



## FIBROMYALGIA – AN OVERVIEW WITH HOMOEOPATHIC TREATMENT

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### ABSTRACT:

*Fibromyalgia is a common chronic syndrome defined by core symptoms of widespread pain, fatigue, and sleep disturbance.<sup>1</sup> Neither has it developed tissue damage or deformity nor a life-threatening condition. But it is a progressive disease.<sup>2</sup> Treatment options currently exist to assist patients in relieving symptoms and preventing flare-ups. The management of fibromyalgia requires a multidimensional approach including patient education, cognitive behavioral therapy, exercise, and pharmacologic therapy.<sup>3</sup> Aim is the awareness of Homoeopathic treatment has the scope to improve the condition.*

**Key words:** Fibromyalgia, Homoeopathic treatment.

### INTRODUCTION

Fibromyalgia is one of the most common diseases affecting the muscles manifested with pain, stiffness, and tenderness of the muscles, tendons, and joints. Usually affects the neck, buttocks, shoulders, arms, the upper back, and the chest.<sup>2</sup> Other common symptoms

<sup>1</sup> Hawkins Robert A. Fibromyalgia: A Clinical Update [Internet] 2013 September [cited 2018 October 18]; Vol. 113, 680-689. Available from: <http://jaoa.org/article.aspx?articleid=2094606/> doi:10.7556/jaoa.2013.034

<sup>2</sup> Jahan Firdous, Qasim Rizwan, Nanji Kashmira, Qidwai Waris. Fibromyalgia Syndrome: An Overview of Pathophysiology, Diagnosis and Management [ Internet] . 2012 May [cited 2018 October 18 ]; 27(3): 192-195. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3394355/> doi: 10.5001/omj.2012.44

<sup>3</sup> Hawkins Robert A. Fibromyalgia: A Clinical Update [Internet] 2013 September [cited 2018 October 18]; Vol. 113, 680-689. Available from: <http://jaoa.org/article.aspx?articleid=2094606/> doi:10.7556/jaoa.2013.034

include cognitive difficulty, headache, paresthesia, and morning stiffness. Tender points are often detected in patients with fibromyalgia and were formerly required for diagnosis.<sup>4</sup>

Fibro Myalgia Syndrome (FMS) typically presents in young or middle-aged females often accompanied by multiple other unexplained symptoms, anxiety and/or depression, and functional impairment of daily living activities. In rheumatology clinics, the rate of new diagnosis is approximately 10% to 20%, whereas in non-specialized settings, the rate is 2.1% to 5.7%.<sup>5</sup>

**Aim is the** awareness of Homoeopathic treatment has the scope to improve the condition.

## **PATHOPHYSIOLOGY**

Although the etiology remains unclear, characteristic alterations in the pattern of sleep and changes in neuroendocrine transmitters such as serotonin, substance P, growth hormone and cortisol suggest that regulation of the autonomic and neuro-endocrine system appears to be the basis of the syndrome. The frequent co-morbidity of fibromyalgia with mood disorders suggests a major role for the stress response and for neuroendocrine abnormalities.<sup>6</sup>

## **CAUSATION & PREDISPOSING FACTORS<sup>7</sup>**

### **1. Genetic and Familial Predisposition**

There appears to be a strong familial component to fibromyalgia and other central sensitivity syndrome CSS disorders. First-degree relatives of patients with fibromyalgia are 8.5 times more likely to have the disorder than the general population. In addition, certain genetic markers for serotonin, dopamine, and catecholamine methyltransferase polymorphisms may be associated with heightened pain sensation.

### **2. Sleep Abnormalities**

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<sup>4</sup> Ibid.

