Regional Coordinators’ Fibromyalgia Consortium working with local support groups throughout the UK.
Fibromyalgia has been around for a long time, even though it has only recently begun to be better understood and more and more people are being diagnosed with the condition.

Fibromyalgia is usually thought of as a fairly new illness, however, it may have actually existed for centuries. Although the term “fibromyalgia” was first coined in 1976, physicians have written about conditions resembling FM since the early 1800s. Reports of illnesses with strikingly similar symptoms can even be found as far back as around 1500 BC.

Notable Historical Accounts

Probably the earliest description of a fibromyalgia-like condition is found in the Biblical account of Job’s physical anguish. “I, too, have been assigned months of futility, long and weary nights of misery. When I go to bed, I think, ‘When will it be morning?’ But the night drags on, and I toss till dawn…And now my heart is broken. Depression haunts my days. My weary nights are filled with pain as though something were relentlessly gnawing at my bones.” (Job 7:3-4 and 30:16-17 - NLT)

In the 19th century, the English army nurse and Red Cross pioneer Florence Nightingale was taken ill with fibromyalgia-like symptoms. She became ill while working on the front lines during the Crimean War (1854 – 1856) and never really recovered. Until her death in 1910, Nightingale was virtually bedridden much of the time, suffering with unrelenting pain and fatigue.

Useful Websites for Fibromyalgia Information

- www.fmauk.org
- www.fms-help.com/tips.htm
- www.copingwithfibromyalgia.org/
- www.fmcsfsme.com/article_copingwithfibromyalgiaflare.php
- www.womenshealth.gov/illness-disability/types-illness-disability/fibromyalgia.cfm
- www.paintoolkit.org
- www.chronicfatigue.about.com
- www.mayoclinic.com
- www.fibromyalgia.lifetips.com/cat/58411/every-day-coping-strategies/index.html
- www.webmd.com/fibromyalgia/fibromyalgia-what-you-need-to-know-10/accepting-fibromyalgia
- www.fmnetnews.com/resources-coping.php
- www.prohealth.com/library/showarticle.cfm?id=4449&t=CFIDS_FM
- www.fmaware.org
- www.sover.net
- www.myalgia.com
- www.menwithfibro.com
When you suffer from an invisible illness (one where you do not look sick), it can be comforting to have the understanding and support of others who share the same challenges that you have to face. Finding support and becoming open to new adventures can make your journey through life easier. Joining a support group can help you move on with your life.

Most people with fibromyalgia want reassurance that what they are experiencing is normal. Reassurance can be a powerful therapeutic tool.

A support group offers the opportunity to share information that provides support and education as well as providing emotional support. It allows participants to validate their common experiences through sharing information whilst getting feedback and support.

A support group ensures that the information it passes on to its members is not biased and that it is accurate.

A support group provides a place where personal information can be passed from one to another in the confidence that this interaction is strictly confidential.

A support group can provide support and education for carers, family members and co-workers. It helps them understand the condition and therefore enables them to provide support and encouragement for the person with fibromyalgia as well as receiving support themselves from fellow carers.

A support group adds an element of social interaction and encourages you to get out of the house and become less isolated. Volunteering to help with the running of the group is an excellent way to stop thinking about your own problems and feel good about helping others deal with theirs. It feels good to feel useful again.

A support group promotes problem solving and encourages members to help one another.

**Why Join A Support Group?**

Following are some of the more significant dates in the history of fibromyalgia:

- **1600s** – Fibromyalgia-like symptoms were first given a name: muscular rheumatism.
- **1816** – Dr. William Balfour, surgeon at the University of Edinburgh, gave the first full description of fibromyalgia.
- **1824** – Dr. Balfour described tender points.
- **1904** – Sir William Gowers coined the term fibrositis (literally meaning inflammation of fibers) to denote the tender points found in patients with muscular rheumatism.
- **1972** – Dr. Hugh Smythe laid the foundation for the modern definition of fibromyalgia by describing widespread pain and tender points.
- **1975** – The first sleep electroencephalogram study identifying the sleep disturbances that accompany fibromyalgia was performed.

