



CORE PRINCIPLES OF FIBROMYALGIA MANAGEMENT

AFTER CONFIRMING THE FIBROMYALGIA (FM) DIAGNOSIS:



EXPLAIN THE CONDITION

EDUCATE THE PATIENT ABOUT THE CONDITION

Provide information about FM diagnosis and treatment. Direct patient to credible FM information sources. Discuss treatment expectations and patient's role.



SET TREATMENT GOALS

PRIORITIZE INDIVIDUAL TREATMENT GOALS WITH PATIENTS

Identify 1-2 most important symptoms/functional areas (use assessment tools to aid prioritization and establish baseline status).



APPLY MULTIMODAL TREATMENT APPROACH

CONSIDER PHARMACOTHERAPY, AS APPROPRIATE

TREAT COMORBID CONDITIONS

INCORPORATE NONPHARMACOLOGIC THERAPIES



TRACK PROGRESS

EVALUATE ON FOLLOW-UP VISITS

- Progress of agreed-upon treatment goals
- Physical activity and other nonpharmacologic therapies
- Medication efficacy and side effects; adjust dosing appropriately
- Comorbidities
- Self-management techniques; adjust accordingly

KNOW YOUR PATIENT: Treatment plan reflects patient's priorities and preferences

KNOW YOUR TEAM: Identify specialists and other healthcare professionals to assist with the care

KNOW YOUR COMMUNITY: Identify community resources for patient self-management



COMPONENTS OF A FIBROMYALGIA TREATMENT PLAN

<p>PHARMACOLOGIC THERAPIES FOR FM MANAGEMENT</p>	<p>There are three FDA-approved medications for the management of Fibromyalgia</p>	
<p>NONPHARMACOLOGIC THERAPIES FOR FIBROMYALGIA MANAGEMENT</p>	<ul style="list-style-type: none"> • Physical activity (eg, walking, yard work, household chores, swimming, gym workouts, tai chi) • Cognitive-behavioral therapy (CBT) (Web-based or referral) • Patient education • Combination therapy (physical activity, CBT, education, and/or social support) • Balneotherapy (medicinal bathing) • Acupuncture • Complementary and alternative medicine treatments (eg, homeopathy, mindfulness meditation) 	
<p>SELF-MANAGEMENT TECHNIQUES FOR PATIENTS</p>	<p>Pacing of daily activities</p> <ul style="list-style-type: none"> • Striking a balance between too much and too little activity • Balancing short periods of activity with rest • Telling patients to think of their energy levels in “dollars.” Prioritizing to spend each day’s “energy dollars” wisely <p>Stress management</p> <ul style="list-style-type: none"> • Practicing relaxation/breathing techniques <p>Support</p> <ul style="list-style-type: none"> • Finding or starting a support group <p>Sleep hygiene</p> <ul style="list-style-type: none"> • Making sleep a priority • Ensuring sleep environment is quiet and comfortable • Avoiding stimulants like caffeine before bed • Hiding clock from view at night 	
<p>MEMBERS OF EXTENDED HEALTHCARE TEAM</p>	<p>Primary care physicians</p> <p>Specialists</p> <ul style="list-style-type: none"> • Rheumatologists • Neurologists • Physical medicine and rehabilitation specialists • Sleep specialists • Cognitive-behavioral therapists • Clinical psychologists, psychiatrists • Pain specialists <p>Mid-level professionals</p> <ul style="list-style-type: none"> • Nurse practitioners and physician assistants <ul style="list-style-type: none"> – Can provide patients with valuable emotional support, guidance on physical aspects of management, and can help monitor progress <p>Allied health professionals</p> <ul style="list-style-type: none"> • Physical therapists • Occupational therapists • Social workers • Nutritionists • Pharmacists 	