

Where to Start With Traumatic Fibromyalgia? Take the Lead

Mark Charrette, DC

Patients diagnosed with [fibromyalgia](#) or myofascial pain syndrome often bounce from one disappointing medical treatment experience to the next. Some eventually come to us filled with doubts and pain, which may make simple evaluations seem impossible. Fortunately, chiropractic has a unique perspective to offer, with information that should reinforce your current treatment protocols. Despite months or years of compensation and adaptation, chiropractic success stories can happen. Restoring harmony and health just takes some time, adjustments, gentle rehabilitation and attention to the postural foundation.

Trauma in the Background

Fibromyalgia "makes you feel tired and causes muscle pain and ... places on the neck, shoulders, back, hips, arms or legs that hurt when touched."¹ Among patients with fibromyalgia symptoms, it is common to uncover unresolved physical or emotional traumas dating back several years before the onset of symptoms. Using whiplash as an example, it is easy to explain the common pattern of neck and upper-back trigger points and associated headaches. However, the other complaints of nonspecific muscle tenderness / weakness and dysfunction are difficult to objectify, and patients are often accused of malingering or told (or begin to believe) that it's all in their heads.

One review, however, found that 45 percent of the people continued to have symptoms two years after legal settlements were reached.² This would tend to justify a genuine concern for and belief in our patients and their complaints. Even more common among fibromyalgia patients are subtle traumas for which they may have never received any treatment.

Because fibromyalgia patients have chronic pain, difficulty sleeping, and a lack of energy and self-esteem, a team approach has been shown to be the most successful way to manage fibromyalgia symptoms. One text on the subject maintains that patients are twice as likely to improve and return to work when treated by a comprehensive team compared to individual treatments alone.³

The "ideal team" would include a panel of experts you can rely on to provide pain management, psychiatry, massage, acupuncture, and personal / job training, as necessary. As team leader, it will be your focus to reverse the downward-spiraling inactivity cycle by providing the necessary structural balance that favors a return to increased activity, balanced hormone levels and better sleep.

Where to Start?

When beginning their chiropractic care, only a few patients make a connection between a traumatic event and their current condition. Symptoms of fibromyalgia creep up in such a way that the two are rarely associated. However, in seven of 10 patients with back pain, postural fatigue and spinal strain are the cause of their discomfort.⁴ We find that the ultimate cause of pain may

originate in any tissue or joint involved in the kinetic structure. The stress can even be traced to altered foot biomechanics that can lead to pelvic and spinal distortions.⁵

Chiropractors are familiar with the need to provide segmental and global postural stability, in an effort to restore musculoskeletal integrity not only in the feet, but also throughout the entire biomechanical chain, including the knees, pelvis, lumbar spine, shoulders and cervical spine. Ideal spinal posture and muscle tonus requires coordination of bone, soft tissue, and proprioception to respond to and control forces of gravitational loading.

Faulty foot mechanics, usually pronation, can affect all supporting joints above the foot. When the body is erect and weight is evenly distributed between the feet, there are minimal demands for [muscle tension](#). While ideal posture would not involve muscle action of any kind, the fact that none of the supporting joints below the pelvis is locked means the slightest pathological shift in weight initiates excess recruitment of postural muscles and inefficiency, and even pain - all the necessary ingredients for fibromyalgia.

Body symmetry is essential for pain-free function. When absent, patients are prone to develop and retain muscular trigger points. Their presence limits activity and creates pain, depression and a secondary cause for spinal-muscular irritations.

It is vitally important that doctors identify their patients' perpetuating factors. Symptoms such as unequal leg length or another kind of musculoskeletal imbalance "may not even be noticed until something else activates a trigger point in that area. Then, the unequal legs become a perpetuating factor of that trigger point."⁶ According to Rothbart and Estabrook, excessive foot pronation is the most common cause of a functional leg-length inequality.⁷

Begin With the Feet

As part of most chiropractic evaluations, the doctor has an opportunity to evaluate for leg-length inequalities and many other postural distortions. For a patient with fibromyalgia this evaluation is essential, because it is unlikely that any other health care provider performed a functional postural analysis. Begin with the feet. Pronation is easy to spot or measure objectively with a navicular drop test. Lower-extremity trigger points and foot conditions are common among fibromyalgia patients.⁶

Because of those lower-extremity trigger points, many patients are most comfortable wearing [sandals](#), so they will initially benefit from sandals containing a pair of individually designed stabilizing orthotics designed from a weight-bearing casting. In general, noticeable improvement should be realized after several months of regular chiropractic adjustments, massages and orthotic support.

The reason a team approach is so critical is that the painful trigger points and depleted energy reserves must be addressed. Until relief is provided, the patient can never return to a normal, active lifestyle that promotes healthy muscles. However, it's important to realize that removing the trigger points permanently is a by-product of balancing the musculoskeletal structure, and that's where stabilizing orthotics play such an important role.

Chiropractic care, with its emphasis on spinal health and global muscular balance, is well-suited to lead a team approach in cases of traumatic fibromyalgia. For example, research indicates that only about half of all whiplash patients can expect to achieve full recovery.⁸ Without appropriate and thorough care many of these patients develop chronic, painful syndromes - including fibromyalgia. A chiropractor's systematic approach to treatment, including structural analysis, rehabilitation and

orthotic support for affected extremity and spinal structures, can achieve better-than-average results for many patients.

References

1. National Library of Medicine: Fibromyalgia. www.nlm.nih.gov/medlineplus/fibromyalgia.html
2. Macnab I. Acceleration Extension Injuries of the Cervical Spine. In: Rothman RH, Simeone FA (eds.). *The Spine, 2nd Edition*. Philadelphia: WB Saunders, 1982. 654.
3. McIlwain HH, Bruce DF. *The Fibromyalgia Handbook*. Ontario: Fitzhenry & Whiteside, 1996:148.
4. Brunarski DJ. Chiropractic biomechanical evaluations; validity in myofascial low back pain. *J Manip Physiol Ther*, 1982;5(4):155-161.
5. Schafer RC. *Clinical Biomechanics: Musculoskeletal Actions and Reactions*. Baltimore: Williams & Wilkins, 1983.
6. Starlanyl D, Copeland ME. *Fibromyalgia & Chronic Myofascial Pain Syndrome*. Oakland, CA: New Harbinger, 1996.
7. Rothbart BA, Estabrook L. Excessive pronation: a major biomechanical determinant in the development of chondromalacia and pelvic lists. *J Manip Physiol Ther*, 1988;11:373-379.
8. Croft AC. "Treatment Paradigm for Cervical Acceleration/Deceleration Injuries (Whiplash)." *ACA J of Chiro*, 1993;30:41-45.

OCTOBER 2012