College of Rheumatology – www.rheumatology.org
- Arthritis Foundation (US) – www.arthritis.org
- Fibromyalgia Network (US) – www.fmnetnews.com

**Fibromyalgia is
not progressive
and does not cause
permanent damage
to your muscles,
bones or joints.**

Where can I learn more?

www.arthritis.org.nz

Regional offices

Northern (Auckland) 09 523 8900

Midland/Central (Wellington) 04 472 1427

Southern (Christchurch) 03 366 8383

National office

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