

A Physician's Guide for Diagnosing Fibromyalgia and/or Chronic Myofascial Pain

Devin J. Starlanyl
www.sover.net/~devstar/

When taking a medical history, this is a guide to what you should look for when fibromyalgia/chronic myofascial pain may be at the root of the symptoms.

Key:

- * Symptoms often accompanying FMS and CMP Complex
- (H) Indicates that reactive hypoglycemia may contribute to these symptoms
- [muscle] Muscles in parentheses indicate most likely sites for trigger point

You may find it helpful to have your patients delete what symptoms and other material that does not apply.

History Of:

- "fugue" type states staring into space before brain can function again* (H)
- alpha-delta sleep anomaly*
- appendicitis-like pains [iliopsoas, rectus abdominis, piriformis, ilicostalis]
- balance problems/staggering gait [SCM, gluteus minimus, (H)]
- bloating/nausea/cramps [abdominals, multifidi, ilicostalis, quadratus lumborum, (H)]
- bruxism* [digastric, masseter, soleus]
- buckling knee [vastus medialis, quadriceps, adductor longus]
- carbohydrate/chocolate cravings* (H)
- carpal-tunnel-like pain [subscapularis]
- childhood growing pains [early TrPs]
- confusional states*
- cry easily (tendency towards)* (H)
- delayed reactions to "overdoing it"*
- depression*
- difficulty getting out known words* (H)
- difficulty swallowing [digastric, pterygoid]
- diffuse swelling* [vascular entrapment by TrPs]
- directional disorientation* (H)
- dizziness when turning head fast [sternocleidomastoid (SCM) (H)]

double/blurry /changing vision [internal eye muscles, temporalis,SCM, trapezius, cutaneous facial, splenius cervicis]
drooling in sleep [internal medial pterygoid]
ear aches/ringing/itch [SCM, masseter, pterygoid]
electromagnetic sensitivity*
family clustering*
fatigue*
feeling continued movement in car after stopping [SCM]
feeling tilted when cornering in car [SCM]
fibrocystic breasts*
first steps in the morning feel like walking on nails [long flexors of toes, tibialis posterior]
FMS & CMP Complex: sinus syndrome ("travelling" nocturnal stuffiness) [pterygoid, SCM, posterior digastric] allergies*
FMS&MPS Complex foot* (wide in front, narrow in back, high arch)
free-floating anxiety* (H)
groin pain [adductores longus and brevis, iliopsoas]
handwriting difficulties [adductor/opponens pollicis]
headaches/migraines [trapezius, SCM, temporalis, splenii, suboccipital,semispinalis capitis, frontalis, zygomaticus major, cutaneous facial, posterior cervical (H)]
headbands painful [head, neck and shoulder TrPs]
heel pain [soleus, quadratus plantae, abductor hallucis, tibialis posterior]
hurts to put hands in cold water*
hyper-sensitive nipples/breast pain [pectoralis]
hypoglycemic symptoms* (H)
impotence [piriformis pudendal nerve entrap.]
inability to recognize familiar surroundings* (H)
irritable bladder/bowel [pelvic TrPs, multifidi,high adductor magnus, abdominal obliques]
low back pain [quadratus lumborum, thoracolumbar paraspinals, longissimus, ilicostalis, multifidi, rectus abdominis]
menstrual problems and/or pelvic pain [coccygeus, levator ani, obturator internus, high adductor magnus, abdominal obliques]
mitral valve prolapse*
mold/yeast sensitivity* (H)
mood swings* (H)
morning stiffness*
Morton's foot*
mottled skin*

muscle twitching* [local TrPs]
myoclonus*(muscle movements and jerks at night)* [local TrPs]
nail ridges and/or nails that curve under*
night driving difficulty*
numbness & tingling [nerve entrapment by TrPs]
numbness/tingling on the outer thigh (meralgia paresthetica) [quadriceps femoris, vastus lateralis, sartorius, tensor fascia latae entrap.]
painful intercourse [vaginal TrPs, pelvic floor TrPs, piriformis pudendal nerve entrap]
painful weak grip that sometimes lets go [infraspinatus, scaleni, hand extensors, brachioradialis]
panic attacks* (H)
PMS*
post nasal drip [pterygoid, SCM]
pressure of eyeglasses
problems climbing stairs [sartorius, quadriceps femoris, vastus medialis]
problems holding arms up [subscapularis, infraspinatus, supraspinatus, upper trapezius, levator scapulae]
rapid/fluttery/ irregular heart beat/heart-attack-like pain [sternalis, pectoralis (H)]
reflux esophagitis [external oblique (H)]
restless leg syndrome [gastrocnemius, soleus]
runny nose [SCM, pterygoid]
scar easily*
sciatica [thoracolumbar paraspinals, gluteus minimus, hamstrings, piriformis, iliopsoas]
sensitivity to cold/heat/humidity/pressure changes/light* (H)
sensitivity to odors*
sensory overload*
shin splint-type pain [peroneus, tibialis]
shortness of breath [serratus anterior (H)]
short-term memory impairment* (H)
some stripes & checks cause dizziness [SCM]
sore spot on top of head [splenius capitis]
sore throat [SCM, digastric, pterygoid]
stiff neck [levator scapulae]
sweats* (H)
swollen glands [digastric]
thick secretions*
thumb pain and tingling numbness [brachialis entrap. of radial nerve, adductor pollicis]
tight Achilles tendons [tibialis posterior]
tight hamstrings [hamstring complex, adductor magnus, quadriceps femoris, iliopsoas, gastrocnemius]