★ **1976 - Because no evidence of inflammation could be found, physicians changed the name from fibrositis to fibromyalgia (meaning pain in muscles and tissues).**
Milestones

- **1981** – The first controlled clinical study with validation of known symptoms and tender points was published. Dr. Yunus developed criteria, which were used as a standard to objectively diagnose fibromyalgia.

- **1987** – The American Medical Association recognised fibromyalgia as a real physical condition.

- **1990** – The American College of Rheumatology developed diagnostic criteria for fibromyalgia to be used for research purposes. The criteria soon began to be used by clinicians as a tool to help them diagnose patients. These criteria include:

  1. **History of widespread pain lasting over three months.**

  2. **Pain in 11 of 18 distinct tender point sites on palpation or pressure with a finger.**

Other muscles and soft tissue areas may be tender in addition to these 18 areas described in the criteria. The criteria attempts to establish strict findings for diagnosing generalised fibromyalgia in those who have muscle pain.

- **1990s** – The concept of neurohormonal mechanisms with central sensitization was developed.

  In 1992, the Second International Myofascial Pain and Fibromyalgia Symposium was held in Copenhagen, Denmark attracting over 500 medical professionals throughout the world interested in fibromyalgia. As a result of this symposium a document called the “Copenhagen Agreement” was formulated.

Self Help Initiatives for People with Fibromyalgia

Always remember that you can and will have improvement in your fibromyalgia symptoms by implementing your own personalised self-management plan. Continuing to learn all that you can about fibromyalgia will help you cope with your symptoms.

**Finally** I would like to share with you a few words of encouragement that I read recently by Karen Lee Richards, who is the co-founder of the American National Fibromyalgia Association.

As I read these words I thought that they sum up the situation that we find ourselves in through no fault of our own.

“Although Fibromyalgia may change your life, it can change for the better.

When you were healthy, you probably got involved in many activities … some because they interested you and some because you felt obliged.

Now you must choose your activities carefully and use your limited energy to focus on those things that are the most important to you.

Many things in life may catch your eye or spark your interest, but very few will touch your heart.

Pursue what touches your heart”

*Good luck with putting your self management plan Together from all of the Regional Coordinators working with Local Groups & Helpline Volunteers.*
treatments that they are given. Remember that many people with fibromyalgia are often sensitive to medications. It is important to work with your health-care professionals to evaluate the success of a treatment and determine whether you need to stop taking it and try something else. It is a good idea to keep a diary - What sort of day have you had? What makes your pain worse? When do you have pain? (e.g.: at rest or just when you move). Does the pain have any effect on your appetite? Does the pain disturb your sleep? Have you had to take extra pain relief? What your pain feels like (e.g. sharp, aching, numbing). Does your pain affect you in any other ways? What is your Pain Rating score for the day using the scale 0-10, 0 being no pain, 10 the worse pain you have ever experienced?

From this information make a list of any questions that you want to ask your doctor or nurse when you see them. Take your diary with you when you go to see your medical professionals it will help you remember what you want to talk to them about.

It is important to have patience; you may need to try several medications or types of treatment before finding the ones that are right for you.

Within the working relationship between you and your medical professionals you have responsibilities that need to be recognised in order for the partnership to work and for you to receive health care that meets your needs.

Appreciate successes – even small steps count.

Try to go to bed each night happy that you have achieved at least one thing during your day – even taking a short walk with a friend is an achievement.

Try not to be too hard on yourself.

Self Help Initiatives for People with Fibromyalgia

Eleven years on, this document is still considered a valuable piece of information. Sufferers have used it to provide documentary evidence when applying for state benefits and to unsympathetic GP’s, that fibromyalgia does exist and is not “all in the sufferer’s head”. Fibromyalgia is now recognised as a distinct medical condition with characteristic findings. The Department of Health has produced a two-page document all about FMS, this is something to which all GP’s should have access.

