

**MANAGEMENT GUIDELINES FOR GP'S
FIBROMYALGIA**

Clinical Features:

- History of non-specific myalgias and joint pains without evidence of effusion or swelling
- No evidence of prolonged early morning stiffness
- History of trauma, anxiety, depression
- Sleep disturbance
- Pronounced fatigue and lethargy

Examination findings:

- Tenderness to pressure in non-articular sites, tender points
- Abnormal pain behaviours
- Absence of joint swelling, effusions

Initial GP Diagnostics:

- *Basic bloods* → FBC, EUC, LFT, CRP, CK

Exclusion of Medical Causes:

- Hypothyroidism
- Depression
- Statin induced myopathy

GP management of Fibromyalgia

- Explore psychosocial issues (anxiety, depression, trauma, PTSD)
 - Consider referral to a clinical psychologist for CBT
- Graded exercise program
 - Consider referral to a physiotherapist, exercise physiologist
 - Consider water-based exercises such as hydrotherapy
- Referral to a Chronic Pain Specialist or alternatively, the Chronic Pain Team at Liverpool Hospital
- Avoid narcotic analgesia

Management of Fibromyalgia requires a multi-disciplinary approach to pain management which includes exercise and psychological support. This is best done in a community setting or with a dedicated pain specialist.

Referrals for fibromyalgia are no longer accepted as per our new referral guidelines for Liverpool Hospital Rheumatology.