TMJ [masseter, trapezius, temporalis, pterygoid]
trouble concentrating* (H)
unaccountable irritability* (H)
unexplained toothaches [temporalis, masseter, digastric]
upper/lower leg cramps [sartorius, gastrocnemius]
visual perception problems [SCM, (H)]
weak ankles [peroneus, tibialis]
weight gain/loss* (H)

Some TrP Perpetuators:

"good sport" syndrome
adhesions
alcohol consumption
allergies
body mechanics
chronic infection
coping behaviors
FMS and other chronic illnesses
FMS&MPS Complex foot
hypothyroid (BT2 panel -- Total T4, Free T4, Total T3 and TSH needed)
ill-fitting furniture and car seats
ill-fitting shoes
immobility
job stress
life style
metabolic problems such as diabetes
Morton's foot
overwork
pain
paradoxical respiration
poor nutrition
poor nutrition
posture
previous surgeries
previous traumas
psychological stress

reactive hypoglycemia
repetitious exercise and work
short lower legs
short upper arms
sleep deprivation
smoking
unequal leg length
vitamin and mineral insufficiency
yeast

Note: When FMS and chronic MPS occur together, FMS often initiates a symptom and TrPs perpetuate it. The TrP is difficult to break up because FMS perpetuates it. The FMS&MPS Complex is more than just the sum of the two syndromes. The spiral must be interrupted.

For FMS

- Deal with perpetuating factors.
- Find a medication that will allow for restorative sleep yet is well-tolerated.
- Begin guaifenesin for FMS reversal with 300 mg twice a day. There may be an initial period of flu-like fatigue as the toxins start releasing and flood the bloodstream. Following this period, raise the dosage to 600 mg twice a day until symptoms ease. AVOID SALICYLATE USE DURING GUAIFENESIN TREATMENT. SALICYLATES BLOCK FMS DETOX. Even salicylates in Ben-Gay rub, Listerine, Pepto-Bismol, aloe, & some herbal teas block toxin excretion.
- Niacin 250 mg timed-release, high B complex, timed-release C 500 mg twice a day, multi-mineral supplement, beta-carotene/ antioxidant mix eases the fatigue and "leaky gut problem" that accompanies chronic pain. All vitamins should be yeast-free.
- Phazyme or other simethicone agent may help to reduce bloating.
- For reactive hypoglycemia, each snack and meal must be balanced with protein, carbohydrates and fat in a 30/40/30 ratio as per the book "The Zone", by Barry Sears and Bill Lawren.

For MPS

- Deal with perpetuating factors.
- Gentle stretch, "Spray and stretch", tennis-ball compression, acupressure massage, gentle non-repetitive exercise such as Chi kung, ice if there is nerve entrapment pain/muscle tightness, galvanic muscle stim and/or craniosacral/myofascial release to break up TrPs, heat to ease muscle pain, attention to body mechanics & nutrition (avoid processed foods, excess carbohydrates and yeast-generating foods, drink a lot of water to flush out toxins), will aid recovery.
- Try warm saltwater as nose drops before bed if needed to ease throat and neck TrPs.
- Climb steps at 45 degree angle if needed to avoid loading the quad TrPs.

- Use a triple folded handtowel collar as splint before riding over bumpy roads if SCM TrPs are a problem..
- Use pillows under knees during the night to ease strain on hips in cases of sciatica.
- Eye exercises are beneficial when the muscles around the eye are suspected of holding TrPs.
- Use a wrist rest with computer use, and Hand-eze supports with handwriting difficulties and keyboarding strain..
- Limit sugar intake.
- The use of flexible shoes with good support will aid balancing problems.
- Avoid restrictive clothing.

For reference, see:

"Myofascial Pain and Dysfunction : The Trigger Point Manual : Upper Half of Body Vol 1 by David G. Simons, Janet G. Travell, Lois S. Simons

Myofascial Pain and Dysfunction : The Trigger Point Manual : The Lower Extremities Vol 2 by Janet Travell, David G. Simons, Barbara D. Cummings (Illustrator)

"Fibromyalgia and Chronic Myofascial Pain: A Survival Manual. (Second Edition)" by Devin J. Starlanyl and Mary Ellen Copeland.