- 1995, a third Symposium was held in San Antonio, Texax
- 1998 a Fourth Symposium was scheduled in Italy.
- 2007 – The U.S. Food and Drug Administration approved the drug Lyrica for the treatment of fibromyalgia. This was the first drug ever to receive FDA approval for fibromyalgia. (Since then, additional medications i.e. – Cymbalta and Savella – have also received FDA approval for the treatment of FM.)
- During the 20th century, fibromyalgia began to be recognised by some medical professionals as a real physical condition. At first it was thought to be a disease of the muscles and fibrous tissues, which was a logical assumption since muscle pain seemed to be the main symptom. However, tests done on the muscles and tissues of FM patients failed to show any actual damage. Next, researchers theorized that it might be an autoimmune disorder, but research could not uncover any disturbance of the immune system.
CONTROVERSY about FIBROMYALGIA

We are all aware that even at this present time there is still a lot of CONTROVERSY about FIBROMYALGIA, why is this?

Fibromyalgia was first thought to be inflamed areas in fibrous tissue or fascia that surrounds muscles and bind them together. The fascia is like a glove covering a hand. The hand is the muscle, and the glove is the fascia. Subsequently, sophisticated microscopic studies were performed, and they reported that there was no actual inflammation with the muscles or connective tissue. If we were to look at your muscles under a microscope, we would not see evidence of muscle disease; in fact, the muscles themselves function normally, or have normal strength. But your muscles are painful, and this pain has certain characteristics, which make up a specific syndrome, the fibromyalgia syndrome.

The original theory that an inflammation existed was incorrect; many doctors falsely concluded that fibromyalgia was not a legitimate condition. These doctors suggested that the symptoms were "all in the head." In fact, many physicians use the term "psychogenic rheumatism" to describe fibromyalgia.

Routine laboratory studies and x-rays, will all be normal with this condition. No disease is found in the bones or nerves. Because routine tests are normal does not mean that fibromyalgia does not exist, or that all of the tests will be normal. Sleep studies, electron microscopy studies, muscle oxygenation tests, and other sophisticated studies have been shown to be abnormal in persons with fibromyalgia. These tests are mostly carried out in America, where their health scheme is very different to our NHS. These special tests are very expensive. Therefore, these tests are not considered part of the routine testing for individuals with muscle pain, even though they would be abnormal if the person had fibromyalgia.

Self Help Initiatives for People with Fibromyalgia

Try not to stress about financial issues.

Find out if there are any benefits that you may be entitled to whilst you continue to work, retrain, or if you have to relinquish your job.

For further information refer to Welfare Rights Advisor at Citizens Advice Bureau, Dial, Independent Advice Centres, telephone the Benefits Enquiry Line on 0800 882 200, log on to the website www.benefitsandwork.co.uk

OR if the above agencies are not able to help/ or help not satisfactory call FMA UK Benefits Helpline: 0844 887 2450 which is available Mondays and Fridays between 10am and 12 noon

Establish a daily routine and learn to relax

Do what your body feels comfortable doing but try to remember:

The golden rule is not to do any activity for more than 20 minutes.

Try to incorporate time for relaxation into your day, each day try to do something that you are interested in and enjoy.

• Try to remember too much activity or too little can both cause fibromyalgia flair.

Work with your medical professionals to find out what works best for you.

Because fibromyalgia is treated with multiple treatment options, you have to evaluate the options you feel the most comfortable with. It is helpful to base this analysis on things that have worked well in the past (but do not be afraid to try new things which are offered by your medical professional team).

Every person with fibromyalgia reacts differently to the
**Self Help Initiatives for People with Fibromyalgia**

**Educate Yourself**

Find out all that you can about Fibromyalgia. Check out local library for books – request them if not available:

"Fibromyalgia Up Close and Personal" by Dr Mark Pellegrino. This is published by Anadem Publishing and the ISBN number is 1 890018 50 3


Other excellent books include “From Fatigued To Fantastic” by Jacob Teitelbaum ISBN number 1583332898 Publisher: Avery Publishing Group Inc.

