Fibromyalgia

Fibromyalgia is a complex syndrome with no known cause or cure. Its predominant symptom is severe muscle pain, although other symptoms such as fatigue, chest pain, low-grade fever, swollen lymph nodes, insomnia, frequent abdominal pain, irritable bowel syndrome, and depression, may accompany the muscle pain.

Of the estimated three to six million people afflicted with this disorder in the United States, the majority are women between twenty-five and forty-five years of age.

**Lifestyle changes that may be helpful:** Low-intensity exercise may improve fibromyalgia symptoms. Patients who exercise regularly have been reported to suffer less severe symptoms than those who remain sedentary.

Stress is believed by some researchers to be capable of exacerbating symptoms. Stress-reduction techniques such as meditation have also proven helpful in preliminary research.

Acupuncture has significantly improved symptoms in several trials studying people with fibromyalgia.

**Nutritional supplements that may be helpful:** A preliminary trial suggested that a combination of magnesium and malic acid might lessen muscle pain. The amounts used in this preliminary trial were 300–600 mg of elemental magnesium and 1,200–2,400 mg of malic acid per day, taken for eight weeks. A double blind report by the
same research group using 300 mg magnesium and 1,200 mg malic acid failed to show a reduction in symptoms. Though these researchers claimed that magnesium and malic acid appeared to have some effect at higher levels (up to 600 mg magnesium and 2,400 mg malic acid), the positive effects were reported only in unblinded research. Therefore, the evidence supporting the use of these supplements for people with fibromyalgia remains weak and inconclusive.

Other studies have found fibromyalgia patients to have low vitamin B1 status and reduced activity of some thiamine-dependent enzymes. What, if any, clinical role this marginal deficiency plays in fibromyalgia symptoms remains unknown.

One early preliminary study described the use of vitamin E supplements in the treatment of “fibrositis”—probably the rough equivalent of what is today called fibromyalgia. Several dozen individuals were treated with vitamin E in the range of 100–300 IU per day with positive and sometimes dramatic benefit.

Some, but not all, double blind trials using intravenous S-adenosylmethionine (SAMe) in people with fibromyalgia have led to a reduction in pain and depression. When 800 mg of SAMe was given orally to people with fibromyalgia for six weeks in a double blind trial, pain and morning stiffness decreased significantly, but effects on other symptoms were equivocal.
Individuals with fibromyalgia often have low serotonin levels in their blood. Supplementation with 5-HTP may increase serotonin synthesis in these cases. Both preliminary and double blind studies have reported that 5-HTP relieves some symptoms of fibromyalgia.

Are there any side effects or interactions? Refer to the individual supplement for information about any side effects or interactions.

Herbs that may be helpful: While no herbal supplements have been studied specifically for fibromyalgia, herbs used to relieve symptoms of chronic fatigue syndrome (CFS) might also be useful for fibromyalgia. These include the initial use of 2 grams of licorice root three times per day for six to eight weeks, followed by the ongoing use of an adaptogenic herb, such as Asian ginseng, 1–2 grams per day, or eleuthero (Siberian ginseng), 2–3 grams per day. Licorice needs to be used in its whole form; deglycyrrhizinated licorice (DGL) extracts will not work.

Are there any side effects or interactions? Refer to the individual herb for information about any side effects or interactions.

References:

