What is fibromyalgia?

Fibromyalgia, or fibromyalgia syndrome (FMS), is a condition where the whole body is affected by pain and tenderness for more than three months. People with fibromyalgia often have other symptoms, including poor sleep, difficulty concentrating, and problems with their bladder and bowels.

Fibromyalgia is thought to be a disorder of how pain signals are processed in the spine and brain. People with fibromyalgia feel constant pain, but this is not due to problems in the joints, bones or muscles. Some features are similar to chronic fatigue syndrome (known as CFS, or ME). Fibromyalgia cannot be diagnosed with blood tests, X-rays or scans. Doctors should make a diagnosis through listening to people’s descriptions of their symptoms, performing a physical examination (which may include checking for tender points) and other tests to exclude other causes of constant pain and fatigue.

Fibromyalgia is a group of symptoms, which is why it is classed as a syndrome. It is not classed as a form of arthritis, because the pain is not caused by swelling or damage to the joints. However, like arthritis, it causes pain and fatigue or severe tiredness.

It is not known what causes fibromyalgia. However, research suggests there may be specific problems with the way people’s bodies work. Studies of brainwaves show that people with fibromyalgia do not get enough deep sleep. Research has also uncovered problems with the central nervous system (the spine and brain) in people with fibromyalgia. The parts of their brain that register pain react differently, so they feel pain when others would just feel uncomfortable or stiff.
How will it affect me?

The main symptoms of fibromyalgia are:

- pain - this could be in one area of the body or all over. The neck and the back are usually the worst affected areas
- aching and stiffness - this can change in severity throughout the day and may get worse with activity
- sleeping badly and waking up without feeling refreshed
- exhaustion, lack of energy or loss of stamina.

Other symptoms can include:

- feeling depressed or irritable
- poor concentration and forgetting things (sometimes called ‘fibro fog’)
- headaches
- restless legs syndrome, where legs are uncomfortable and twitchy, especially at night
- poor circulation, with tingling or swelling in hands and feet
- feeling an urgent need to urinate
- irritable bowels (diarrhoea, constipation or stomach pain)
- painful menstruation (periods).

Who will I see?

If you have severe, constant pain, see a doctor.

Make sure you tell your doctor about any physical and psychological symptoms you are experiencing, as pain is only one aspect of fibromyalgia. They will ask you more questions, conduct a physical examination to look for signs of fibromyalgia or other conditions, and may request blood tests or scans to exclude any other causes for your symptoms.

The doctor may also suggest a referral to:

- a specialist, such as a rheumatologist, if your diagnosis is uncertain, and to exclude any other causes
- a physiotherapist, who can suggest exercises and relaxation techniques
- a clinical psychologist or counsellor, who may use techniques such as cognitive behavioural therapy or mindfulness
- an occupational therapist, who can advise you on the best way to carry out daily activities
- a community or hospital-based specialist pain clinic or chronic fatigue service, which can help you manage your symptoms.

Fibromyalgia can develop by itself. It can also be brought on by another condition or issue, such as arthritis, mental health issues, or a traumatic event. Fibromyalgia is not life-threatening, and will not cause permanent damage to the joints or muscles.
What is the treatment?

Exercise
Research shows that exercise can reduce pain and tiredness in people with fibromyalgia. It builds strength in your muscles and can help you sleep better.

Types of exercise suitable for people with fibromyalgia

- Aerobic exercise results in more oxygen circulating through your blood – any exercise that gets you breathing harder and your heart beating faster. This can include swimming and low-impact exercise such as walking.

- Resistance exercise (sometimes called strengthening exercise) helps to strengthen the muscles that move and protect joints. You may find these difficult to start with, but should become easier with practice. Aim to do at least one session a day. If exercising in a gym, there should be a range of resistance equipment and weights to choose from. Resistance equipment allows you to improve your strength by pushing or pulling against a resistance such as weights or elastic ropes. Instructors will be on hand to give advice. If exercising at home you can use household items such as a pair of tights, cans of food, bottles and bags of sugar. You can also buy specifically designed equipment such as ankle weights. Begin with lighter items, then move on to heavier ones if you feel able to.

- Range of movement exercises (also called stretching exercises) increase your flexibility. You can do these anywhere. There are plenty of examples of exercises online, or you can be shown some by a physiotherapist. Tai chi and yoga are great examples.

For more information and detailed examples, see Arthritis Care’s Exercise and Arthritis booklet.

