

CREATIVE PAIN MANAGEMENT

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The Fibromyalgia Guide Book

Dan Gibson

Help for those suffering from FMS and MPS and related conditions.

(Fibromyalgia Pain Syndrome and Myofascial Pain Syndrome)

This book describes how to develop your own pain management system using accupressure, massage, exercise and diet. Information is also included about various other techniques that are available.

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The author and publisher are, however confident that this book contains new and useful information as well as an overview of much of the information that is available today. We trust that you will find this book useful.

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CONTENTS

Acknowledgments	7
INTRODUCTION	9
Chapter One	
Fibromyalgia Syndrome and Myofascial Pain Syndrome	11
Chapter Two	
Other Applicable Conditions	22
Chapter Three	
Factors that may set you off	24
Chapter Four	
Creating Your Own Pain Management System	32
Chapter Five	
Step One: Cleansing the Body	36
Chapter Six	
Step Two: Physically Breaking Up Your Trigger Points	47
Chapter Seven	
Step Three: Developing a Maintenance Program	55
Chapter Eight	
Stretching Exercises, Massage and Relaxation	68
Chapter Nine	
Living on the Edge of Pain	88
Appendix A	
Non-Traditional Approaches	104
Appendix B	
The Medicine Game	111

Appendix C	
Bibliography and Suggested Reading.....	133
Appendix D	
Internet WEB sites about	
Topics Mentioned in this Book	185
Appendix E	
Authors Personal Story	190

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I would like to thank all those who have shared with me about their struggle with pain. Many, if not most have struggled alone, often misunderstood by family, friends, and the medical profession at large. They are the real heroes of our societies, and this book is by them and for them. I would also like to thank the doctors and physical therapists I have met over the years who were honestly concerned about FMS and MPS and who invested significant time in talking with me and sharing their resources.

Dan Gibson

INTRODUCTION

The world is full of pain, both physical and emotional. Many books have been written and many hours of work daily go into helping people deal with pain. Nevertheless, those with Fibromyalgia Pain Syndrome (FMS) and Myofascial Pain Syndrome (MPS) live with a special kind of pain. It is an invisible comrade that seldom leaves, but is never seen by friends and family. Doctors sometimes doubt it exists and the pain medications they prescribe never seem to work for long.

The pain that stalks FMS and MPS patients flares and wanes in puzzling cycles. The patient can be happy and relaxed one minute, and a few minutes later rigid and sore, and fifteen minutes later retching with pain.

The book you hold in your hands has been written specifically for those suffering from Fibromyalgia Pain Syndrome (FMS) and Myofascial Pain Syndrome (MPS). The author and many of those he has consulted with over the years also suffer from these syndromes.

There are two things, however that makes this book different. First, the medical profession did not produce this book. Although Mr. Gibson has worked along side of doctors for many years, he is not a trained medical practitioner, but rather a researcher and a writer. This book is not intended to win any awards in academic circles, nor is it intended to earn the author a lot of money. Rather this is a message from one pain sufferer to another, telling them where relief can be found.

Secondly, this is a book of hope. In his research, Mr. Gibson has discovered many simple and effective ways of dealing with the pain that accompanies FMS and MPS. The techniques presented

in this book are free. They require no expensive equipment, no visits to expensive therapy clinics, and best of all, no fees to be paid on a daily, or weekly basis to a therapist or advisor.

Mr. Gibson begins by sharing about his life long struggle with FMS and MPS pain and how he searched for solutions in many countries and cultures around the world. Then he moves on to explain in layman's language exactly what FMS and MPS are and introduces other conditions that are similar, and explores various factors that may make FMS and MPS worse.

In the second half of the book, Mr. Gibson explains for us how to develop your own pain management program. He deals with things like changing your lifestyle, body cleansing, massage, accupressure, diet and exercise and ends with a chapter explaining the ins and outs, and ups and downs of living with pain.

In the back of the book is a wealth of information that the reader can use. There is an extensive list of resources, including magazines, medical journals, articles, and a large number of relevant Internet WEB sites. Mr. Gibson also adds a list of accepted and questionable non-traditional methods for dealing with FMS and MPS. Along with this is a list of many of the current medications that doctors are prescribing and why.

We are convinced that this book is a significant step forward in the resources that are available to FMS and MPS patients.

CAN Books

CHAPTER ONE

Fibromyalgia Syndrome and Myofascial Pain Syndrome

Fibromyalgia Syndrome

Getting a Diagnosis

Fibromyalgia Syndrome (FMS) is pronounced “fie-bro-my-aljia sind-rome.” It means the symptoms that occur from pain in the muscles and connective tissue fibers. Dr. William Balfour first described it in 1816 at the University of Edinburgh. However, for many years it has been called many things, and lumped together with many other medical difficulties. In the past, it has been called things like myalgia, chronic rheumatism, fibrositis, and pressure point syndrome. However, most doctors have long considered it a psychological illness, which means that the doctor thinks that all the pain is simply in your head. (There may be a small amount of truth in this, as any added stress in the life of an FMS patient usually brings on more pain.)

The reasons for this were simple. FMS sufferers don't suffer from many of the symptoms that are usually identified with illness. For example, there is no fever, no swelling, and no sharp pain in a certain location. So many doctors, even today, have never really been trained to diagnose FMS and are unaware of how the disease operates or how it is best treated. Some doctors even go as far as refusing to admit that FMS exists.

So how does one go about getting a diagnosis? You can start by diagnosing yourself. If you are going to actively seek to find relief for your pain, you should take an active part in finding out what is wrong with you. Moreover, you need to be sure what your diagnosis is.

It is also important that you get a medical doctor to diagnose you as well. This will help you in several ways. First, you can be sure about the condition you have. Secondly, doctors can treat other ailments that can be exasperating your FMS. Thirdly, doctors can be a source of valuable information. Fourthly, doctors can provide you with prescription pain medication if you feel you need it. Lastly, doctors can be a key in getting other medical care for you, such as a physical therapist. So, please, please, don't read this book, self diagnose yourself and self treat yourself without the help of a physician.

However, you need to be prepared that some doctors, even your trusted family doctor, may dismiss your concerns as trivial. If you insist, he may order all kinds of expensive tests for you. If you are lucky, he will test you, or find someone who can test you for FMS. Whatever you do, don't let anyone operate on you until you find a doctor that can accurately diagnose FMS. His advice could save you a lot of trouble!

So how do you diagnose FMS? First, since you know yourself, you are in the best position to do an initial self-diagnosis. If you suspect that you have FMS, then find a doctor who can accurately test you and tell you if you actually do or do not have the syndrome.

First, here is a short description of what to look for:
the presence of unexplained widespread pain or aching
persistent fatigue
generalized morning stiffness
non-refreshing sleep
multiple tender points in your body

Pain

With fibromyalgia syndrome, you often get two kinds of pain simultaneously, plus a host of other unpleasant symptoms. The pain is usually searing, gnawing, stabbing or migrating pain in certain specific parts of your body; and you will also have generalized tenderness, stiffness, soreness or “gelling” in most muscles; and a number of other seemingly unrelated symptoms. The sharp pain can be focused in the head, neck, shoulders, spine and lower back and is accompanied by secondary discomfort: dull, nagging pain throughout other parts of your body.

Fatigue

This chronic combination of both sharp and dull pain can, and usually does, result in fatigue to the point of a profound weariness or exhaustion. Fibromyalgia is a chronic, possibly debilitating, condition which can wax and wane, but will likely become a permanent part of your life. However, you will look well . . . quite normal in fact. The struggle of living with pain and fatigue while everyone else around you considers you physically well and able can lead to more fatigue and ultimately low level depression. The best solution is to realize that you may need more rest and sleep than other people around you. You need to establish regular and lengthy sleeping patterns that optimize the kind of rest you need.

Morning stiffness

Some FMS sufferers don't get enough sleep. However, most complain that they sleep and sleep and still don't feel rested. As time progresses they not only feel tired in the morning, but upon waking they are stiff and sore. From personal experience, I have found that I often feel very sore in the morning, and find myself struggling to decide what to do. I feel exhausted and want to drop back to sleep, but I know that the pain in my body will subside consid-

erably if I get up and start moving. Often fatigue wins, and I drop back to a non-restful sleep, waking a half-hour to hour later, still sore and stiff and still not rested. The cycle continues until I manage to get myself out of bed. The best solution I have found to this problem is the tennis ball pressure point system that I describe in Chapter Seven.

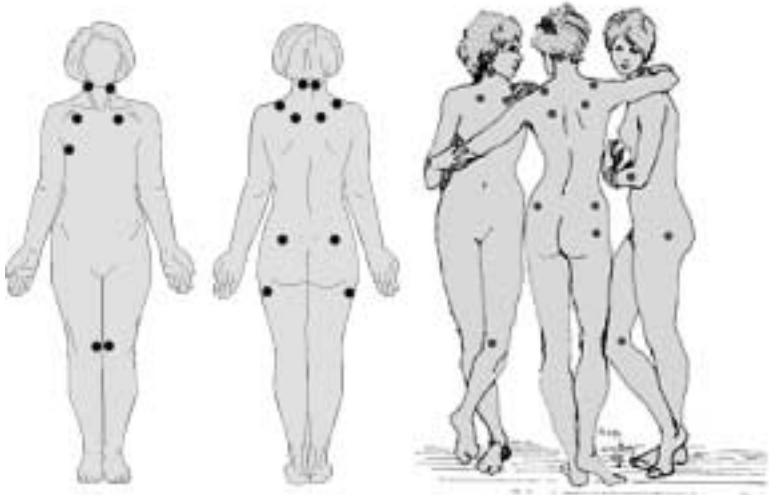
Non-Refreshing Sleep

One of the struggles with sleep is that FMS sufferers seldom get the right kind of sleep. There are various levels of sleep and a person needs to rest well in order to drop into a deeper and deeper level of sleep. Many people with medical or psychological problems never reach this deep level of sleep. FMS sufferers often sleep with their muscles tense and low level aching acting all night. Consequently, restful sleep eludes them. Some people resort to using sleeping medication. In my own case, if I use sleeping medication it usually means that I awake feeling totally exhausted, completely tired and barely able to function. Therefore, I developed a program to help me relax before I go to sleep.