FMA UK also has a list of publications that they sell.

**Find out about the Expert Patient Programme**

This is a 6 week course for 2 hours per week for anyone dealing with a chronic condition

– contact your local Primary Care Trust for area you live in and ask for further details.

You do not have to be referred by your GP to attend this course.

**Exercise**

Check out information about exercise on Dr Robert Bennett’s website by following the link on www.fmauk.org (link found on Specialist information page). Remember, all kinds of physical activity can be considered exercise. Walking your dog, gardening, strolling through your local supermarket, walking up and down stairs, playing with children can all keep you physically active. Remember to just keep moving!

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**Latest Research**

- Finally, as the 21st century approached and technology brought new laboratory testing methods and brain-imaging techniques, researchers were able to identify a sensitisation of the central nervous system in fibromyalgia patients. Today ongoing research continues to uncover exciting new information about the causes and treatment of FM. Hopefully one day soon fibromyalgia will be relegated to the pages of past history.

**Latest research has identified:**

- a deficiency in Serotonin in the central nervous system and
- a resulting imbalance of Substance P (a transmitter substance that sends pain messages to the brain).

**The effect of this is:**

- disordered Sensory Processing (the brain registers pain, which is amplified, when others might experience a slight ache or stiffness).
- Research now strongly indicates that a central nervous system dysfunction is primarily responsible for the increased pain sensitivity of FMS.

**With these advances come the hope that a cause may be found and hence a cure, or at least more effective treatment.**
General Introduction

- Fibromyalgia (FM for short) is not a life threatening illness but is often life changing.

- It does not necessarily affect everyone in the same way

- It is a condition that is often invisible to others, however research supports that FM is a distinct clinical condition.

- FM is recognised by the Department of Health and is listed on the NHS Direct website.

- The more you know about the illness, the easier it is to cope with.

Possible feelings after Diagnosis:

- relieved that you have been given a positive diagnosis that something “real” is wrong with you.

- in “no man’s land” because you do not really know what your next step should be, or indeed where to go to get information and help.

What does the Word Fibromyalgia Mean?

Fibromyalgia is possibly a word that you have never heard of before. What does it mean?

Fibro = Fibrous Tissues (tendons & ligaments)
My = Muscle
Algia = Pain

Self Help Initiatives for People with Fibromyalgia

Check out FMA UK website: www.fmauk.org

The website contains information about:

- fibromyalgia from medical professionals who specialise in fibromyalgia
- what is happening at FMA UK & in the local support groups throughout the UK
- what is happening at the FIBROMYALGIA ALL PARTY PARLIAMENTARY GROUP (FAPPG)
- it also has forums where you can “chat” to other people with fibromyalgia.

Talk to family and friends. Try to explain that you are still the same person you have always been.

To help people understand the idiosyncrasies of fibromyalgia download the “Letter to Normals” found on www.fibrohugs.com

Gather Opinions

Help with understanding your illness can be achieved by taking the time to talk to various people who are involved with helping people with fibromyalgia in a variety of ways. You may not always agree with everything you hear, but it may help you to choose options that you may wish to explore.

Suggestions— people you may wish to talk to are:

- Medical health care professionals
- A National Helpline Volunteer
- Support Group Leaders and members of a support group
- Family members and friends
- Website forum members
can be caused by intestinal sensitivity due to irritable bowel syndrome. One way to reduce these symptoms is to avoid certain foods.

**Self Help Initiatives for People with Fibromyalgia.**

Send for a **FMA UK Information Pack**
On a piece of paper write your address and Info Pack in the top left hand corner, fold it up, place it in an envelope, add a second class stamp and send it to:

FMA UK,
Training & Enterprise Centre,
Applewood Grove,
Cradley Heath,
West Midlands. B64 6EW

Or

Visit FMA UK website and request a copy

**Join a Local Support Group**
To find out where your nearest local support group or helpline is contact the Regional Coordinator for your area, you can find the RC by logging onto [www.fmauk.org](http://www.fmauk.org) (contact us) or call the National Help line on 0844 887 2444 10am to 4pm weekdays.

