

Fibromyalgia Syndrome

by Hester Ladewig, Naturopath



Rebecca's story

Rebecca was an average 14 year old teenager, active in school, doing lots of sports and enjoying life with her friends. She developed some pain in her feet, which was checked out by a doctor when it did not go away after a few months. Without much of an explanation about the reason for the pain, she went home again living with the pain. In the same way, however, in time came pain in her back, knees, shoulders, hips and sometimes wrists and elbows. The pain started causing fatigue and worsened problems with sleeping, which she had had for a long time anyway. By the time she was around 17, she started having it checked out by doctors again. She went from doctor to doctor and specialist to specialist with most of the appointments ending with a referral to yet another specialist and a prescription of anti-inflammatory and pain medication, which did not relieve the pain and only caused more fatigue. Finally, one last specialist added the label "fibromyalgia syndrome", stating that it will most probably never get better, but that it is not dangerous. She could have antidepressants, sleeping medication, pain killers and antiinflammatories to manage the pain for the rest of her life. She chose not to take them, because they did not take the pain away and did not add to her quality of life.

What is Fibromyalgia Syndrome?

Fibromyalgia syndrome (FMS) has been defined by some specialists as a specific, chronic, non-degenerative, non-progressive, non-inflammatory, truly systemic pain condition.

The diagnosis itself is often based on 18 defined trigger points, of which at least 11 have to be sensitive. Further, systemic flu-like symptoms, pain sensitivity, sleep disturbances and its resulting fatigue are also used as diagnostic guidelines. A significant requirement for the diagnosis are laboratory tests ruling out other conditions with similar symptoms, such as rheumatoid arthritis.

Lab tests of people with fibromyalgia frequently show no findings.

Considering the diagnostic criteria and symptoms of fibromyalgia, it is not surprising that there is a lot of controversy around the diagnosis. Is it a disease or not? Does a patient suffering from these symptoms have fibromyalgia or not? If someone goes to their doctor saying,,I have pain everywhere, sleep badly, and have a bunch of other problems from concentration to digestion disturbances" and their doctor does some tests and comes up with the diagnosis,,fibromyalgia syndrome", what is the significance of the diagnosis and how does it benefit that person? Yes, it does help to know it is not life threatening and not in one's imagination - it is real. But consider what the doctor is saying by this diagnosis: "You are in pain, you have sleep disturbances and a bunch of other symptoms, but no one knows why." In my opinion, the pain syndrome with everything that goes with it is a very real situation surfacing as a result of various imbalances in the body. Whether it is called ,,fibromyalgia" or not is mere formality.

"It is more important to know what

sort of a person has a disease than what sort of a disease a person has." - Hippocrates

Understanding chronic pain

Pain is a sensation, which makes it very difficult to accurately define or evaluate. There are many different theories about the mechanisms behind chronic pain. One theory is related to the pain pathways in the spinal column.

The pathway is supposed to be active when pain has a true cause and is functional in order to protect the affected part of the body until it is healed. For example, if you bump your toe hard, a signal will be sent via the pain pathway resulting in you perceiving a significant amount of pain and being protective of your toe.

In chronic pain, however, very light stimuli may activate the pain pathway and cause strong pain with no apparent reason. These pain pathways need to be deactivated again in order for the pain to dissipate. Thus, in particular for chronic pain patients, the pain is very real and very debilitating. It is not imagined pain.

Another theory attempting to explain chronic pain is that of trigger points. As part of a neuromuscular response to trauma, the muscles around a traumatized area tighten in order to protect that area. Contracting muscle tissue is active and needs more oxygen and nutrition than relaxed muscles. It also produces more toxic metabolic waste. If the area stays in this state of contraction, it becomes an oxygen deprived and toxin



loaded area and can be a significant source of chronic pain. People with FMS usually have a high number of trigger points all over their bodies.

Therefore, everything that influences the development of trigger points and the reactiveness of pain pathways will influence chronic pain.