<sup>5</sup> Hawkins Robert A. Fibromyalgia: A Clinical Update [Internet] 2013 September [cited 2018 October 18]; Vol. 113, 680-689. Available from: <http://jaoa.org/article.aspx?articleid=2094606/> doi:10.7556/jaoa.2013.034

<sup>6</sup> Jahan Firdous, Qasim Rizwan, Nanji Kashmira, Qidwai Waris. Fibromyalgia Syndrome: An Overview of Pathophysiology, Diagnosis and Management [Internet]. 2012 May [cited 2018 October 18]; 27(3): 192–195. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3394355/> doi: 10.5001/omj.2012.44

<sup>7</sup> Hawkins Robert A. Fibromyalgia: A Clinical Update [Internet] 2013 September [cited 2018 October 18]; Vol. 113, 680-689. Available from: <http://jaoa.org/article.aspx?articleid=2094606/> doi:10.7556/jaoa.2013.034

In sleep laboratories, patients with fibromyalgia typically display “alpha-delta intrusion,” as demonstrated by electroencephalography. The resultant loss of restorative delta wave sleep leads to increased fatigue and pain.

### **3. Autonomic Nervous System**

Dysfunction Emotional and physical stress activates the hypothalamic-pituitary-adrenal (HPA) axis. Patients with fibromyalgia have hyperactivity of the HPA axis and the sympathetic nervous system, with simultaneous relative hypocortisolism. The causal relationship between HPA dysfunction and fibromyalgia is unclear, but early childhood stress could precipitate the HPA abnormality.

### **4. Psychological Factors and Stress**

Depression, anxiety, and difficulty coping with stress are common in patients with fibromyalgia. There is an association between childhood abuse and fibromyalgia— Mc Beth et al<sup>18</sup> suggested that inappropriate learned behavior from living with alcoholic or dysfunctional parents may drive the catastrophizing behavior and learned helplessness that are prevalent in many patients with fibromyalgia. The relationship between these psychological factors and fibromyalgia is bidirectional.

### **5. Central Sensitization**

Abnormalities in the central nervous system are associated with the intense widespread enhancement of pain in fibromyalgia.

## **CLINICAL MANIFESTATIONS**

- Widespread musculoskeletal pain is the dominant feature of fibromyalgia. Proximal regions such as the neck, shoulders, hips, and thighs are most commonly involved, but pain may be felt in the hands and feet. Statements such as “I hurt all over” often alert the physician to consider the diagnosis of fibromyalgia. In severe cases, even a gentle hug may be perceived as painful. Patients may complain of swollen joints (subjective swelling), but synovitis is not present on examination. Nondermatomal paresthesia without objective neurologic findings is a frequent complaint.<sup>8</sup>
- Fatigue is present in the majority of patients. Poor sleep, with frequent night-time awakenings and difficulty falling back to sleep, is often reported. Exhaustion on

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awakening may be severe, and morning stiffness is common. “Fibro-fog” describes the symptoms of poor short-term memory and lack of ability to concentrate. Poor balance, dry eyes and mouth, and Raynaud phenomenon are occasionally noted.<sup>9</sup>

- Patients often have features of the other associated CSS disorders. Although depression is common in patients with fibromyalgia.<sup>10</sup>

## DIAGNOSIS:

The assessment of Fibromyalgia is based on the criteria for the Classification of Fibromyalgia by the American College of Rheumatology, (ACR) 1990. The criterion involves:<sup>11</sup>

- History of widespread pain has been present for at least three months.
- Pain in both sides of the body pain above and below the waist. Pain is considered widespread when all of the following are present:
- Pain in 11 of 18 tender point sites on digital palpation (both side of the body): Occiput (2), Low cervical (2), Trapezius (2), Supraspinatus (2), Second rib (2), Lateral epicondyle (2), Gluteal (2), Greater trochanter (2), Knee (2).

## New Diagnostic Criteria

Recently, ACR is proposing a new set of diagnostic criteria for fibromyalgia that includes common symptoms such as fatigue, sleep disturbances, and cognitive problems, as well as pain (Table 2). The tender point test is being replaced with a widespread pain index and a symptom severity (SS) score. In place of the tender point count, patients (or their physician) may endorse 19 body regions in which pain has been experienced during the past week. One point is given for each area, so the score is between 0-19. This number is referred to as the Widespread Pain Index (WPI) and it is one of the two required scores needed for a doctor to make a diagnosis of fibromyalgia.<sup>12</sup>

## New ACR Diagnostic Criteria:<sup>13</sup>

<sup>9</sup> Ibid.

<sup>10</sup> Hawkins Robert A. Fibromyalgia: A Clinical Update [Internet] 2013 September [cited 2018 October 18]; Vol. 113, 680-689. Available from: <http://jaoa.org/article.aspx?articleid=2094606/> doi:10.7556/jaoa.2013.034.

