Fibromyalgia, Tender Points and Subjective Symptoms

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PROFESSIONAL PAPER
SUMMARY
Fibromyalgia is a condition of chronic pain of muscle fibrous tissue, which is characterized by subjective complains as sleepless, sleep, disorders, morning fatigue and pain of the body in characteristic areas when we make pressure, these areas are known as tender points and other subjective complains. The aim of our study was to quantify these elements of fibromyalgia to formulate characteristic criteria and by using them is easily to diagnose patients with such disorders because the key problem is the absence of objective criteria for this disorder. During the patient examination which is based on the above-mentioned criteria, only in last 10 years of post-war period, we have diagnosed efficiently a large number of patients with characteristic subjective symptoms of fibromyalgia. Therefore, 56 patients have been hospitalized from such a disorder. Statistical data of these patients shows us that, 44 of total patients with fibromyalgia had safe fibromyalgia or (78.6%), with reliable fibromyalgia have been 10 patients or (17.8%) and with doubtful fibromyalgia the other 2 patients or (3.6%). From this total number of patients, 40 patients were females between 20 and 50 years old and the other 16 of them were males between ages of 22 to 55. By completing the characteristic criteria which are very sensitive and very valuable, most of patients (around 80%) had pain in the upper posterior of the body.

Key words: fibromyalgia, tender points.

1. INTRODUCTION
Fibromyalgia is present state of muscle fibrous tissue pain. This name comes from the Latin word “fibro” (fibrous tissues) “my” (muscle tissue) “al” (pain) “gia” (certain state) (1,2,3,4).
Clinically this rheumatic syndrome is characterized by that chronic pain, insomnia, lassitude, extra-articular morning fatigue, sensitivity to the soft tissues of the typical places known as ‘points of pain” (5,6,7,8,9). The most common complaint is that pain hurts “whole body” all the time. The quality of this constant pain described as burning “pain” as if would be injured. You can feel as if the whole body has been beat it (objectively, there is no signs of injuries). Pain is constant, migrates in different locations and intensively changes. Around 65% has to do with unpleasant mornings. Around 80% is morning fatigue, patients are even more tired during their mornings wake ups then they go to bed in the evening (5,6).
Most of patients very often are waked up during the night sleep; some of them have difficulties to fall in sleep. In general, they can sleep in the first hours of morning as they describe the best sleep. Most of patients have complains for their morning numbness as sloth, fatigue that passes around 11 AM (7,8,9).
Around 50% of patients complain for tumsence, numbness and slaughter of above extremities and rarely in bottom of them, but objectively there are no changes. Around 40% of patients with fibromyalgia complain for constipation that timely is replaced with diarrhea, abdominal inflation, stiff and fake feeling of defecation (urgent), similar to symptoms of heart failure disease.

2. METHOD
Viewed from this aspect then, we need to divide the credibility on existence of fibromyalgia with its symptoms in three groups: a) safe fibromyalgia(b) reliable fibromyalgia(c) doubtful fibromyalgia

Order to give following points: to insomnia we have given six points; morning stiff, 6 points; presence of pain on the left and the right of the body, 2 points; presence of pain under and above navel (9). The most common complaint is that pain hurts “whole body” all the time. The quality of this constant pain described as burning “pain” as if would be injured. You can feel as if the whole body has been beat it (objectively, there is no signs of injuries). Pain is constant, migrates in different locations and intensively changes. Around 65% has to do with unpleasant mornings. Around 80% is morning fatigue, patients are even more tired during their mornings wake ups then they go to bed in the evening (5,6).
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somnia or morning fatigue but not both in the same time)
- Second group has 2 points (when is present pain “under and above ridge” or pain “on the left and the right of the body”)
- Third group has 4 to 8 points of the pain
- Fourth group is the slow reaction to tricycle antidepressants and antirheumatic no steroids but they react indeed.
- The fifth group is slow reaction of anesthetic and corticosteroids to point of pain but they react indeed.

Doubtful fibromyalgia is when:
- First group has zero points
- Second has zero points
- Third group has 2 to 3 points of pain
- Fourth group is the slow reaction to tricycle antidepressants and antirheumatic asteroids but they react indeed.
- The fifth group is slow reaction of anesthetic and corticosteroids to local infiltration but they react indeed.

The often symptoms that characterize the fibromyalgia are:
- Insomnia and morning fatigue
- The presence of pain below and above ridge and pain in left and the right of the body

The characteristic points of pain from 9 to 18 are:
- at the subokcipital muscle insertions (cranium base);
- at the midpoint of the upper border of trapezes muscle;
- at origins, above the scapula spine near the medial border;
- at the anterior aspects of the intertransversal spaces at C5-C7 (frontal sides of inter transversals spaces C5-C7);
- rib (2)–upper lateral to the second costochondral junction.
- epicondyle around 2 cm under distal to the epicondyles
- In upper outer quadrants of buttocks in anterior fold of muscle.
- trochanter posterior to the trochanteric prominence.
- at the medial fat pad proximal to the joint line.

