

Patient information from BMJ

Last published: Mar 04, 2020

Fibromyalgia: what treatments work?

We all get aches and pains from time to time. But if you have long-term widespread pain across your whole body, you may have a condition called fibromyalgia.

There is no cure for fibromyalgia but there are treatments that might help you cope. With treatment, most people find that their symptoms improve over time. But you may find that they come and go.

Treatments include things you can do for yourself, such as taking gentle exercise and improving your chances of a good night's sleep. Some people also take medicines, which may help with the pain.

Other treatments include a type of talking therapy, which may help you cope with your symptoms better. Some research suggests that combining treatments – for example, doing an exercise programme and having a talking treatment – may work best.

The treatments you are offered will vary, depending on where you live and what your doctor thinks is likely to help. We've described some of the common treatments below. You can use this information to talk to your doctor about your treatment choices.

But the most important thing you can do is to learn all that you can about fibromyalgia. The more you know, the better you will be able to manage your symptoms.

To learn more about the signs and symptoms of fibromyalgia, see our leaflet *Fibromyalgia: what is it?*

Things you can do for yourself

Exercise may be the last thing you feel like doing. But research suggests that gentle aerobic exercise, such as walking or exercising in a warm swimming pool, can help you feel better overall. Exercise may also make you fitter, which may help you feel better.

Although you can exercise safely by yourself, you may feel worse if you overdo it. Some people take part in graded exercise programmes, working with a therapist who has experience in treating people with fibromyalgia. They can help you exercise without wearing yourself out.

Fibromyalgia: what treatments work?

If you want to try exercising alone, start with five minutes of gentle walking every day. Build up by one minute a day, until you are able to walk for at least 30 minutes daily. If you want to exercise in a swimming pool, you could follow this same programme with gentle swimming.

Better sleep quality could help you feel better. Better sleep may help you feel less tired, and that can reduce your pain. Exercise is one thing that can improve your sleep.

There are several other ways to improve your sleep quality:

- Go to bed at the same time every day, so that your body gets into the habit of regular sleep
- Avoid napping during the daytime
- Make sure your bedroom is cool, comfortable, dark, and quiet
- Get out of bed if you can't fall asleep or you're not tired
- Only go to bed to sleep or have sex, not to watch television or to use a tablet or smart phone
- Don't eat, drink, or exercise just before you go to bed
- Avoid drinking caffeine late in the day
- Don't drink too much alcohol. It may help you get to sleep, but you'll probably wake up again and your sleep quality won't be as good.

Talking treatments

A treatment called **cognitive behaviour therapy** (CBT) aims to help you feel more positive about life, and to give you new ways of coping with your condition. If you have CBT you meet a therapist regularly to talk about your outlook on life and help you change negative ways of thinking.

Talking treatments are usually medium- to long-term treatments. And if they work for you, you can try them again, even after a break.

Many people wonder whether a talking treatment can really make a difference to physical symptoms like pain. But some research has found that CBT may help people with fibromyalgia to:

- feel less tired
- feel more positive about life
- get on with life (for example, have a social life, enjoy hobbies, or get back to work).

We don't know exactly how it works. But in studies some people with fibromyalgia who had CBT said they slept better. Better sleep may help you feel less tired, and that can reduce your pain.

Medicines

There are several medicines used to reduce fibromyalgia pain and help people sleep. You may need to try several treatments before you find one that helps you.

Fibromyalgia: what treatments work?

Antidepressant medicines are usually used to treat conditions such as depression and anxiety. But they are often used as pain relief. They may help you sleep better and reduce your pain.

Like all medicines, antidepressants can cause side effects, including dizziness and drowsiness. Ask your doctor about side effects when you're deciding on treatment.

Commonly used painkillers such as paracetamol, aspirin, and ibuprofen are not helpful for most people with fibromyalgia.

A painkiller called tramadol does help reduce pain for some people with fibromyalgia. It's a type of medicine called an opioid. But tramadol can cause side effects, including dizziness, sleepiness, stomach problems, and headache. Tramadol can become addictive for some people.

Anticonvulsant medicines, which are more often used for epilepsy, help some people with fibromyalgia. These medicines often have side effects, including dizziness, sleepiness, and weight gain.

Alternative treatments

Biofeedback is a technique to help you feel in control of your body. It uses electrical monitoring equipment to demonstrate how fast your heart is beating (heart rate variability biofeedback) or how tense your muscles are (electromyograph biofeedback).

The monitoring equipment makes beeps, or flashes lights, to show how much electrical activity it's picking up.

You learn to control your heart rate or relax your muscles through breathing and relaxation exercises. When you do this, the beeps or lights get slower or quieter, so you can see what effect you are having on your heart or muscles.

Treatments that combine exercise and relaxation, such as **yoga** and **T'ai Chi**, can also help with fibromyalgia symptoms.

The patient information from *BMJ Best Practice* from which this leaflet is derived is regularly updated. The most recent version of Best Practice can be found at bestpractice.bmj.com. This information is intended for use by health professionals. It is not a substitute for medical advice. It is strongly recommended that you independently verify any interpretation of this material and, if you have a medical problem, see your doctor.

Please see BMJ's full terms of use at: bmj.com/company/legal-information. BMJ does not make any representations, conditions, warranties or guarantees, whether express or implied, that this material is accurate, complete, up-to-date or fit for any particular purposes.

© BMJ Publishing Group Ltd 2020. All rights reserved.

