

Chronic Fatigue Syndrome and Fibromyalgia - an Understanding

A Description of Fibromyalgia

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Fibromyalgia (FM) is pain (myalgia) in the muscles and fibrous tissues (fibro) of the body. The aching, piercing, throbbing or searing pain of FM is mostly overwhelming, can be felt all over the body or in specific parts, and may constantly move about. It is unrelenting and so very tiring as with any chronic pain.

In addition, many CFS symptoms usually exhibit - all the torture of FM pain with a crowd of other symptoms that each alone may bring significant adversity.

Pain is crushing and fatigue consuming but quality sleep is unattainable. Insomnia and disturbed sleep patterns are particularly prominent in FM. Cognitive difficulties contribute to stress and depression, or just promote the conclusion that the sufferer may have lost their mind. A particularly nasty condition, Irritable Bowel Syndrome, is a common affliction in FM - or other digestive disorders may be inflicted. Some people wonder why FM sufferers sometimes think that life really sucks because most of these devastating symptoms or conditions are not visible.

Like CFS, FM is not a progressive disease but its detrimental effect on an individual's life in many cases would be difficult to overstate. It can reduce life to incredibly painful, bedridden despair.

Although its nature varies from one individual to the next, its oppressive pain is familiar to all FM sufferers. While pain is often located around the area of joints, there is usually no inflammation. It is not arthritis or rheumatism although the pain and discomfort is just as debilitating in many cases, and movement can be excruciating. The invisibility of FM, and the lack of knowledge as against arthritis or rheumatism, just makes it all the more difficult and painful when people cannot grasp that a person with FM is really hurting.

One relevant difference between CFS and FM is that there is a test for FM. The 'Tender Point' or 'Trigger Point' Test identifies 18 sensitive points on which a practitioner or therapist will place a small amount of pressure. It is from the response and the numbers of these that are painful that can determine the presence of FM. This test greatly improves a medical practitioner's ability to determine the existence of this illness, which can improve the chances of defeating FM and for the sufferer to be afforded recognition, appropriate support and acceptance.