Overview of Fibromyalgia

Fibromyalgia is chronic disorder that causes widespread pain and tenderness, and a number of other symptoms. Although fibromyalgia is often considered an arthritis-related condition, it is not truly a form of arthritis (a disease of the joints) because it does not cause inflammation or damage to the joints, muscles, or other tissues. Like arthritis, however, fibromyalgia:

- Can cause significant pain and fatigue.
- May interfere with your ability to carry on daily activities.
- Impairs the joints and/or soft tissues and causes chronic pain.

Who Gets Fibromyalgia?

Anyone can develop fibromyalgia; however, women are much more likely to develop the disorder, usually middle age.

If you have certain diseases, you may be more likely to have fibromyalgia as well. These diseases include:

- Rheumatoid arthritis.
- Systemic lupus erythematosus (commonly called lupus).
- Ankylosing spondylitis (spinal arthritis).

Research indicates that women who have a family member with fibromyalgia are more likely to have fibromyalgia themselves, but the exact reason for this – whether it is heredity, shared environmental factors, or both – is unknown. Researchers are trying to determine whether variations in certain genes cause some people to be more sensitive to stimuli, which lead to pain syndromes.

Symptoms of Fibromyalgia

The most common symptoms of fibromyalgia are pain and fatigue. In addition, you may experience a variety of other symptoms including:

- Cognitive and memory problems (sometimes referred to as “fibro fog”).
- Headaches.
• Irritable bowel syndrome.
• Morning stiffness.
• Numbness or tingling of the extremities.
• Painful menstrual periods.
• Restless legs syndrome.
• Sensitivity to loud noises or bright lights.
• Sleep disturbances.
• Temperature sensitivity.

Causes of Fibromyalgia

The causes of fibromyalgia are unknown. Sometimes fibromyalgia seems to occur spontaneously, however researchers believe that a number of factors contribute to the cause, such as:

• Physically or emotionally stressful or traumatic event.
• Repetitive injuries.
• Illness.
• Problems with how the central nervous system (the brain and spinal cord) process pain.

Some researchers are studying the role of genes in fibromyalgia and have identified several genes that occur more commonly if you have the disorder. Scientists speculate that genes may regulate the way your body processes painful stimuli. According to this theory, if you have fibromyalgia, you may have a gene or genes that cause them to react strongly to stimuli that most people would not perceive as painful.

If you have fibromyalgia, you may also have two or more coexisting chronic pain conditions, such as:

• Chronic fatigue syndrome.
• Endometriosis.
• Inflammatory bowel syndrome.
• Interstitial cystitis.
• Temporomandibular joint dysfunction.
• Vulvodynia.

Researchers do not know if these disorders share a common cause.
You may see many doctors before receiving a diagnosis of fibromyalgia because your pain and fatigue, the main symptoms of fibromyalgia, overlap with many other conditions. Doctors usually rule out other potential causes of these symptoms before making a diagnosis of fibromyalgia. In addition, there is no diagnostic laboratory test to diagnose fibromyalgia. Standard laboratory tests fail to reveal a physiologic reason for pain.

A doctor familiar with fibromyalgia, however, can make a diagnosis using criteria from the American College of Rheumatology (ACR):

- A history of widespread pain lasting more than 3 months.
- General physical symptoms including fatigue, waking unrefreshed, and cognitive (memory or thought) problems.
- The number of areas throughout the body in which the patient has had pain in the past week.

**Treatment of Fibromyalgia**

Doctors usually work with a team of health care providers and treat fibromyalgia with:

- Medications.
- Lifestyle changes.
- Complementary therapies.

Fibromyalgia can be difficult to treat because not all doctors are familiar with fibromyalgia and its treatment. You should find a doctor who understands the treatment of fibromyalgia, which may include several treatment team members.

**Medications**

Doctors may prescribe one of the three medications currently approved by the U.S. Food and Drug Administration (FDA) for the treatment of fibromyalgia:

- Duloxetine, an antidepressant.
- Milnacipran, similar to other antidepressants, but is only approved to treat fibromyalgia.
- Pregabalin treats neuropathic pain (chronic pain caused by damage to the nervous system).

In addition, your doctor may also treat fibromyalgia with other medications developed and approved for other purposes.

**Analgesics**

Analgesics are painkillers. They range from over-the-counter products to prescription medications. Your doctor may prescribe an analgesic to help manage your pain. When your
pain is severe, your doctor may recommend a narcotic medication. However, there is no solid evidence showing that narcotics actually work to treat the chronic pain of fibromyalgia. Most doctors hesitate to prescribe them for long-term use because you could become physically or psychologically dependent on them.

**Nonsteroidal anti-inflammatory drugs**

Doctors prescribe nonsteroidal anti-inflammatory drugs (NSAIDs), such as aspirin, ibuprofen, and naproxen sodium, to treat inflammation. Although inflammation is not a symptom of fibromyalgia, NSAIDs may help relieve your pain. NSAIDs work by inhibiting prostaglandins, a substance found in your body that plays a role in pain and inflammation. These medications, some of which are available without a prescription, may help ease the muscle aches of fibromyalgia. NSAIDs may also relieve menstrual cramps and the headaches that you may experience with fibromyalgia.

**Lifestyle changes**

Making lifestyle changes can also help you manage your fibromyalgia, including:

- Getting enough sleep.
- Exercising.
- Making changes at work.
- Eating well.

**Complementary therapies**

Your doctor may recommend treating your fibromyalgia with complementary therapies, including:

- Massage.
- Movement therapies, such as Pilates and the Feldenkrais method.
- Chiropractic treatments.
- Acupuncture.
- Herbal and dietary supplements.