The following factors can influence chronic pain:

- Musculoskeletal asymmetry
- Immobility and hypermobility
- Toxicity
 - inadequate detoxification
 - high exposure to toxins (including smoking, medication, food additives, etc.)
- Chronic infections
- Impaired blood sugar regulation / metabolic syndrome
- Disturbances in the stress-axis (hypothalamo-pituitary-adrenal axis)
- Circadian rhythms
- Gastrointestinal dysbiosis and inflammations
- Deficiency in antioxidants / high levels of oxidative stress
- Acidity, lack of water, mineral deficiency.
- Eicosanoid imbalance / prostaglandin imbalance (fatty acids)
- Imbalances of the vegetative nervous system (sympathetic / parasympathetic nervous system)
- Neurotransmitter imbalance

This means that treatment of chronic pain is very complex. Many people with chronic pain have the feeling they have tried everything and nothing worked! Because there are so many factors influencing chronic pain, it is important to try balance as many of them as possible at the same time. This mostly takes a lot of creativity and patience by the practitioner. It is vital to see it as a 6-24 month plan, depending on severity of the situation and complicating factors (operations, medication, other existing conditions). Always aim to help a person achieve what is attainable for them, and not to give up, because it might seem that they cannot become 100% pain free.

Let your patients write down exactly how they feel from head to toe at the beginning of the treatment (including pain and all other symptoms bothering them from sinusitis to irritable bowel syndrome). Put that information away and have a look at it 3 months later. Repeat this process every 3-6 months. This helps to recognise even small improvements which otherwise often pass unnoticed because of the constant pain.

Approaches to treatment

1. Strengthening and stretching exercises

It is important to start slowly, to increase gradually and to remember to breath. Relaxation mostly needs to be learned!

Patients who hardly dare to move because of the pain need the help of a physical therapist.

2. Manual Therapy

Various methods can be helpful, such as especially Myoreflex Therapy and Osteopathy. It is, however, important to find an experienced therapist - someone who understands that you do not conquer chronic pain by causing a lot more pain. Of course, there can be some pain involved in many of these therapy sessions, but it should be absolutely bearable and must not cause high levels of pain for the days following the therapy. Therapies need to be gentle with sufficient recovery time in between. Acupuncture can be very valuable in addition to manual therapies.

3. Compensate nutritional deficiencies and micronutrient imbalances Nutritional deficiencies are very common in people with FMS. Deficiencies can be assessed by using the present symptoms as guidelines, or by various other methods such as darkfield microscopy, hair mineral analysis stool sample testing and laboratory blood testing. Most people with FMS have significant deficiencies in antioxidants (test "thiole" in blood) and also omega 3 fatty acids. Both the antioxidants and fatty acids have a major influence on pain and inflammation!

Other common deficiencies include magnesium, zinc, vitamin C, vitamin E, coenzyme Q10, L-carnitine, chromium, B-vitamins, folic acid, vitamin B12, vitamin D, L-glutamine and iron.

4. Relieve toxic strains

Toxic metals harm the organism in many ways. In particular, they can irritate nerves, deplete the body of antioxidants, interfere with the physiological, gastrointestinal flora. Gastrointestinal dysbiosis and mycosis accompany metal toxicity and complicate the body's detoxification attempts. This can be treated



very effectively by a combination of good nutrition and very effective SANUM remedies (e.g. FORTA-KEHL, ALBICANSAN, PEF-RAKEHL, EXMYKEHL, SANUKEHL Cand).

Further, toxic metals can support the hyperreactivity of the pain pathways and block regulation of various pain perception systems in the body. One very significant source of mercury and other metals is amalgam tooth fillings. These need to be removed by experienced holistic dentists applying proper safety precautions, replaced with more tolerable substances and excreted. There are many other possible toxic metals, which we are exposed to daily, and the sources can be anything from second hand smoke to baking powder, and from antiperspirant deodorant to printer toner.

In the case of toxic strains, therapies for optimising detoxification as well as measures to avoid or reduce further exposure as much as possible are required.

Toxic strains: general recommendations

The diet should be rich in nutrients and low in toxins, further colourful and manifold, e.g. many steamed vegetables.

thiol- Avoid additives and processed foods!

- Supply antioxidants, e.g. vitamin C, zinc, selenium, glutathion,
 L-cysteine and many others
- For determination of the level of sulphurous amino acids in the blood, a laboratory thiol test can be carried out

Thiols are organic compounds, which carry a SH group (sulphur group) and have antioxidant properties. They counteract the harmful influence of free radicals and oxidative stress. The serum thiol level allows for conclusions concerning the DNA repair capacity and the risk of malignant tumors, arteriosclerosis and accelerated ageing processes.