Meeting together not only adds an element of social interaction but encourages you to get out of the house, become less isolated, more proactive, and positive. A support group can be a wonderful place to make new and understanding friends as well as providing a facility that allows you to voice your fears and frustrations in a confidential, safe and non judgemental environment.

If you feel that a local support group is not for you check out the forums on the FMA UK website [www.fmauk.org](http://www.fmauk.org)

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**What is Fibromyalgia?**

**Fibromyalgia** is a condition of:
- **chronic widespread pain / chronic pain amplification**
- **Fatigue**

**The pain** involves mainly:
- **muscles**
- **tendons** tendons hold muscles to bones.
- **ligaments** ligaments hold bones together.
- **bursa** a bursa is a fluid filled sac that decreases the friction over joints.

**The muscle pain fluctuates** and is **often aggravated** by:
- **various physical factors**
- **environmental factors**
- **emotional factors.**

**In addition** to widespread pain and fatigue, fibromyalgia syndrome can be associated with:
- **irritable bowel syndrome**
- **fluctuating stiffness**
- **numbness**
- a feeling of weakness
- **cold intolerance**
- **poor sleep**
What Fibromyalgia is and is NOT

- Headaches
- chest pain
- cognitive difficulties
- sensitivity to light, smells, temperature and sound
- dizziness (balance problems)
- anxiety/panic attacks
- as well as other symptoms

It can be called a “Head to Toe” condition.

Fibromyalgia is NOT:

Fibromyalgia can cause symptoms that resemble arthritis or neurological disorders, but it is different from these disorders.

- Unlike arthritis, it does not cause the joints to swell or become deformed, even though it may cause pain in the tissues or a feeling of swelling around a joint.
- It does not cause paralysis or progressive neurological problems
- It is not crippling
- It is not a ruptured disc
- It is not a pinched nerve, even though the symptoms may resemble those caused by a pinched nerve
- It is not a tumour
- It is not life threatening—despite what the pain may be telling you
- It is not all in your head
- It is not a mental health problem

11) Memory Problems: CRS-Can't Remember Stuff

Reference: Taking Charge of Fibromyalgia  Julie Kelly, M.S.,R.N. & Rosalie Devonshire, M.S.W.

Many individuals with fibromyalgia experience cognitive problems. Trying to remember a name, putting the wrong word in a sentence, forgetting what your boss just told you to do five minutes ago, misplacing things, an inability to concentrate on reading, or studying are common complaints by many FMS patients. Sometimes these problems in cognitive functioning are referred to as "fibro-fog." When fibromyalgia symptoms are flared, often memory and concentration problems will also be more severe. It is not fully understood why this occurs because the brain's processing system is very complex. It is known; however, that poor sleep quality exacerbates cognitive problems. As you get better from a flare, difficulties with memory and concentration should improve.

If cognitive problems are really extreme, sufferers should discuss these symptoms with their GP.

12) Irritable Bowel Syndrome is often associated with FM

Irritable bowel syndrome (IBS) is a common 'functional' disorder of the gut. (The gut includes the bowels.) A functional disorder means there is a problem with the function of a part of the body, but there is no abnormality in the structure. So, in IBS, the function of the gut is upset, but all parts of the gut look normal, even when looked at under a microscope. IBS causes various symptoms. Up to 1 in 5 people in the UK develop IBS at some stage in their life. IBS can affect anyone at any age, but it commonly first
10) HEADACHES

FMS sufferers often experience headaches - there are many different triggers for them. The most conditions related or possibly related to fibromyalgia, are:

- Tension/migraine headaches (the majority of people with fibromyalgia have these). Tension headaches are also called muscle contraction headaches. They usually begin at the base of the neck and extend upward to the temples forming a band-like squeezing headache. Migraine headaches are vascular in origin. Some events trigger blood vessels to the brain to constrict and then dilate leading to severe headaches. Nausea, vomiting, eye pain, and other symptoms may also be associated with headaches.