<sup>11</sup> Jahan Firdous, Qasim Rizwan, Nanji Kashmira, Qidwai Waris. Fibromyalgia Syndrome: An Overview of Pathophysiology, Diagnosis and Management [ Internet] . 2012 May [ cited 2018 October 18 ]; 27(3): 192–195. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3394355/> doi: 10.5001/omj.2012.44

<sup>12</sup> Ibid.

<sup>13</sup> Ibid.

Fatigue	Waking unrefreshed	Cognitive symptoms
0 = No problem	0 = No problem	0 = No problem
1 = Slight or mild problems; Generally mild or intermittent	1 = Slight or mild problems; Generally mild or intermittent	1 = Slight or mild problems; Generally mild or intermittent
2 = Moderate; considerable Problems; often present and/or at a moderate level	2 = Moderate; considerable Problems; often present and/or at a moderate level	2 = Moderate; considerable Problems; often present and/or at a moderate level
3 = severe: pervasive, continuous, Life disturbing problems	3 = severe: pervasive, continuous, Life disturbing problems	3 = severe: pervasive, continuous, Life disturbing problems

The diagnosis is based on both the WPI score and the SS score either:<sup>14</sup>

- WPI of at least 7 and SS scale score of at least 5, **OR**
- WPI of 3-6 and SS scale score of at least 9.

## LABORATORY INVESTIGATIONS

Laboratory testing, such as complete blood count, erythrocyte sedimentation rate, rheumatoid factor, antinuclear antibody, thyroid-stimulating hormone, T3, T4, creatinine phosphokinase, a serum muscle enzyme, vitamin D, ESR, CRP, renal function, and liver function tests are necessary to rule out other disorders. X-rays, blood tests, specialized scans such as nuclear medicine and CT scan muscle biopsy are normal in cases of fibromyalgia.<sup>15</sup>

## MANAGEMENT AND TREATMENT OF FIBROMYALGIA:

Treatment tends to be a combination of:<sup>16</sup>

- **Medication** – such as [antidepressants](#) and painkillers can also help to relieve pain for some people with fibromyalgia. They boost the levels of certain chemicals that carry messages to and from the brain, known as neurotransmitters.
- **Talking therapies** – such as [cognitive behavioural therapy \(CBT\)](#) and [counselling](#)
- **Lifestyle changes** – such as exercise programmes and relaxation techniques

<sup>14</sup> Jahan Firdous, Qasim Rizwan, Nanji Kashmira, Qidwai Waris, Fibromyalgia Syndrome: An Overview of Pathophysiology, Diagnosis and Management [Internet]. 2012 May [cited 2018 October 18]; 27(3): 192–195. Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3394355/> doi: 10.5001/omj.2012.44

<sup>15</sup> Hawkins Robert A. Fibromyalgia: A Clinical Update [Internet] 2013 September [cited 2018 October 18]; Vol. 113, 680-689. Available from: <http://jaoa.org/article.aspx?articleid=2094606/> doi:10.7556/jaoa.2013.034

<sup>16</sup> Overview-Fibromyalgia [Internet] [cited 2018 October 18]: <https://www.nhs.uk/conditions/fibromyalgia/>

## MANAGEMENT FIBROMYALGIA

The treatment of patients with fibromyalgia requires a combination of pharmacologic and nonpharmacologic modalities, including exercise and cognitive behavioral therapy.<sup>17</sup>

➤ **Nonpharmacological Management : Patient Education**

Simply making a diagnosis of fibromyalgia has a positive effect on its management, leading to a reduction in primary care visits, diagnostic testing, and drug prescriptions. Patient education is the next step. Emphasizing that the patient does not have a serious or life-threatening disease reduces anxiety. Discussing what is known about the imbalance of central nervous system neurotransmitters and the abnormalities of brain blood flow helps to assure the patient that fibromyalgia is a real illness.<sup>18</sup>

➤ **Cognitive Behavioural Therapy**

Cognitive behavioural therapy (to address maladaptive thoughts) and stress-reduction techniques have been shown to be effective in some patients.

