FREQUENTLY ASKED QUESTIONS

Frequently Asked Questions

- How can patients with central sensitization/ dysfunctional pain syndromes be identified?
- When should fibromyalgia be suspected?
- How can patients with fibromyalgia be identified?
- What is "fibro fog"?
- What characterizes the sleep problems in fibromyalgia?
- What kind of exercise should be recommended to fibromyalgia patients?
- What are the treatment implications of the pathophysiological changes seen in fibromyalgia patients?
- When should patients suffering from central sensitization/ dysfunctional pain syndromes be referred to a specialist?

How can patients with central sensitization/ dysfunctional pain syndromes be identified?

Clinical Features of Central Sensitization/Dysfunctional Pain

Pain

- Pain all over body
- Muscles stiff/achy
- Headaches
- Pain in jaw
- Pelvic pain
- Bladder/urination pain

Anxiety/depression

- Sad or depressed
- Anxiety
- Stress makes symptoms worse
- Tension in neck and shoulder
- Grind/clench teeth

Fatigue

- Do not sleep well
- Unrefreshed in morning
- Easily tired with physical activity

Other symptoms

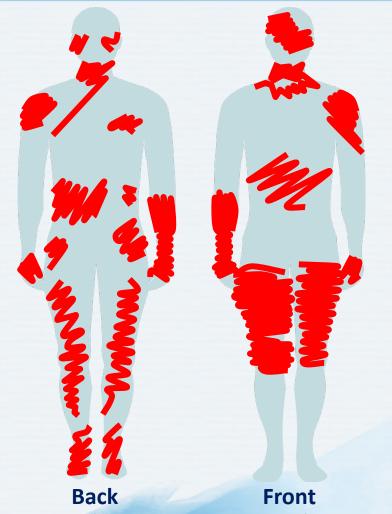
- Difficulty concentrating
- Need help with daily activities
- Sensitive to bright lights
- Skin problems
- Diarrhea/constipation

Central Sensitization Inventory (CSI)

- A self-report measure designed to assess key somatic and emotional symptoms often associated with central sensitivity syndromes, including fibromyalgia
- Clinical goal: help better assess symptoms to aid physicians in syndrome categorization, sensitivity, severity, identification, and treatment planning and to help minimize or avoid unnecessary diagnostics and treatment procedures
- Fibromyalgia patients report high CSI scores
- Test demonstrates psychometric strength, clinical utility and validity

When should fibromyalgia be suspected?

- This is a pain drawing
 - Patient colors all areas of the body in which he or she feels pain¹
- The diagram shows that the pain of fibromyalgia is widespread²



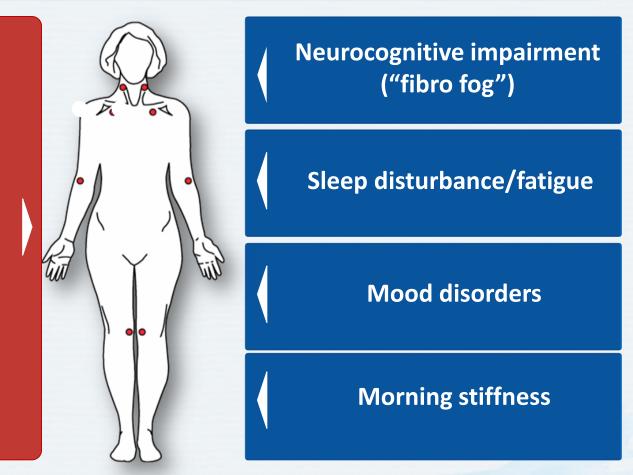
Adapted from pain drawing provided courtesy of L Bateman.

1. Silverman SL, Martin SA. In: Wallace DJ, Clauws DJ (eds.). *Fibromyalgia & Other Central Pain Syndromes*. Lippincott, Williams & Wilkins; Philadelphia, PA: 2005; 2. Wolfe F *et al. Arthritis Rheum* 1990; 33(2):160-72.

Core Clinical Features of Fibromyalgia

Widespread pain

- Chronic, widespread pain is the defining feature of fibromyalgia
- Patient descriptors of pain include:
 - Aching
 - Exhausting
 - Nagging
 - Hurting



Carruthers BM *et al. J Chron Fat Synd* 2003; 11(1):7-115; Harding SM. *Am J Med Sci* 1998; 315(6):367-37; Henriksson. *J Rehabil Med* 2003; 41(41 Suppl):89-94; Leavitt *et al. Arthritis Rheum* 1986; 29(6):775-81; Roizenblatt S *et al. Arthritis Rheum* 2001; 44(1):222-30; Wolfe F *et al Arthritis Rheum* 1990; 33(2):160-72; Wolfe F *et al. Arthritis Rheum* 1995; 38(1):19-28.

How can patients with fibromyalgia be identified?

FiRST: Fibromyalgia Rapid Screening Tool

- Self-administered 6-item questionnaire
- Score of ≥5 is indicative of fibromyalgia
- Sensitivity: 90.5%
- Specificity: 85.7%

Items

- 1. I have pain all over my body.
- 2. My pain is accompanied by continuous and very unpleasant general fatigue.
- 3. My pain feels like burns, electric shocks or cramps.
- My pain is accompanied by other unusual sensations throughout my body, such as pins and needles, tingling or numbness.
- My pain is accompanied by other health problems such as digestive problems, urinary problems, headaches or restless legs.
- 6. My pain has a significant impact on my life, particularly on my sleep and my ability to concentrate, making me feel slower generally.

What is "fibro fog"?

- Compared to those without the condition, patients with fibromyalgia complain more often of:¹
 - Mental confusion
 - Memory decline
 - Speech difficulty

- Performance on cognitive tests shows they have poorer performance than age-matched controls on tasks involving:²
 - Working memory
 - Recognition memory
 - Free recall
 - Verbal fluency
 - Verbal knowledge

1. Katz RS et al. J Clin Rheumatol 2004; 10(2):53-8; 2.Park DC et al. Arthritis Rheum 2001; 44(9):2125-33.

What characterizes the sleep problems in fibromyalgia?

- Fibromyalgia patients may complain of:
 - Non-restorative sleep
 - Insomnia
 - Early morning awakening
 - Poor sleep quality

What kind of exercise should be recommended to fibromyalgia patients?

Type of Exercise

- Try to include different types in one session (e.g., aerobic, strengthening, stretching)
- Patient preference and availability should guide selection

Intensity

- Start low, go slow
- Gradually increase to reach moderate intensity level

What are the treatment implications of the pathophysiological changes seen in fibromyalgia patients?

- Mechanisms of action of certain medications may be related to proposed fibromyalgia pathophysiologies
- Understanding of fibromyalgia is evolving
- However, reproducible central nervous system biomarkers underlying fibromyalgia have not been realized
- Base treatment on proven clinical efficacy
- Treatment should be individualized to the patient

When should patients with fibromyalgia or suspected fibromyalgia be referred to a specialist?

- Specialist consultation recommended for patients:
 - With atypical symptoms that might suggest an alternate diagnosis
 - Who have failed management in primary care
 - Who have complex comorbidities
 - For whom sleep evaluation or psychological consultation is indicated