

Dr Paul Tennit

Fibromyalgia

BMJL.

cause unknown

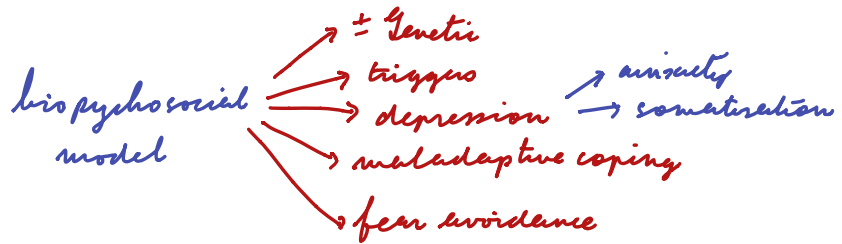
→ don't attribute to a specific cause

→ associated with poorer outcomes.

↑ Risk w Fibre.

No cure
chronic

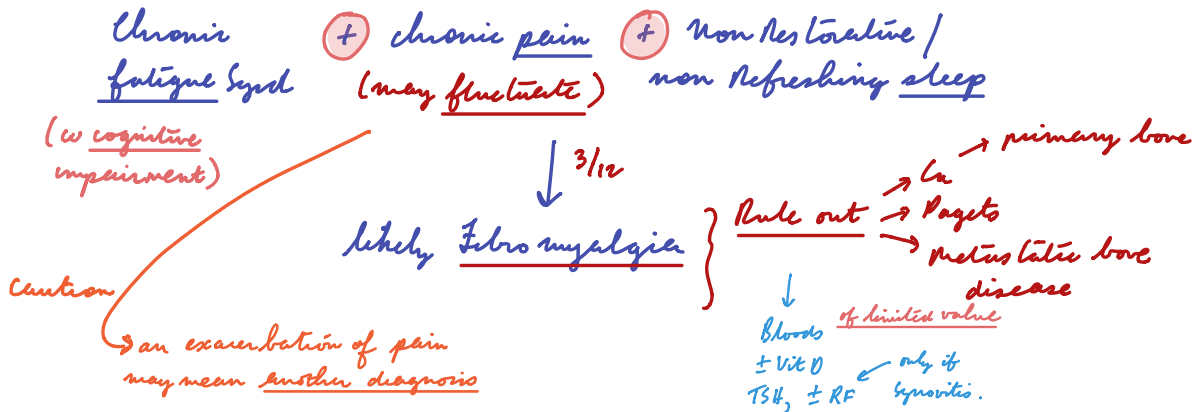
M = F though F report more.



↑ pain perception

↳ central pain processing
↑ pain signalling.

"constellation of symptoms"



Diagnosis

2010 ACR criteria.

7/12

widespread pain } above + below
 waist
 both sides
 body.

+ fatigue,
 unrefreshing sleep,
 difficulty concentrating

→ mapped pain on areas of body.
 WPI (max 19)

Wide spread pain index (WPI) ≥ 7 (+)

Symptom severity (SS) ≥ 5

(or WPI 3-6 (+) SS ≥ 9) ? chronic fatigue synd.

SS (0-3 Each) → Fatigue
 → Waking refreshed } max 12
 → Cognitive symptoms
 → Somatic symptoms

↳ long list of somatic Sx.
 eg irritable bowel.

no need to map "trigger points"

Usually don't need physical exam to Δ FM but physical exam required to rule out other causes

"Yellow Flags"

things that may interfere engagement

↳ existing mental disorder
 ↳ specific event (PTSD)
 ↳ employment or work issues / litigation.
 ↳ other diagnosis → thyroid, diabetes,

Primary Care management
 physio / OT / nurses / psychologists

Education
 LTC nurse.

Exercise program | CBT. | lifestyle modification

Psychology → self care

Regular physical activity
mainstay of Tx