Multiple Tender Points

In order for a doctor to diagnose you with FMS you need to have at least 11 of the 18 specific tender points as identified by the Copenhagen Official Fibromyalgia Syndrome Definition. This Definition further requires that the tender points must be present in all four quadrants of your body. Furthermore, you must have suffered from this widespread pain for more than three months.

In order to self diagnose yourself you need to press these tender points quite hard (hard enough to whiten the thumbnail). If you have trouble ask someone else to help you identifying these spots. The chart below shows the eighteen tender points.



18 tender points

Locations:

1. Along the spine in the neck, where the head and the neck meets
2. On the upper line of the shoulder, a little less than halfway from the shoulder to the neck
3. Three finger widths, on a diagonal, inward from the last points
4. On the back fairly close to the dimples above the buttocks, a little less than halfway in towards the spine
5. Below the buttocks, very close to the outside edge of the thigh, about three finger widths
6. On the neck, just above inner edge of the collarbone
7. On the neck, a little further out from the last points, about four finger widths down

8. On the inner (palm) side of the lower arm, about three finger widths below the elbow crease
9. On the inner side of the knee, in the fat pad

Sometimes the presence of arthritis or a muscle injury can change the exact location of these spots.

In self-diagnosing myself, I have found that pressure on these spots would cause my body to ache for a considerable length of time. Pressure on a tender point in my elbow or on my knee would cause a great deal of discomfort to that limb for ten or fifteen minutes. This may or may not be true of everyone, but the tender points are vital in diagnosing and treating FMS.

If you find that you do suffer from at least 11 of these tender points, and that you also suffer from the presence of unexplained wide spread pain or aching; persistent fatigue; generalized morning stiffness and non-refreshing sleep then you can be reasonable sure that you have FMS. In this case, you need to seek out professional medical help that can help you address your problem. Along with this, you also need to start a self-education program, learning all you can about FMS as well as keeping current with the latest medical developments. Don't trust your doctor to keep you informed. He or she will have hundreds of patients with hundreds of various ailments. Along with this, many doctors do not consider FMS a life threatening or even a serious ailment, and so they may not spend much time or energy finding and relaying information to you. Try to understand this, and take it upon yourself to be informed.

The materials in this book, especially the last chapter contains a wealth of information sources, including books, magazines, journals and Internet sites that can help you keep abreast of the latest developments.

People with Fibromyalgia Pain Syndrome may also experience a number of other symptoms. I have listed some of these below. You may find it interesting to find some of your other ailments among them.

- Thermal fluctuations—too hot or cold, especially at night

- Ingrown toe nails, blotchy skin
- Stiffness or soreness—can't sit still because it hurts
- Coordination and muscle functions (like holding tight to things) is reduced
- Slow increase of symptoms
- Increased sensitivity to smells, sounds, lights and vibrations
- Along with this FMS appears to be inherited. Approximately half of the children of an FMS parent will have FMS.

Understanding the Muscles

If you are interested in a simple account of what happens in your body, and why your muscles are sore, then this section is for you. Understanding the basic mechanics of the muscles will help you understand what you can and cannot do for your situation.

Understanding the Terms

Myofascia is a thin almost transparent film that wraps around muscle tissue. It holds all the muscles together and gives them shape and support. The myofascia also connects the nerves and blood vessels to the muscles. If you have ever handled raw chicken meat, you will have seen the almost clear slimy film around the muscles. This is the myofascia.

Neurotransmitters are the agents that your brain sends to the muscles to make them move. For example: some agents make the muscles expand, some agents make the muscles contract.

Some examples of neurotransmitters are:

- *Growth Hormones.* Growth Hormone is also a healing hormone, which is necessary for body repair. It is released only during deep sleep (delta-level sleep)
- *Serotonin.* Serotonin does many things, but more important to our study regulates and affects sleep, mood and sensory perception. Serotonin is regulated in deep sleep (delta-level) and is usually very low in people with FMS.

- *Histamine*. Histamine is also an important neurotransmitter, which also affects sleep, allergies etc.

Ground Substance

In the myofascia there is a substance known to medical researchers as ground substance. This substance can be either solid, semi-solid or a fluid.

Muscles

Muscles are bundles of fiber, with each fiber and each bundle wrapped in myofascia. The muscles are attached to the bones by something called a tendon.