- Pay attention to drinking sufficient quantities of fluid, especially water
- Perform intestinal cleansing with SANUM preparations, change the diet and supply probiotics to regenerate the physiological gastrointestinal flora in order to improve the detoxification capacity
- Support the liver and kidneys, e.g. with CITROKEHL, SA-NUVIS, TARAXAN, FORTA-KEHL, NIGERSAN, MUCE-DOKEHL, MUSCARSAN
- If necessary, use extra detoxification support such as colon hydrotherapy, neuraltherapy, liver detoxification weeks, and infusions of vitamin C 7.5-15g (e.g. Vitamin C Injectopass by Pascoe), N-acetyl-cysteine (e.g. Fluimucil), glutathione (e.g. Tationil) or liver and kidney remedies by SANUM as described above.

Therapy scheme for intestinal cleansing

Application forms and treatment intervals may be varied if needed

1. <u>Milieu regulation</u> throughout the entire course of treatment ALKALA N, twice daily 1 measuring spoonful dissolved in warm water SANUVIS, 60 drops in the mornings

CITROKEHL or FORMASAN, 5-10 drops in the evenings

Clarify: disruptive fields, heavy metals, stress, etc. Regulation of mineral balance, diet according to Dr. Werthmann

- **2. Specific regulation** start at the same time as step 1 for 10-14 days FORTAKEHL 5X, 2-8 drops in the mornings NOTAKEHL 5X, PEFRAKEHL 5X **or** ALBICANSAN 5X, 2-8 drops in the evenings depending on the symptoms; start with low dose, then move to step 3
- **3.** General regulation over a longer period (4-6 weeks) Monday to Friday: MUCOKEHL 5X, 2-8 drops in the mornings, NIGERSAN 5X, 2-8 drops in the evenings, start with low dose Saturday/Sunday: medication as in step 2
- **4.** <u>Immunomodulation</u> start at the same time as step 3 (several weeks)

BOVISAN 5X, UTILIN "H" 5X, RECARCIN 6X and/or LATENSIN 6X, 0.5-1 capsule per week, alternating weekly depending on the symptoms

SANUKEHL preparations depending on the symptoms (e.g. Pseu, Klebs, Coli, Strep), 4 drops taken in and 4 drops rubbed in, **alternating daily**



 Avoid being paranoid about toxin exposure and its effects.
 Encourage your patients to learn to trust their body and to succeed in eliminating the harmful substances in process of time.

5. Neurotransmitters

Many of the symptoms of FMS can be explained by neurotransmitter imbalances, which, however, vary from patient to patient. Imbalances of histamine, serotonin, melatonin, dopamine, acetylcholine, noradrenaline, substance P and GABA (ã-aminobutyric acid) can lead to sleep disturbances, anxiety, digestive problems, impaired concentration etc.

Pain development and pain perception are furthermore influenced by the body's own opioids such as endorphines, enkephalins or dynorphins.

Stress relief (harmonisation of the hypothalamo-pituitary-adrenal axis), exercise, a well-balanced diet with a targeted supplementation of missing nutrients as well as blood sugar regulation contribute to balancing the neurotransmitters.

6. Chronic infections

The presence of chronic infections needs to be determined and treated. Here, the SANUM remedies – in particular the SANUKEHL preparations – can offer valuable assistance.

7. Harmonisation of the Parasympathetic / Sympathetic nervous system

Here, breathing plays an important role, especially when in pain! Breathing has an immediate and very strong effect on the autonomic nervous system and can influence pain perception very much.

Regular sleeping patterns are also of importance. If necessary, tension releasing preparations such as valerian root, hops, magnesium + vitamin B6, or melatonin can be taken. Fresh air and some exercise during the day as well as conscious relaxation of the jaw and neck muscles can also do wonders for sleep quality. Support by a manual therapist can be helpful.

8. Find a way to manage pain without pain killers.

This might sound very harsh, but the permanent use of killers affects the long-term pain regulation. Pain killers can be used on especially bad days or when they are necessary in order to sleep through a night for a change, but they should be taken as rarely as possible. They do not take the pain away completely and do not add much to the quality of life for people with FMS.