- Temporomandibular joint or TMJ dysfunction. This causes jaw pain, dizziness, and "head" pain, a common associated condition of fibromyalgia.

- Referred pain from tender/trigger points in neck and shoulder areas.

- Hormonal changes in women (women with fibromyalgia commonly experience headaches as part of the premenstrual syndrome (PMS) or menopause).

- Eye strain (fibromyalgia pain and fatigue in eye muscles cause headaches).

What Causes Fibromyalgia?

It is not a “new” disease or some recent “medical” fad

It does not turn into one of the above mentioned conditions

However:
People with fibromyalgia may look okay on the outside, but are definitely hurting on the inside.

What Causes Fibromyalgia?

Some possible triggers of FMS are:

- some sort of trauma such as a fall or car accident
- a viral infection
- hormonal problems
- an operation
- muscle physiology problems—decreased oxygen supply to muscles may account for some of the pain mechanism or it begins without any obvious trigger.

It is a complicated condition:

- which often has more than one factor involved
- may even stem from a genetic predisposition
- triggers may be recognised, but the exact mechanism of how fibromyalgia syndrome develops from any trigger is not fully known

it is an “end point” condition with multiple paths leading to it.
People with fibromyalgia have physical abnormalities that result in pain amplification, causing pain to be perceived even when they are exposed to sensations that would not normally cause pain i.e. wearing certain items of clothing, a touch on the arm or even a bright light can cause extreme pain & fatigue.

- **the pain** usually consists of **generalised aching**, it can be described as **stabbing, burning, or even cramping**—a sense of "I hurt all over"
- **certain parts** of the body **may be particularly painful**
- the **pain may move around** and be accompanied by muscle spasm
- the **pain can fluctuate from day to day, even hour to hour**
- **everyone** with fibromyalgia syndrome will experience **worsening** of their pain from time to time; that is part of the illness
- **usually the worsening is temporary, and is known as a flare-up,** we can’t stop this from happening, **some people have frequent flare-ups others don’t**
- **usually we can identify the cause of the increased pain,** if not, we call the flare-up spontaneous
- **sometimes** flare-ups happen **even when we have taken care** to handle everything we do correctly
- **we simply have to deal with them as they occur and try to accept that these intrusions are part of the condition**

**When you don’t feel well how do you know if it is because of Fibromyalgia or something else?**

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**Symptoms—Joint Pain / Cold Intolerance**

increase, especially if it is cold or damp. It appears that muscles act like weather barometers. When it is cold and damp, perhaps our muscles absorb more moisture or are more swollen or sensitive which may cause the increased pain. Whatever the reason, **the majority of people with fibromyalgia do better in warm, dry regions or during warmer, drier seasons. There are of course those who cannot tolerate heat and prefer cooler conditions.**

A woman with fibromyalgia may notice increased swelling before her menstrual cycle. Fibromyalgia symptoms often flare-up just before menstruation. This may be related to increased muscle swelling during the fluid-retention state of their menstrual cycle. **In fact, the common pre-menstrual syndrome (PMS) is often more severe in women with fibromyalgia.**

8) **JOINT PAIN**

Joint pain and stiffness are usually found in those with fibromyalgia. **This is mostly related to pain at the muscle and tendon insertions into the joint area and is not a reflection of actual joint pathology or inflammation.**

9) **COLD INTOLERANCE**

People with fibromyalgia are very sensitive to weather changes especially cold, damp conditions and cold draughts. One major enemy is cold air conditioner draughts, which can exacerbate neck and shoulder pain. Even if we are completely relaxed and enjoying ourselves, a cold draught on exposed skin overlying tender muscle areas can cause an automatic reflexive reaction, sending a signal to the muscles and causing muscle pain.
there is a lack of oxygen, and, as mentioned, fibromyalgia muscles do not use oxygen well. Also, muscles have less access to oxygen because they are always contracted and therefore have limited blood supply.

