FIBROMYALGIA MOLDOFSKY QUESTIONNAIRE (FMQ): USE OF A TOOL TO AID DIAGNOSIS

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OBJECTIVES: To establish pertinent levels of FMQ (Fibromyalgia Moldofsky Questionnaire) score to guide a subject’s further treatment, METHODS: The FMQ questionnaire, was administered to a representative community sample of 1500 subjects in UK along with two validated questionnaires (LFESSQ London Fibromyalgia Epidemiology Study Screening Questionnaire and CES-D Center for Epidemiologic Studies Depression Scale) and a questionnaire assessing a decline in the restorative effects of sleep (SQA Sleep Quality Assessment). A descriptive analysis of the score was carried out using socio-demographic data (gender, age, type of town and socio-professional class) and the complaints reported by the subjects interviewed, RESULTS: The FMQ score was higher among women and those over 50 (5.0; 5.3). Women aged over 50 had an even higher FMQ score (5.5), which agreed with existing epidemiological data on fibromyalgia. There was no relationship between the FMQ score and geographic location, income, profession and sick leave prescribed by a doctor (regardless of length). The FMQ score was 3.0 in subjects who did not state any pain and 4.1 in those who did not respond positively on the LFESSQ. It increased to 8.7 among those who screened positive on the LFESSQ. The FMQ score varied between 9.7 and 10.4 in subjects who responded positively on the LFESSQ and who also experienced depressive symptoms, fatigue or a decline in the restorative effects of sleep. The FMQ score was 10.7 for subjects who screened positive on the LFESSQ and who also experienced fatigue and depressive symptoms, and increased to 11.3 when the four symptoms were experienced at once, CONCLUSIONS: A FMQ score of less than 3 excludes a presumptive diagnosis of fibromyalgia syndrome and an FMQ score of above 8 should lead to specialist investigations.