Finding ways to manage pain short term without pain killers can be quite tricky, though. A very good manual therapist or someone who does acupuncture to go to when the pain gets really bad is a great option. Electro-acupuncture machines for home use can help a lot for immediate pain relief. Appropriate ointments, e.g. Top Sabona Ointment, for local application, homeopathic products or phytotherapeutics can also be used for pain relief and thus, reduce the use of strong medication. Local heat treatments with hot water bottles, cherry stone pillows or warm foot baths are also recommendable.

Duration of treatment

The treatment of FSM is time consuming, and it requires a lot of patience on the part of both the patient and the therapist. In particular when the patient becomes desperate and starts losing courage, because they cannot see any more signs of progress, it should be repeatedly verified whether all the important measures have really been considered and complied with:

Have you really tried everything?

- Have amalgam fillings been removed?
- Has a holistic dentist checked out the teeth?
- Has a heavy metal detoxification (with at least antioxidants and minerals) been done?
- Has the mineral and trace element supply been checked by a hair mineral analysis?
- Has a stool test to check for disordered symbiosis / mycosis been done?
- Are laboratory tests on the antioxidant supply (thiol, coenzyme Q10, selenium, etc.) available?
- Are the levels of vitamin B12, folic acids, homocysteine and methylmalonic acid, and the MCV in the blood being checked?
- Is the fatty acid balance checked regularly with respect to a sufficient supply with omega 3 fatty acids (and, if necessary, also gamma linolenic acid)?
- Have food allergies been tested?
- Are any chronic or recurring infections present, which have not been treated sufficiently (cystitis, sinusitis, gut dysbiosis,

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herpes labialis/genitalis, tonsilitis, skin, gut, vaginal mycosis)?

Have the deviating laboratory findings been normalised by appropriate measures?

These tests can be done one by one over months or even 1-2 years in order not to overstrain the patient.

The following checklist contains questions and food for thought for patients:

So, back to Rebecca

Initially, Rebecca simply gave up; she decided not to take any remedies and to live with the pain. The pain, however, started taking over her life to the point where every thought and prayer was full of it. Being a religious person, Rebecca believed that the creator God would heal her. One day she was reminded to leave it to Him and focus on her life. She said: "Okay God, I know You can heal me. and I know You want to heal me. I

don't have a clue why you are not healing me, but I'll leave it to You." For a few more years, she lived with the pain, but she got her focus back to living life and enjoying it as much as possible. She then learned about all the things mentioned in this text and started making some major changes to her lifestyle. She found a great manual therapist to work with. Very gradually, her physical condition improved, and the pain started getting less and less. After having lived in chronic pain for 8 years, she was free of symptoms within one year thanks to the above described measures!

a day or two, and not as a permanent condition like before. Rebecca takes it as a "alarm signal" reminding her to look after herself more.

If pain occurs today, then only for

Checklist for patients

Do you...

- consume 3 nutrient rich, colourful meals a day (sitting down, chewing properly and enjoying it)?
- avoid possible food allergens such as wheat, dairy, almonds, nuts, soy, maybe even eggs, pineapple, kiwi?
- avoid sugar, baked goods, sugary drinks and fruit juices?
- avoid food additives?
- drink 2-3 litres of still water or unsweetened herbal tea daily?
- consume wild salmon or flaxseed oil or salmon oil capsules regularly?
- do stretching exercises every day or at least every 2nd day?
- exercise 3-4 times a week (with or without assistance)?
- sleep 7-8 hours a night?
- have a bowel movement 1-2 times daily?
- (for premenopausal women): have a regular menstrual cycle manageable without pain killers?
- take long therapy breaks while keeping up the nutrition to focus on life and trust that your body can carry on without always needing medication and therapy?
- think about what you have to be thankful for?
- prioritize and are you patient (with yourself)?
- work on having a positive attitude? Don't say: "Poor me, I cannot eat what I want like everybody else, because then I will be in pain again", rather say "I am going to have a tasty salad with herbs and avocado, because I want to be healthy!". It makes a huge difference which way you see it!
- remind yourself that healthy people have a bad days, too? Don't blame FMS for everything. Don't give up if you have a bad day.

First published in the German language in the SANUM-Post magazine (93/ 2010)

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