Although researchers are studying the use of supplements for fibromyalgia, there is little, if any, scientific proof yet that they help. The FDA does not regulate the sale of dietary supplements, so information about side effects, proper dosage, and the amount of a preparation’s active ingredients may not be well known.

If you are using or would like to try a complementary or alternative therapy, you should first speak with your doctor, who may know more about the therapy’s effectiveness and if it is safe to
try in combination with your medications.

For more information on complementary and alternative therapies, visit the National Center for Complementary and Integrative Health.

Who Treats Fibromyalgia?

Many family doctors, general internists, or rheumatologists (doctors who specialize in arthritis and other conditions that affect the joints or soft tissues) can treat fibromyalgia.

Fibromyalgia treatment often requires a team approach, with your doctor, a physical therapist, possibly other health professionals, and most importantly, yourself, all playing an active role. It can be hard to assemble this team, and you may struggle to find the right professionals to treat you. When you do, however, the combined expertise of these various professionals can help you improve your quality of life.

There are pain clinics that specialize in pain and rheumatology clinics that specialize in arthritis and other rheumatic diseases, including fibromyalgia.

Living With Fibromyalgia

In addition to taking medications to treat your fibromyalgia, there are many things you can do to minimize the impact of the disorder on your life.

Getting enough sleep

Getting enough sleep and getting the right kind of sleep can help you ease the pain and fatigue of fibromyalgia. However, many people with fibromyalgia can that interfere with restful sleep, such as

- Pain.
- Restless legs syndrome.
- Brainwave irregularities.

Try following these tips for good sleep:

- Keep regular sleep habits. You should try to get to bed at the same time and get up at the same time every day—even on weekends and vacations.
- Avoid caffeine and alcohol in the late afternoon and evening. If you consume caffeine found in coffee, tea, soft drinks, and chocolate you may not get a good night’s sleep. Even though it can make you feel sleepy, if you drink alcohol around bedtime it also can disturb your sleep.
• Time your exercise. Regular daytime exercise can improve your nighttime sleep. However, you should avoid exercising within 3 hours of bedtime because it can be stimulating, keeping you awake.

• Avoid daytime naps. Sleeping in the afternoon can interfere with your nighttime sleep. If you feel you cannot get by without a nap, set an alarm for 1 hour. When it goes off, get up and start moving.

• Reserve your bed for sleeping. Watching the late news, reading a suspense novel, or working on your laptop in bed can stimulate you, making it hard to sleep.

• Keep your bedroom dark, quiet, and cool.

• Avoid liquids and spicy meals before bed. Heartburn and late-night trips to the bathroom are not conducive to good sleep.

• Wind down before going to bed. Avoid working right up to bedtime. Instead try some relaxing activities, such as listening to soft music or taking a warm bath, that get you ready to sleep. A warm bath also may soothe aching muscles.

It is important to discuss any sleep problems with your doctor, who can prescribe or recommend treatment for them.

**Exercising**

Pain and fatigue may make exercising and your daily activities difficult, however, it is important that you try to be as physically active as possible. Research has repeatedly shown that regular exercise is one of the most effective treatments for fibromyalgia. If you have too much pain or fatigue to do vigorous exercise, try starting with walking or other gentle exercise and build your endurance and intensity slowly.

**Making changes at work**

You can continue to work when you have fibromyalgia, but may have to make some changes to do so. For example, you may need to

• Lower the number of hours you work.

• Switch to a less demanding job.

• Make changes in your current job.

If you face obstacles at work, such as an uncomfortable desk chair that leaves your back aching or difficulty lifting heavy boxes or files, your employer may make adaptations that will enable you to keep your job. An occupational therapist can help you design a more comfortable workstation or find more efficient and less painful ways to lift.
Eating well

Although some people with fibromyalgia report feeling better when they eat or avoid certain foods, no specific diet has been proven to influence fibromyalgia. Of course, it is important to have a healthy, balanced diet. Not only will proper nutrition give you more energy and make you generally feel better, it will also help you avoid other health problems.

Prognosis of Fibromyalgia

Fibromyalgia is a chronic condition, meaning it lasts a long time – possibly throughout your life. However, it is important to remember that fibromyalgia is not a progressive disease. It is never fatal, and it will not cause damage to the joints, muscles, or internal organs. In many people, the condition does improve over time.

Research Progress Related to Fibromyalgia

The NIAMS sponsors research that is improving scientists’ understanding of the specific problems that cause or accompany fibromyalgia, in turn helping them develop better ways to diagnose, treat, and prevent this disorder.

Research on fibromyalgia covers a broad spectrum, ranging from basic laboratory research to studies of medications and interventions designed to encourage behaviors that reduce pain and change behaviors that worsen or perpetuate pain.

For More Info

U.S. Food and Drug Administration
Toll free: 888-INFO-FDA (888-463-6332)
Website: https://www.fda.gov

Drugs@FDA at https://www.accessdata.fda.gov/scripts/cder/daf. Drugs@FDA is a searchable catalog of FDA-approved drug products.

Centers for Disease Control and Prevention, National Center for Health Statistics
Website: https://www.cdc.gov/nchs

National Center for Complementary and Integrative Health
Website: https://nccih.nih.gov

American College of Rheumatology
Website: https://www.rheumatology.org

Arthritis Foundation
Website: https://www.arthritis.org

National Fibromyalgia Association
Website: http://www.fmaware.org

National Fibromyalgia Partnership, Inc.
Website: http://www.fmpartnership.org

Fibromyalgia Network
Website: http://www.fmnetnews.rahmerman.com

If you need more information about available resources in your language or other languages, please visit our webpages below or contact the NIAMS Information Clearinghouse at NIAMSInfo@mail.nih.gov.

- Asian Language Health Information
- Spanish Language Health Information