Some weakness can be contributed to the muscles being so tight. One of the most important things for a person with fibromyalgia to do is to stretch. Since fibromyalgia muscles are so tight, they are more vulnerable to strains, so it is especially important to counteract this tightness mechanism by stretching. BUT it is important to remember to warm up the muscles before you begin your stretching routine. Taking a warm bath, standing under a hot shower or by gently marching on the spot, can do this. An excellent routine to follow is the one compiled by Dr. Sharon Clark, which is especially for people with FMS.

Stretching increases the muscle flexibility which in turn leads to decreased pain and decreased vulnerability to injuries or strains. Passive stretching exercises can involve different body parts; head, neck, trunk, upper body, low back, hips, and legs. Most people with fibromyalgia can learn self-passive stretching exercises to help the feeling of weakness, pain, and stiffness and swelling in their muscles.

The muscles, especially the arms, can feel weak when doing isometric type activities. For example, when holding the arms up to change a light bulb, the energy will feel like it is being drained from the arms and this will cause a sensation of weakness. This is due to the sustained contractions and the increased demand for oxygen that is needed by isometric activity.

7) SWELLING

Weather changes can also cause fibromyalgia symptoms to

- The impact of fibromyalgia differs in type and severity from person to person.
- FM does not preclude the possibilities of you suffering from other medical conditions.
- You should never assume that everything that you are experiencing or feeling is because of fibromyalgia.

Because FM is associated with:
- widespread pain in all parts of the body
- including the chest and abdomen
- as well as severe fatigue
it is often difficult to know whether symptoms are related to FM or caused by another medical condition.

Acute pains, shortness of breath, and high fevers are your body’s warning signs which you should not ignore.

If you are experiencing any new symptoms:

“The GOLDEN RULE” must be to check them out with your own MEDICAL PROFESSIONALS.
Anyone can get fibromyalgia. Worldwide, up to 2% or more of the population has this condition, so it is very common, and it affects millions and millions of people. Currently it is diagnosed about 9 times more in women than men. Children can also have fibromyalgia, although the condition usually first causes symptoms between ages 20 and 45. Normally, the symptoms have been present for years even though the diagnosis may not have been made until after ages 50-65. A rheumatologist or “Fibro Friendly G.P” can make an actual diagnosis of fibromyalgia. Many people have fibromyalgia who have yet to see a medical professional and be diagnosed.

Fibromyalgia pain is usually described as a chronic, generalised aching, with certain areas that may feel like tingling, or sharp, stabbing sensations. The pain may radiate or travel to different locations. For example, areas of discomfort in the upper back may cause numbness and tenderness in the arm, even though there is no problem, per se, in the arm. A person with fibromyalgia can often point to the exact area or areas of discomfort and note that a particular area is very tender to touch. The pain may "wander" to different sites. The pain can also flare up suddenly for no apparent reason. The muscles are not the only sore areas. Other soft tissues such as ligaments, tendons, and bursa can be sore.

Since different locations and sites can be painful with fibromyalgia, it is important to always be certain that the cause of the pain or discomfort is in fact fibromyalgia and not another condition.

There are doctors who consider fibromyalgia and chronic fatigue syndrome as the same thing. Some doctors treat both the same way. Fatigue is more of a major factor in chronic fatigue syndrome.

Some studies have shown that when a non-sufferer’s sleep was interrupted during the "deep sleep" cycle, tender points and pain would develop with fatigue.

5) NUMBNESS

There may be tingling, numbness, or feelings of heat or cold with fibromyalgia. These abnormal sensations are called paraesthesia and may radiate or travel to different locations. For example, painful muscle areas in the upper back may cause arms to become painful and tingling even though no problem in the arm is present. The skin is also described as extremely sensitive and painful in many people with fibromyalgia.