Trigger points

Trigger points are muscle groups that are affected by malfunctioning or overloaded myofascia. They are commonly called muscle knots, and I will use both terms to describe the same phenomena.

Moving your muscles

When your brain wants a muscle to move it sends neurotransmitters of the right kind to your muscle to make them move. Your muscle then responds accordingly. Some of your muscles contract and the opposing muscles expand. If there is an imbalance in the amount that each muscle can move in relation to the other, then one muscle will have to work harder, making it feel fatigued.

In the case of a person with FMS, the myofascia becomes strained. The ground substance in the myofascia then starts to gel and can eventually become more or less solid. This creates a solid lump of muscle, which is often known as a muscle knot. However, there is more to it than this.

As the muscles work, they take energy, which is supplied by

the blood stream. As the energy is used up, waste materials are returned to the blood stream to be carried away. In the case of difficult strenuous exercise, large amounts of wastes and toxicants need to be moved quickly into the blood stream. If the person has restricted blood vessels, then higher blood pressure is needed to remove the toxicants and wastes. If the blood vessels do not work properly, part of your body may feel cold and dead. If this goes on long enough the excess wastes can start to kill cells, and eventually scar tissue builds up.

All this waste must pass through the myofascia. If the myofascia becomes clogged, wastes cannot be moved as quickly, and the neurotransmitters cannot pass through to the muscles as efficiently. As wastes accumulate the muscles receive insufficient fuel and oxygen. In effect there is a kind of traffic jam in the myofascia where the neurotransmitters, fuel and oxygen are trying to get in, and the waste materials and toxicants are trying to get out. As the myofascia becomes hardened and compressed, blood vessels and nerves are also squeezed. Pressure on the nerves then produces aching pains. This pain causes the muscles to constrict more, causing more pain etc.

The results can be multiple:

- muscle tightness
- muscle ache
- muscle pain
- numbness in some areas
- hypersensitivity in some areas
- foggy thoughts
- low level stress
- tingling

As your body goes through this tightening process, there are a number of points that are most affected. These are known as trigger points. Trigger points are different from tender points. It is important that you understand the philosophy of trigger points and the trigger points that you personally have.

For this reason, I suggest that you find a doctor who is trained in diagnosing and treating FMS.

It is also important to realize that almost everyone at some time in his or her life experiences muscle pain, muscle knots, and painful trigger points. Stress, strain, injury, emotional or mental trauma, or various illnesses, or even old age can bring on this pain. Other things like having unequal leg lengths can also cause this problem. People suffering from FMS however, are suffering from wide spread muscle tension and multiple trigger point pain.

There are also several types of trigger point pain. Muscles that are actively used often develop trigger points or muscle knots. However, the corresponding muscles that might be overloaded because it is compensating for another damaged muscle can also develop pain. Along with this, if the muscle knots are not dealt with and you continue to push yourself despite the pain, then more and more trigger points will develop.

Pain from trigger points are usually steady, dull, deep and aching pain. The intensity can range from mild discomfort to incapacitating torture. If a nerve is trapped, then the pain can be burning, sharp and lightning like. Pain from trigger points usually hurts only where the muscle knot is, or it can also cause other referred pain in another part of the body at the same time.

Fiberfog (or fibrofog) is a term that has been used to describe a type of mind set or confusion that many people with FMS experience. This is sometimes confused with the same feeling of operating in a fog that sufferers of depression feel.

If you have been diagnosed as having FMS, or if you believe you do have FMS or MPS then the materials in this book are for you.

Myofascial Pain Syndrome

There is another related syndrome called MPS (Myofascial Pain Syndrome,) which is a neuromuscular condition. MPS happens when the initial trigger points caused by FMS set off other trigger points in the body. The result is the same, in that these secondary

trigger points are very similar to the original ones, but their cause can be related directly to the initial trigger point. People who have had FMS for an extended period, and who have not dealt with the initial problem often find themselves getting progressively worse. Muscle knots seem to begin developing all over their body. The secret in dealing with MPS trigger points is to discover the initial FMS trigger points and deal with them. Then the other referred or secondary points will start to disappear and you are on the road to managing your FMS.

In trying to understand the difference between FMS pain and MPS pain, think of it in this way. With FMS, there is often a generalized ache or pain through sections of the body, or over the whole body. With MPS, there are often specific pains in specific areas. In FMS, the neurotransmitters from the brain are disrupted in some way, thus affecting the myofascia and the ground substance. In MPS, the trigger points occur because of a mechanical failure. With MPS, such things as repetitive motion, trauma and illness can start trigger points developing all over the body.

CHAPTER TWO

Other Applicable Conditions

Muscle knots are not unique to FMS patients. There are also a host of other medical conditions that produce muscle knots. Many of these conditions have some overlapping symptoms with FMS. As you look through the list below you will realize why it is important to get a correct medical diagnosis of your problem. Each of the conditions below can be easily mistaken for FMS.