Psychological Therapies

Counselling or cognitive behavioural therapies (sometimes called CBT), can be a treatment option for those with fibromyalgia. Speak to your GP to find out more. The British Association for Behavioural & Cognitive Psychotherapies (BABCP) keeps a register of all accredited therapists in the UK.
Medication

Up to half of those with fibromyalgia get some benefit from medication which should be taken regularly to be effective, usually for several weeks.

There is a variety of medications your doctor may give you:

• Painkillers such as paracetamol, codeine or tramadol can help with the pain.

• Neuromodulatory drugs work on the nervous system to change how pain is processed in the brain and spine. They were originally developed for other purposes, including to treat depression and epilepsy. They have since been shown to help many people with fibromyalgia.

• Amitriptyline and nortriptyline can help you sleep and reduce pain if taken in the evening on a regular basis. Some people find they are groggy, so taking them in the early evening may help to avoid this. Although they are also used to treat depression, the doses suggested for those with fibromyalgia are usually much lower.

• Other medication used in the treatment of fibromyalgia include gabapentin, pregabalin, fluoxetine and duloxetine. Ask your doctor for more information.

What else can I do?

• Help those closest to you understand how fibromyalgia affects you. Show them this factsheet, or direct them to Arthritis Care’s website.

• Share your experiences with others who have similar problems, by joining a support group or Arthritis Care’s Online Community (arthritiscareforum.org.uk).

• Shorten your working hours or change jobs, if your current job isn’t right for you. Adapt your desk, chair, computer and other working areas so they are more comfortable.

• Applying heat with a hot water bottle, or having a hot bath or shower, can help pain and improve morning stiffness.

• If you have a dry mouth, try a toothpaste containing sodium bicarbonate.

• Try to eat a healthy, balanced diet — see Arthritis Care’s Healthy Eating and Arthritis booklet for tips.

• For ‘fibro fog’, some people find it helpful to do mental exercises like crosswords or jigsaw puzzles; do as much as you can to stimulate your brain. Pick your best time of day to do anything needing concentration. Explain to others if fibromyalgia affects your memory.
Some people find complementary therapies help them, though evidence is limited. See Arthritis Care’s Complementary Therapies booklet for more information.

Careful massage (by a partner, friend or a professional) can help you relax and may improve muscle tone and improve blood flow.

Some people may find it helpful to talk to a professional counsellor — ask your GP to refer you.

Learn to pace yourself by breaking up tasks into smaller chunks and allowing time to rest.

Is it hereditary?

It is not known whether fibromyalgia runs in families. A combination of genetic and environmental factors are thought to work together to cause the condition.

Where can I get more information and support?

Arthritis Care is here to help you make positive choices through our information, website and Helpline.

Please see the back page of this factsheet for contact information.

Other organisations

The Fibromyalgia Association UK for information and support. Studio 3013, Mile End, Abbeymill Business Centre, 12 Seedhill Road, Paisley. PA1 1JS

Helpline: 0300 999 3333 (10:00-16:00).

Website: fmauk.org

The Fibromyalgia Association merged with FibroAction on 1 July 2015.

Getting enough sleep

A lack of sleep can make your symptoms worse. Making sure you have a regular bedtime routine can help you sleep. Try going to bed at the same time each night. Make your bedroom a relaxing environment, by keeping it dark and cool. Try not to use any screens too near bedtime, such as mobile phones, computers or tablets.

Avoid drinking caffeine or exercising in the three hours before bedtime, as this will help your body to unwind. Relaxation techniques can also help relax muscles; ask your doctor, nurse or physiotherapist for recommendations.
How Arthritis Care can help you

Want to talk to someone about your arthritis?
Or read more about the condition?

Call our free, confidential Helpline on 0808 800 4050 for information and support. We’re open weekdays from 09:30 to 17:00 – we’d really like to hear from you.

We have over 40 free booklets and factsheets on various aspects of arthritis, from diet and surgery, to managing pain and fatigue. These can be sent to you in the post – just ask our Helpline staff for details.

Go online
You can download all our booklets and factsheets as PDFs from arthritiscare.org.uk/information
We also have an Online Community, where you can chat to others with arthritis, and can be reached at arthritiscareforum.org.uk

Contact us

Our Helpline:
0808 800 4050

Our website:
arthritiscare.org.uk

Social media:

@arthritiscare

facebook.com/arthritiscareuk

@arthritiscareuk

Arthritis Care and Arthritis Research UK have joined together to help more people live well with arthritis. Read how at arthritiscareforum.org.uk/merger. All donations will now go to Arthritis Research UK and be used to help people with arthritis live full and active lives in communities across England and Wales, Scotland, and Northern Ireland.
Registered Charity Number 207711, SC041156.

Thank you

Arthritis Care would like to thank the following for their help in producing this factsheet: Aneela Mian