➤ **Exercise**

Aerobic exercise and muscle strength training can reverse deconditioning and improve sleep, pain, and function in patients with fibromyalgia.<sup>19</sup>

➤ **Complementary and Alternative Medicine**

In general, little scientific evidence exists to support the use of complementary and alternative medicine in the management of fibromyalgia. Acupuncture, balneotherapy, chiropractic treatment, and osteopathic manipulative treatment have been used frequently to manage the symptoms of fibromyalgia.

- [Psychotherapy](#) – a talking therapy that helps you understand and deal with your thoughts and feelings
- relaxation techniques
- psychological support – any kind of [counselling](#) or support group that helps you deal with issues caused by fibromyalgia

## HOMOEOPATHIC TREATMENT:

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<sup>17</sup> Overview-Fibromyalgia [Internet] [ cited 2018 October 18 ] : <https://www.nhs.uk/conditions/fibromyalgia/>

<sup>18</sup> Ibid.

<sup>19</sup> Ibid.

It is under the treatment of Alternative Medicine where the treatment is based on symptom similarity i.e. Similia Similibus Curenture principle.

These are a few local remedies, which could be considered for people with FMS but be aware that they can only be expected to be helpful if the symptoms match those of the patient well.

1. **Arnica:** this medicine is best known for its action on injuries to reduce bruising and swelling. However, it is useful whenever the body feels bruised and sore, especially if markedly worse after exertion. A characteristic feeling described is of “the bed feeling too hard”, in other words, soreness and bruised feeling is worse if the part is lain upon. Arnica can be a good medicine to start treatment of fibromyalgia with, if there is not a clear picture suggesting another medicine at the onset. Hopefully, after a period, a clearer picture will develop.<sup>20</sup>
2. **Bryonia:** for Bryonia to work, the pain must be very much worse for the slightest movement (the opposite of Rhus tox). Heat will aggravate the pain and pressure on the relevant part alleviates, possibly by preventing movement. In my experience, this is a more unusual presentation for fibromyalgia.<sup>21</sup>
3. **Causticum:** again, soreness, weakness and stiffness, worse with exertion and cold, better for warm applications and being warm in bed. The unusual thing that might suggest Causticum is that the symptoms are worse in dry weather and better when it rains!<sup>4</sup>
4. **Cimicifuga:** this medicine is used where the pains, soreness and stiffness are mostly in the neck and upper back muscles. These may have been preceded by an injury and are generally worse for cold or drafts. Symptoms are often accompanied by headaches, especially on the top of the head or radiating up from the neck.<sup>22</sup>
5. **Kalmia latifolia:** this medicine is especially helpful for severe shooting pains in muscles, and there is often an accompanying numbness or cold sensation. Always make sure that there is no suggestion of nerve pressure or damage, if these symptoms are present.<sup>23</sup>
6. **Rhododendron:** the picture is very similar to Rhus tox except that the pains are very much worse for changes in the weather, especially if there is an impending storm or thunderstorm.<sup>24</sup>

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<sup>20</sup> Fibromyalgia (2008) [Internet] [ cited 2018 October 18 ]: <https://www.britishhomeopathic.org/charity/how-we-can-help/articles/conditions/f/fibromyalgia/>

<sup>21</sup> Ibid.

<sup>22</sup> Ibid.

<sup>23</sup> Ibid.

7. **Rhus tox:** this is the rheumatism remedy par excellence and was the remedy studied by Dr Peter Fisher in the 1980s and shown to be effective in a double blind placebo-controlled trial of fibromyalgia. It is effective for pain and stiffness which is worse when having been still and gets better for getting moving, particularly bad after overdoing things or in cold damp weather, eased by warmth and moderate exercise. It is interesting to note how these match up with the conventional recommendations below!<sup>25</sup>
8. **Ruta grav:** the remedy picture is similar to Rhus tox except that the stiffness is, if anything, more marked and less susceptible to improvement with gentle movement. There is often involvement of the tendons or the places where tendons meet bone (heels, elbows etc). There is often a bruised feeling. Pains are worse for cold damp weather but without the definite benefit from warmth which is seen in Rhus tox.<sup>26</sup>