Carpal-Tunnel Syndrome—affects hands, arms and shoulders—often a work-related injury. Trigger points usually develop in the hands, arms or shoulders.

Cerebral Palsy—paralysis from birth, but the stress of an imbalanced body can create muscle knots.

Chronic Fatigue Syndrome—is an extreme exhaustion lasting at least six months, as well as bio-chemical abnormalities.

Depression—there are many different types of depression, and people with FMS or MPS often suffer from mild depression symptoms due to their long struggle with pain.

HIV—over 10% of HIV positive people have FMS or FMS related symptoms.

Hypoglycemia—is a deficiency of sugar in the blood. Some FMS sufferers have reactive hypoglycemia where there is an insufficient amount of usable sugar in the blood.

Hypometabolism is a thyroid deficiency that makes people more susceptible to developing muscle knots or trigger points.

Hypermobility Syndrome—is when joints relax and stretch muscles beyond their normal range, often causing trigger points.

Lumpus is an auto-immune syndrome occurring in connective tissue and may have some of the same symptoms as FMS/MPS.

Mitral Valve Prolapse—this can be caused by the myofascia in the heart being affected in FMS sufferers. Not all people with Mitral valve prolapse have FMS and not all people with FMS have mitral valve prolapse

Multiple Sclerosis is caused by the breakdown of certain central nervous system tissues at multiple random sites. The sheath around the nerves is damaged, affecting the transmission of neurotransmitters to the muscles. There are tests for MS that can quickly determine if this is your problem.

Osteoarthritis is due to a change in the joints. As cartilage begins to deteriorate and wears away, the joints become stiff and sore. Sometimes trigger points develop.

Parkinson's Disease is a nerve disease where the neurotransmitter dopamine is depleted. Some people with FMS also have depleted dopamine and thus some symptoms can overlap.

Rheumatoid Arthritis is a biochemical inflammation that results in crippling deformities of the bone. People with Rheumatoid Arthritis usually develop trigger points.

Yeast infections and other chronic infections perpetuate trigger points in the body. Dead and dying yeast in the body needs to be removed like all toxicants and wastes; and buildups of yeast can create trigger points as well.

In Conclusion

It is paramount that you get a qualified medical diagnosis of your problem, remembering that you may be suffering from several conditions at once. Once you know what you are dealing with, then you can begin to develop a course of action to find relief.

CHAPTER THREE

Factors that may set you off

So far we have looked at some of the mechanical reasons why muscle knots develop. But what causes these knots? This is one of the questions that scientists are working on. Some feel it is hereditary and other feel that it comes from an overload of stress, and other feel that it occurs in people with weak myofascia who come under a lot of stress.

However it starts, those suffering from FMS and MPS can testify to some of the conditions that may cause their bodies to react. Few people have all of these conditions, but they are things to watch for.

Poor Physical Shape

Whenever we get out of shape, our bodies cease to function at their best efficiency. If you do not exercise regularly, your body will slowly plug with toxicants. As you feel sluggish you will find exercises harder to do. As a result you will slowly get more and more out of shape. In the end, your body may display symptoms of FMS. Some doctors feel that you may even develop FMS at this point.

Stress

We live busy and stressful lives. Too little stress can cause us to become lazy and depressed. Too much stress can create a host of symptoms as well. When we are under stress our muscles usually

contract. This contraction can lead to grinding of teeth, sore jaws and backs, and tenderpoints and muscle knots all over the body. A combination of stress and poor physical condition may lead some people to develop FMS later in life.

Smoking

Smoking adds many different toxicants to your blood stream. Carbon monoxide binds to hemoglobin and blocks the oxygen's availability to the muscles. Added to this nicotine causes the blood vessels to constrict. Your goal in developing a pain management program is to get the myofascia working again, and smoking can contradict and retard every other effort that you carry out. In my own case, I worked for several years in an office where two of the other workers smoked. I never realized the effect this second hand smoke, however minimal, was having on me until I quit work. After quitting, I felt an immediate improvement in my health.

Air Pollution

Like smoking, air pollution adds toxicants to your body. With a body that is already struggling to rid itself of toxicants, air pollution can restrict your healing process.

Can't say "No" Problem

Perhaps someone is moving house, or there is hard work to be done. It is hard to say no. After all, you look healthy. However, over-exertion of your muscles can cause damage. Learn to say "no" to the types of work that causes you great pain.

Lack of restive sleep

FMS and MPS sufferers need deep sleep in order to heal better.

You must work on a program to allow yourself plenty of uninterrupted sleep.

Obesity

Being overweight puts stress on your already stressed body. Along with this, your body may crave sugar, chocolate and other stimulants so you can do the things you used to do.

Depression/Anxiety

Being anxious about your condition or depressed about the long-term struggle you will have can add to your anxiety. Joining a support group helps. Learning to take control of your own pain management program also helps. In the case of more severe depression, you may need counseling and perhaps medication.