3. TREATMENT
Consists on: Medicament therapy, Physical therapy, Adequate diet

3.1. PHYSICAL THERAPY;
It is valuable to reduce pain and spasm.
Physical therapy consists on:
- Electrotherapy
- Cryotherapy
- Thermotherapy
- Patient’s education:
Consists on:
- Explanation of disease nature;
- Advices on how to eliminate the factors that impacts in strengthening of symptoms;
- Insure the patient psychological support by explaining them that, disease doesn’t threat their life, that doesn’t cause deformations as the other rheumatic diseases and that, disease doesn’t have progressive nature.
Although, we should inform patients on skipping the emotional and physical stresses. Therefore, to have a regular sleeping schedule, patient should be advised to have enough sleep and to eliminate negative elements that interrupts the sleep e.g. noise, piled bad, limelight that prevents from sleeping) etc.

3.2. DIET
Mainly it consists on elimination of caffeine, alcohol, and smoking from diet. Caffeine it should be removed slowly because the immediate elimination it causes the increase of fatigue, sloth, headache, anxiousity, sleeping disorders etc. Some of authors suggest eliminating alcohol at least for six months. Also, some authors mentioned that, these patients should use more vegetarian food in manner to regulate easily their body weight and metabolism too.

4. DISCUSSION AND RESULTS
During the post-war period in Kosova, at Rheumatology Clinic of University Hospital we had 56 hospitalized patients with fibromyalgia where 44 of them are diagnosed with safe fibromyalgia based on criteria e quantification of fibromyalgia elements (around 78%)
10 other patients are diagnosed with reliable fibromyalgia (around 17.8%) and the other 2 diagnosed with doubtful fibromyalgia (around 3.6%). From total number of the abovementioned patients, 40 of them have been females (71.4%) between 20 to 50 years old and the other 16 patients;

<table>
<thead>
<tr>
<th>Drug Category</th>
<th>Action</th>
<th>Drug’s Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antidepressants</td>
<td>The scope of use is not just for treatment of depression but also to improve sleeping and reduce the pain</td>
<td>Trazadone (Desyrel)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Setaline (Zoloft)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Flufoxetine (Prozac)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Paroxetine (Paxil)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Amitriptyline (Amyzol)</td>
</tr>
<tr>
<td>Anticonvulsivest</td>
<td>For anxiousity and sleep improve use</td>
<td>Clonazepam (Klonopin)</td>
</tr>
<tr>
<td>Hypnotics nonbenzodiazepam</td>
<td>Can be used for treatment of insomnia and undisturbed sleep</td>
<td>Zolpidem (Ambien)</td>
</tr>
<tr>
<td>Myorelaxant</td>
<td>For treatment of muscle spasms</td>
<td>Ciklobenzaprine (Flexeril)</td>
</tr>
<tr>
<td>Narcotic analgesic</td>
<td>Effective use during first days of pain</td>
<td>Hydrococode</td>
</tr>
<tr>
<td>Anti-inflammatory nonsteroids</td>
<td>It can be used for treatment of pain into patients with fibromyalgia.</td>
<td>Ibuprofen</td>
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<tr>
<td></td>
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<td>Flupirofen</td>
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<td>Ketoprofen</td>
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<td>Naproxen</td>
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</tbody>
</table>

Table 1. Medicament therapy of the patients with fibromyalgia

<table>
<thead>
<tr>
<th>Disease</th>
<th>Number</th>
<th>Percentage</th>
<th>Sex</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safe fibromyalgia</td>
<td>44</td>
<td>78.60%</td>
<td>F: 36</td>
<td>81.82%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>M: 8</td>
<td>18.18%</td>
</tr>
<tr>
<td>Reliable fibromyalgia</td>
<td>10</td>
<td>17.80%</td>
<td>F: 8</td>
<td>80%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>M: 2</td>
<td>20%</td>
</tr>
<tr>
<td>Doubtful fibromyalgia</td>
<td>2</td>
<td>3.60%</td>
<td>F: 2</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>M: 0</td>
<td>0%</td>
</tr>
</tbody>
</table>

Table 2. The frequency of fibromyalgia in our sample and results of the treatment
they have been males (around 28.6%) between ages 25 to 55.
Hence, to make these criteria as valid they don't comprehend some other important complaints that helping to diagnose this disorder e.g. funding of normal value level from laboratory analyses, chronic headache, sometimes it is diagnosed into these patients that, anxiously, stress and rarely depression.

Many patients with fibromyalgia claim that, they have articular and upper extremities swelling, but in physical examination there are signs. Therefore, different mental and physic factors changes the intensity of these symptoms as e.g. weather changes, sleep quality, physical activity, anxiously and stress (1,3,9,10,11).

5. CONCLUSION
During the last three years, the number of patients with fibromyalgia in our country has been increased due to the stress, anxiously, pure life conditions and war consequences and based in their anamnesis data, the disorder is linked to the stressing period of war when they had pure life and climatic conditions in general.
Therefore, it should be noted that, stress and anxiously can be main factors for showing up of fibromyalgia or to change the pain intensity.

REFERENCES

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