

## Western Pennsylvania Guide to Good Health

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### Ten Things You Should Know About Fibromyalgia

*By Jay Karpen, MD*

In my practice, I treat many patients who have fibromyalgia syndrome, or FMS. Often, they are understandably uncomfortable when they hear the diagnosis. However, FMS shouldn't be a cause for concern. It's not progressive and it isn't deadly. In fact, there are a lot of misconceptions about it. Here are ten facts you should know:

1. FMS is a specific, chronic pain condition that is not degenerative or inflammatory. In fact, it's not even classified by the National Institutes of Health (NIH) as a disease. Rather it is a *syndrome* – a truly systemic pain condition. However, this classification doesn't mean that FMS is less serious than a disease. Consider the fact that rheumatoid arthritis, lupus and other serious afflictions are also classified as syndromes.
2. It's been estimated that two to four percent of Americans have FMS, and that the majority of people who have it are women of childbearing age. However, it can occur at any age. As a matter of fact, many patients, when questioned carefully, reveal that their symptoms first became evident at an early age. Often, the first sign is what are referred to as "growing pains."
3. The cause of FMS is unknown. One theory suggests that stress contributes to the onset of FMS, resulting in disturbed sleep patterns and a lack of restful sleep. When sleep is disturbed, the body doesn't produce the chemicals needed to control pain.
4. FMS can be mild, moderate or severe. Among younger FMS patients, the main symptom is pain, although other common symptoms include discomfort after minimal exercise, low-grade fever or below normal temperatures and skin sensitivity. Elderly patients tend to be more troubled by fatigue and depression. FMS patients can also experience dry or watery eyes, mottling of the skin and nail ridges. They may also experience morning stiffness for an hour or longer and, during the day, find that they can't sit still or maintain the same position for more than 20 minutes without becoming stiff.
5. FMS often coexists with other disorders and can even make the symptoms of another disorder more severe.
6. People with FMS are sensitive to smells, sounds and vibrations. It also sensitizes nerve endings, so touch, light or sound can be interpreted by the body as pain. Because the brain knows that pain is a danger signal, it can interpret the FMS pain as danger, resulting in such defense mechanisms as a rapid heartbeat and increased pumping of adrenaline, creating anxiety in the body/mind system when no action is

taken.

7. FMS is generally diagnosed following a complete medical history and exam to rule out other possible illnesses with similar symptoms; among them--the presence of widespread pain, disturbed sleep patterns and hypersensitivity to light pressure on specific parts of the body.
8. Historically, blood tests have not proven effective in accurately identifying FMS. However, there is now a mediated response blood test that measures reactions to certain foods and, in so doing, can identify the reactions of a patient's immune system that might indicate the presence FMS. While it's an indirect diagnosis, it does provide information that can be used to make dietary modifications to reduce or eliminate certain symptoms.
9. FMS is not currently curable, but researchers are working on it. In the meantime, symptoms can be relieved and managed. Treatments include medications that decrease pain and improve sleep, aquatherapy, lifestyle changes to reduce stress, exercises to improve cardiovascular health and relaxation techniques to relieve muscle tension.
10. Sometimes, if stress-causing situations are resolved, FMS symptoms may improve.
11. There is always hope. As a physician who treats numerous FMA patients, I can assure you that many of them can manage their symptoms well and have a very good quality of life.

**John Fries**

2637 Brighton Road

Pittsburgh, PA 15212

Phone: 412-760-2299

E-Mail: [johnfries@comcast.net](mailto:johnfries@comcast.net)

Web: [www.johnfries.com](http://www.johnfries.com)