Repetitive Motion

Doing simple things that require repetitive motion can cause trigger point pain. Folding clothes, ironing, playing games, sitting at a desk, washing a lot of dishes, . . . almost anything can create pain. If you have FMS or MPS your muscles are already damaged and working under a heavy load trying to clear the buildup of toxicants. By doing repetitive motion, your muscles build up an excess of toxicants in the particular muscles used, and muscle knots build. If you must sit at a desk, or do other repetitive work, then interrupt your work every few minutes with stretching exercises.

Poor Posture

It is easy to develop poor posture if it hurts to sit or stand for more than a few minutes in any one position. Poor posture then adds stress to your condition, which causes more pain, which causes more poor posture. Carefully consider your posture both when

you are awake and when you are asleep. Also, consider your posture when at work, lifting loads, sitting at a desk, typing at a keyboard etc. Remember that holding your body in a particular way is a repetitive motion that causes muscles to work.

People with FMS and MPS need to develop a posture that puts the least amount of stress on the muscles, for the particular work you need to do. Obviously there is no best method, but you need to consider your own posture, and work at developing posture that puts the least amount of strain on your body.

As an example, my children who have FMS/MPS complain that they develop muscle knots for seemingly no known reason. However, when observing them I would notice that when lying in bed reading a book, they would cross their legs at their ankles. This puts stress, however minimal, on their hips. If they read a book in this position for a long period of time, the stress on the muscles created muscle knots. The answer to this type of situation is to not hold your body in one position for a long period of time.

Sitting

One of the greatest problems I have had has been sitting. Just the thought of sitting through a long staff meeting, a long class, or even a long church service can bring on tension. We once attended a very old church that had hard creaky benches. Every service was torture on my hips and lower back. Every service meant I was squirming around, trying to find a pain free way to sit. I would sit first on one hip, then the other, then place a hymnbook behind my lower back etc. The problem with this is that every time I would shift my weight, the bench would squeak horribly! However, getting up and doing some stretching exercises would have been even more disruptive! In time however, I noticed that several people in the church chose to stand at the back of the service rather than sit on those pews!

If you can't get up and exercise occasionally, consider putting something under your feet to prop up your toes. A three-ring-binder

works well. Some medical supply companies make a portable foot support if you want to spend a lot of money on something fancy.

Traveling

Again, traveling causes problems. Buses have notoriously narrow seats with little legroom. Airplanes are cramped and restrictive. Long hours driving a car can be torture. If you must do a lot of traveling, plan ahead. Take some tennis balls with you so you can do accupressure activities while sitting. (Described in Chapter Seven) If you travel on an airplane, book an isle seat so you can stretch your legs, and so you can get up easily for a short walk without disturbing your neighbor.

Constricted clothing

This is a real concern. Tight belts, bras, collars, and ties can cause constriction and pain. You may find that you swell at times. Clothes that fit you yesterday may not fit you today, but may fit you tomorrow.

Wearing the wrong type of shoe can cause a lot of muscle pain for those with FMS or MPS. Women's high heeled shoes can create problems, as well as shoes that are too narrow, too small or with poor arch support. Even tight socks can restrict blood flow to the feet. In addition, shoes that have rigid soles, with no bend in them can cause muscle ache in the ankles and foot. For years, I chose to wear my old ragged shoes rather than a new pair of stiff-soled shoes in the closet. I never realized why I disliked the shoes so much until my wife insisted that I wear them as all my other shoes were worn to shreds. Then I began to think about why I hated those particular shoes. Subconsciously I had decided that I would rather wear my tattered old shoes in public, than my beautiful shiny new shoes that caused a lot of pain! I solved the problem by purchasing a pair of dress shoes with comfortable soles.

Frowning or Squinting

Frowning and squinting are repetitive motions that can cause trigger points to develop. Learn to relax: walk relaxed, sit relaxed and allow your muscles time to heal.

Vitamin Inadequacy

This can be caused by almost anything. However, in most cases when people are low in the vitamin B's or vitamin C, or have other mineral deficiencies, trigger points can develop, especially in those people with FMS or MPS.

Allergy

Asthma and hay fever can cause muscle knot flares in people with FMS. Allergies to food, such as chocolate can also cause a lot of pain and discomfort.

Jaw action

As with any repetitive action, clenching teeth, thumb sucking, gum chewing, mouth breathing and teeth grinding can cause muscle knots in the jaw and neck.

Infection

Infection can come in various forms. Perhaps it is a cold, or a parasite like tapeworm or pinworms, or perhaps a vaginal infection. People with FMS or MPS have discovered that their condition worsens when they have an infection.

Low Thyroid

People with low thyroid function often feel exhausted most of the time. They also react to low and high pressures in the atmosphere. When the barometer soars or drops, they feel the pressure in their bodies. This type of reaction to the weather can bring on muscle knots. People with FMS or MPS and hypometabolism (low thyroid function) struggle with muscle knot flares during weather changes.

