

# Management of Fibromyalgia

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# Fibromyalgia Basics

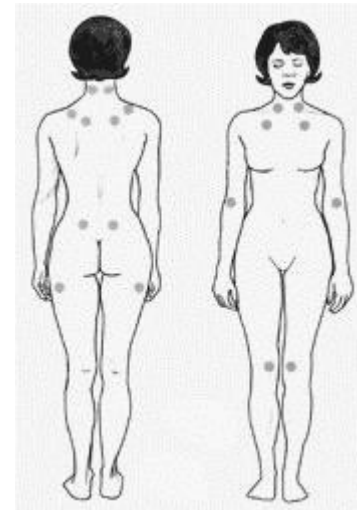
- Genetics- very familial
- Triggers
  - Infection
  - Physical or psychological trauma
  - Concurrent disease
- Mechanism
  - Relationship between physiological and psychological factors; at time of diagnosis, 30-50% have mood disorder
  - Disordered sensory processing
  - Autonomic/neuroendocrine dysfunction

# Basics, cont.

- The prevalence of fibromyalgia is about 2%, affecting an estimated 5.0 million adults in 2005.
- Female: Male ratio 7:1. However, men and children also can have the disorder.
- Most people are diagnosed during middle age and prevalence increases with age.

# 1990 Diagnostic Criteria

- H/o widespread pain more than 3 months: the left and right side of the body, pain above and below the waist. Axial skeletal pain must be present.
- Pain in 11 of 18 tender point sites on digital palpation.



# 2010 Preliminary Diagnostic criteria

3 conditions must be met:

- Widespread pain index (WPI)  $\geq 7$  and symptom severity (SS) scale score  $\geq 5$  or WPI 3–6 and SS scale score  $\geq 9$ .
- Symptoms have been present at a similar level for at least 3 months.
- The patient does not have a disorder that would otherwise explain the pain.

# 2010 Criteria cont.

WPI: In how many areas has the patient had pain over the last week.

Score will be between 0 and 9

- Shoulder Girdle, Left
- Shoulder Girdle, Right
- Upper Arm, Left
- Upper Arm, Right
- Lower Arm, Left
- Lower Arm, Right
- HIP (Buttock, Trochanter), Left
- HIP (Buttock, Trochanter), Right
- Upper Leg, Left
- Upper Leg, Right
- Lower Leg, Left
- Lower Leg, Right
- Jaw, Left
- Jaw, Right
- Chest
- Abdomen
- Upper Back
- Lower Back
- Neck

# 2010 criteria cont.

- SS scale score: 0 = NO Problem
- Fatigue  
Waking unrefreshed  
Cognitive symptoms 1 = Slight or Mild Problems,  
Generally Mild or intermittent
- For the each of the  
3 symptoms above,  
indicate the level of  
severity over the  
past week using the  
following scale: 2 = Moderate, Considerable  
Problems, Often Present  
and/or at A Moderate Level
- 3 = Severe: Pervasive,  
Continuous, Life-Disturbing  
Problems

# Considering somatic symptoms in general, indicate whether the patient has:\*

0 = NO SYMPTOMS

1 = FEW SYMPTOMS

2 = A MODERATE NUMBER OF SYMPTOMS

3 = A GREAT DEAL OF SYMPTOMS

- Muscle pain or weakness
- IBS, constipation, diarrhea
- Fatigue/tiredness, Insomnia
- thinking or remembering problem
- Headache, dizziness
- pain/cramps in the abdomen, N/V
- Heartburn, oral ulcers
- Numbness/tingling
- Depression, Nervousness
- Pain in the upper abdomen
- Frequent or painful urination, and bladder spasms
- Chest pain, wheezing, SOB
- Blurred vision, dry eyes
- Fever
- Dry mouth, loss of/ change in taste, loss of appetite
- Itching, hives/welts
- Rash, sun sensitivity
- Raynaud's phenomenon,
- Ringing in ears, hearing difficulties
- Seizures
- Easy bruising, hair loss

# 2010 criteria continued

- The SS scale score is the sum of the severity of the 3 symptoms (fatigue, waking unrefreshed, cognitive symptoms) plus the extent (severity) of somatic symptoms in general. The final score is between 0 and 12.

# Nonpharmacological Treatment

- Exercise
  - Stretching
  - Walking
  - Water Aerobics
  - Yoga
  - Tai chi
  - Anything that will get you moving

# Nonpharmacological Tx cont.

- Cognitive Behavioral Therapy
- Lifestyle modification
  - Identifying triggers
  - Avoiding aggravating factors
  - Pacing

# Medications

- Managing Insomnia
- Medications
  - Melatonin
  - Benadryl
  - \*\*Amitriptyline 10-50mg qhs
  - \*\*Cyclobenzaprine 10mg qhs
  - Trazodone 50mg qhs

\*\*FDA approved, with strong evidence

# Medications

- Anti-seizure
  - Gabapentin 100-300mg TID or given as a single dose at bedtime
    - Older, less expensive, effective, less side effects
    - Blurry vision, swelling hands/feet, fatigue
  - \*\*Lyrica 150-225mg BID, or adapted as needed for tolerance
    - Expensive, weight gain
    - blurry vision, swelling hands/feet, fatigue

\*FDA approved, with strong evidence

# Medications

- Anti-depressants
  - Cymbalta 30-60mg daily
  - Savella 50-100mg BID
    - Nausea most common problem, may need to slow titration
    - Anxiety may be a problem

# Other Meds

## Modest Evidence

- Tramadol
- Effexor, Prozac, Lexapro, etc.
- Mirapex
- Xyrem; Provigil?

## No evidence

- Opioids
- NSAIDs
- Corticosteroids
- Benzodiazepine/  
nonbenzodiazepine  
hypnotics

# Treatment Tips

- Individualize therapy
- Fatigue/mood most significant- SNRI
- Pain/sleep most significant- anti-seizure
- Even low dose TCA can be effective
- Start low, go slow (reduce side-effects)
- Non-pharmacologic therapy is more important than medications

# Outcomes

- Most will have chronic, persistent symptoms
- 10-15% disabled
- Adverse affect of delayed diagnosis
- Poor outcomes
  - Trauma
  - Levels of coping, catastrophizing
  - Concurrent medical and psychiatric illness
  - Mode of onset: trauma, infection