#### SCIENTIFIC EVIDENCE FOR HOMEOPATHIC TREATMENT:

1. The first controlled trial testing the homeopathic treatment of patients with fibromyalgia was an impressive and sophisticated double-blind “crossover” trial that was published in the prestigious British Medical Journal (Fisher et al, 1989). A crossover trial is a sophisticated method to test the efficacy of a treatment because each patient’s results with the “real treatment” are compared with that same patient’s results with a placebo. While most double-blind studies compare one group of people who receive the “real treatment” with another (hopefully similar) group of people who receive a placebo, crossover trials compare the results of each person and his/her response to real treatment with his/her response to placebo.<sup>27</sup>

Because of the nature of a crossover trial, the researchers chose to accept into this study only patients that fitted the symptom-syndrome for needing just one homeopathic medicine that tends to be one of the most commonly indicated remedies for fibromyalgia

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<sup>24</sup> Ibid.

<sup>25</sup> Fibromyalgia (2008) [Internet] [ cited 2018 October 18 ]: <https://www.britishhomeopathic.org/charity/how-we-can-help/articles/conditions/f/fibromyalgia/>

<sup>26</sup> Ibid.

<sup>27</sup> Ullman Dana. Exploring the Research on Homeopathic Treatment for Fibromyalgia[ Internet]: [Updated 2017 Dec 06; cited 2018 October 18]: [https://www.huffingtonpost.com/dana-ullman/fibromyalgia-homeopathy\\_b\\_781144.html](https://www.huffingtonpost.com/dana-ullman/fibromyalgia-homeopathy_b_781144.html)



patients. The researchers found a surprisingly high percentage of patients (42 percent) whose symptoms indicated a need for this medicine, *Rhus toxicodendron* (Rhus tox).<sup>28</sup>

The researchers found that there was a substantially significant degree of improvement in the reduction of tender points and improved pain and sleep when the subjects were taking the homeopathic medicine, as compared to when these same subjects were taking a placebo. In other words, twice as many people experienced significantly less pain or significantly improved sleep when they were taking the homeopathic medicine as compared to when they were taking the placebo.<sup>29</sup>

2. Iris Bell, M.D., Ph.D. and her colleagues at the University of Arizona School of Medicine conducted a study funded by National Institutes of Health which resulted in four articles published in peer-review medical journals (Bell et al, 2004a; Bell et al, 2004b; Bell et al, 2004c; Bell et al, 2004d). The primary clinical results from this study were published in the highly respected journal, *Rheumatology* (published by the British Society for Rheumatology), and it found statistically significant results from homeopathic treatment. This randomized, double-blind, placebo-controlled trial with 62 fibromyalgia patients received an oral daily dose of an individually chosen homeopathic medicine (or a placebo) and were evaluated at baseline, two months and four months (Bell, et al, 2004a).<sup>30</sup>

## CONCLUSION:

Fibromyalgia is 1 of several overlapping disorders of central sensitivity syndrome. The growing knowledge of the underlying biopsychosocial causes of these disorders is leading to a more rational approach to treatment. Recognizing the heterogeneous nature of fibromyalgia, with marked individual variation in prognosis and response to therapy, aids substantially in its management. An understanding of the different pain-relieving mechanisms of drugs aids in the selection of combinations of therapy that may be more effective in the treatment of patients with fibromyalgia.

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<sup>28</sup> Ullman Dana. Exploring the Research on Homeopathic Treatment for Fibromyalgia[ Internet]: [Updated 2017 Dec 06; cited 2018 October 18]: [https://www.huffingtonpost.com/dana-ullman/fibromyalgiahomeopathy\\_b\\_781144.html](https://www.huffingtonpost.com/dana-ullman/fibromyalgiahomeopathy_b_781144.html)

<sup>29</sup> Ibid.

<sup>30</sup> Ibid.

The body of scientific evidence showing efficacy of individualized homeopathic treatment in the care of patients with fibromyalgia suggests significant benefits. If you or someone near and dear to you has fibromyalgia, consider getting professional homeopathic care for both safe and effective treatment. Further, although fibromyalgia is not officially considered a type of arthritis, *a review of homeopathic research found patients with this more common ailment also benefit from homeopathic treatment.*