Hypoglycemia

There are two types of hypoglycemia. Those who react to low levels of sugar in the blood, and thus need to eat a little, often, in order to keep up low blood sugar and those who react several hours after a meal rich in carbohydrates. In either case, someone suffering from hypoglycemia and FMS or MPS may have muscle knot flares due to their hypoglycemia.

Body Shape

The shape of your body can cause muscle knots. For instance, a large overhanging gut can cause strain on the back. Large breasts without the proper support can cause back pain. Even the shape of your feet and toes can cause you pain. Fallen arches, Morton's Foot, and other foot patterns can cause a lot of pain. Check your feet to discover where the calluses build up. Then get a foot support or shoe insert where you can cut out a spot under the callus, and perhaps add support under the large toe. This has been known to help a lot of people. You may have to cut up a felt shoe insert to do this.

Illness

If you start getting the flu, a bad cold, or are fighting some other illness, the excess body activities and toxicants in your system can

cause you a lot of muscle pain. On some occasions, I have found my body tensing up all over and painful muscle knots appearing for seemingly no reason at all. The pain has been so intense that I have gone to bed. This puzzling reaction in my body however is explained a day or two later when I come down with the flu. You see, your muscle knots can flare as the body fights something. You may be fighting the flu, a cold, amoebic dysentery, gardia or a whole of other ailments. Whatever it is, your body's immune system kicks in, and you react, feeling fatigue, and muscle knots.

CHAPTER FOUR

Creating Your Own Pain Management System

What is a pain management system?

First, since medical scientists are still researching FMS, MPS, and other related conditions, there is currently no cure for these syndromes. As you begin your pain management program, you must accept that you will never escape the consequences of these conditions. However the good news, is that you can create a pain management system, where you can limit the amount of pain you experience, as well as control the factors that bring on extra pain. By developing a pain management system for yourself, that suits your body and your lifestyle, you can learn to live with pain.

A good pain management system addresses a number of areas, such as your posture, activities and diet. It also provides you with a series of exercises designed to exercise your affected muscles in such a way as to increase the blood flow to them and allow toxicants to be removed more effectively from the muscles. A good program will also include accupressure and massage techniques that physically work on the myofascia to get the toxicants moving and the blood flowing. You also need to be aware of the medications that are available for you to take, while being aware that many medications lose their effectiveness when taken over a long period of time. My personal advice is to try and manage your pain without medication, or with minimal medication. There may come a time in your life when something flares the pain excessively, and you will want access to effective pain medication during that time.

In the end, a good pain management program should also address the psychological factors that come from suffering low level pain over a long period of time. Remember that FMS, MPS and related conditions are not caused by psychological problems, but in reality, they can create psychological problems. Long years spent trying to battle low-grade pain can lead to depression. A good pain management program will address this area as well.

In this section, I have laid out what I personally feel are the important ingredients of a good pain management system. I have worked on my own personal system for many years, and constantly change it and adapt it as my body changes. Sometimes I feel on top of my pain, and I enjoy life tremendously. Sometimes, I feel like the pain has gained the upper hand, and I struggle to find out what has changed, so I can discover a solution. However, I am convinced that you can learn to live victoriously over pain.

Remember however, that a pain management system will take a lot of work on your part. You cannot expect a physician or physical therapist to do all the work for you. You must experiment and discover for yourself how to best control your pain, and the results that pain brings into your life. Your personal involvement is the key to developing an effective pain management program.

The Three Point System

Your body is like a computer. You put stuff into it, you process it, and you get stuff out of it. What you put into your computer determines what you get out of it. If you put in garbage, it will process garbage and output garbage.

Your body processes everything that goes into it. If you feed your body with junk food, it will eventually cause you problems. A person with FMS or MPS has a reduced level of processing. If your muscles have to process too much, the traffic jams up in your myofascia and you get muscle knots. Since your myofascia has trouble processing efficiently, a little help is necessary to keep it functioning better. In addition, the better your circulation system

is working, the better your body will remove the toxicants from the roadblock. So simply put, the three point program is:

1. Cleanse the body by restricting and controlling the garbage going into the body and blood stream.
2. Physically help unblock the myofascia.
3. Once the muscle knots are cleared up develop a maintenance program to keep your body functioning efficiently. Discover how to best flush toxicants out of you body. Discover how much toxicant your body can handle and live within this limit.

In other words, make sure you are:

- putting only quality stuff into your body
- physically helping the myofascia clear up
- flushing out your body as efficiently as possible

If you can get these three steps working, your FMS and MPS pain can be controlled, and perhaps even eliminated.

Getting help

First, get a diagnosis. Visit a qualified physician and discover if you have FMS, MPS or both. Then if possible get help from a trained physical therapist.