6) WEAKNESS

Fibromyalgia causes the muscles to be tight, stringy, and to have inconsistent localised spasms. Fibromyalgia muscles do not use oxygen well and have decreased energy compounds, fatigue is a major problem. The muscles, therefore, are painful, tight, and easily fatigued. When we attempt to exercise, muscles often respond by increasing pain.

Negative painful experiences may lead to decreased motivation and decreased activity, or exercise phobias. A cycle of increased muscle tightness, spasms, and increased pain starts over again, which can lead you to sink deeper and deeper into a painful condition state. The person in constant pain will use up more energy and have less stored energy than a person without constant pain. This causes fatigue. The body usually signals pain when
3) MORNING STIFFNESS

Most people with fibromyalgia report morning stiffness, usually lasting a few hours. They feel somewhat looser and better during the late morning to early evening, and then have more pain again in the evening. Most would say the worst time of the day is in the morning. Instead of waking up refreshed and pain-free, we wake up tired, stiff and sore! Once we get going, our muscles loosen up within a few hours, and we are fairly mobile, until later in the day. The morning stiffness may be particularly bad the day after doing strenuous or unusual activities, or the weather changes to a cold damp morning.

4) FATIGUE/POOR SLEEP

Fatigue is a major complaint with those who have fibromyalgia. Poor sleep certainly contributes to this problem, but persons with fibromyalgia will often indicate they have no energy whatsoever, cannot get motivated to do various projects, and would rather lie down and go to sleep.

Poor sleep is a hallmark in nearly everyone with fibromyalgia. Many people report that the quality of their sleep is poor even though they may sleep for eight hours, and when they awaken in the morning, they do not feel well rested. Sleep may be characterised by frequent awakening especially in the early morning hours and lack of deep, sound sleep. This disturbed and non-restorative sleep pattern is typical of people with fibromyalgia.

Sleep studies using monitors measuring brain waves of sleeping individuals have found that there is an abnormality in the deep sleep stage. This lack of deep sleep accounts for the feeling that our sleep is non-restorative, or that our battery did not "get recharged" during the night.
1) CHRONIC GENERALISED PAIN

Fibromyalgia is classified as a syndrome. **The chief complaint of fibromyalgia is pain.** The pain can cause functional limitations varying from mild to incapacitating. This pain is in the muscles, tendons, ligaments, bursa and sometimes feels as if it is in the joints. This is mostly related to pain at the muscle and tendon insertions into the joint area and is not a reflection of actual joint pathology or inflammation. **The pain may be described as a constant ache or throbbing.**

Typical pain locations include the head, neck, shoulders (especially between shoulder blades), low back, and hip muscles. Chest pain can be a problem especially for large busted women. Certain areas may cause sharp, stabbing pain, and these areas are sensitive to touch. The body’s process of monitoring pain, recording pain, and expressing pain is an energy consuming process that involves nerves, neurotransmitters and other various enzymes and hormones.

Most of the time, there is no clear reason why the pain occurs; that is, there has been no specific illness or trauma. In one third or more of fibromyalgia cases, some type of event either an injury like whiplash, or sometimes a viral illness such as a flu like illness, precipitated the fibromyalgia condition. **Usually the pain begins in one location, such as the shoulder, but over time, it begins to involve more and more other areas until it is no longer localised, but rather generalised throughout the body.**

**Pain may wander to different sites;** the low back may be sore one day, and then the next day the neck hurts. These wandering symptoms may lead you to think you are losing your mind. **Fibromyalgia, indeed, causes wandering pain.**

Symptoms—In More Detail

Symptoms – Multiple Tender Points

A person in constant pain will use up more energy and have less stored energy than a person without constant pain. Studies have shown that muscles with fibromyalgia do not use oxygen as well as normal muscles. Lack of oxygen usually sends a signal of pain.

2) MULTIPLE TENDER POINTS