This is not as easy as it may first seem. Finding a physician who can accurately diagnose FMS/MPS or related conditions can be difficult. Talk to your doctor, talk to specialists, and check with discussion groups on the Internet such as [alt.support.chronic-pain](#) and [alt.med.fibromyalgia](#). If you are unsure of how to find an Internet discussion group then check Appendix D to discover how to link into these important discussion areas. I have found that the best source of information about good physicians comes from those who have already done the searching and have found the best doctors.

Getting a diagnosis is important. At first I thought that this wasn't so important, as I could recognize the symptoms and treat them with accupressure and exercise. However, as time passed and my body got older, I realized that I needed to get a diagnosis. I had missed out on many important tests that doctors could pro-

vide. When I struggled at times to keep up in my work, a doctor's diagnosis would have helped when dealing with my employer. Moreover, in order to get subscription medications, you need to have them prescribed by a physician. So, whatever you do, get medical help!

Finding a good physical therapist that knows and understands your condition is also important. Physical therapists can teach you useful massage and exercise techniques. They can be the keys to getting further help. Never minimize the effectiveness that a good physical therapist can be. However, be aware that there are lots of other people out there trying to cash in on the pain business and pad their pockets. Be aware of pain management specialists that are costly. If you cannot manage your pain through the information that is available through your doctor, physical therapist, or in reading books such as this, then you might consider approaching one of these specialists. However, be aware that you could be spending a lot of money for information that is already freely available in the public domain.

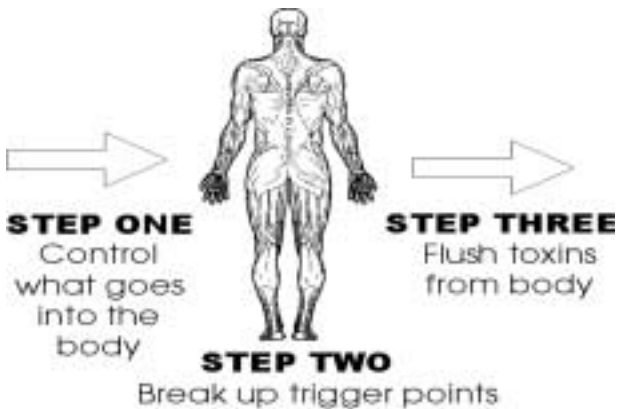


Illustration of the Three Steps

CHAPTER FIVE

Step One:

Cleansing the Body

Controlling your diet can go a long way in helping you cope with chronic pain. Remember that much of the trouble in your muscles comes from toxicants and wastes that accumulate there. If you control what you eat, you can control some of the level of toxicants in your body.

Much of the food that we eat today is processed in some way. Most if not all of these processes and additives are harmless to the human body. They body simply absorbs them, and then washes them out of the system. Normal people can handle these additives without any problem.

However, people with Fibromyalgia Pain Syndrome are not normal. My observation is that we struggle with added chemicals and toxicants. A steady diet of modern processed foods is a sure indicator of a coming flare, when my body will react against the overload of toxicants in its system. After an eating binge of processed foods and finishing it off with ice cream and toppings, I feel great, because the sugar acts as a stimulant to my body. However, several hours after the meal, I begin to ache all over, then the muscle knots break out in the major trigger points on my body. If I don't start treating this promptly, then secondary trigger points kick in, and I start to be in real pain, all over.

As step one tells us to control the amount of toxicants that enter our body, it is important to carefully watch what foods

create problems, and reduce their intake or eliminate them all together.

One method I developed is to start reading labels on cans and packages. I have become aware of a host of chemicals that are added to food to help:

- preserve it
- delay or prevent rancidity
- delay or prevent enzymatic browning
- improve taste without adding flavors
- emulsify it
- stabilize it
- thicken it
- improve the texture
- add flavor
- add color
- add sweetening
- leaven it
- change or maintain acidity or alkalinity
- humectants to retain moisture
- maturing agents to mature it
- bleaching agents to keep it white
- dough conditioners to make it soft or whatever
- anti-caking agents to keep it from clumping
- agents to enrich or fortify nutrients
- And more!

Most of these additives are harmless to us, in the amounts and the forms that are in most foods. Don't knock additives. They are a part of our world, and are a must, if we are to transport food from distant producers to the supermarket on your corner. Many of these additives are very helpful. There are strict government controls on additives. In addition, you must accept that normal food itself, contains a certain amount of naturally occurring toxicants or substances that are harmful when consumed in large amounts. Carrots, bananas, potatoes, peanuts and seafood all contain toxic substances. Even vitamin A is toxic when consumed in

large amounts. Moreover, arsenic is found naturally in some foods.

Safety is a matter of degree. The amount of an additive or toxicant, or the way it is used determines how safe it is. Toxic substances normally present in foods occur only in minute amounts. Additives that are approved are added only in small amounts. Both toxicants and additives are dangerous only when consumed in excessive amounts for long periods.

With the FMS patient, the concern with additives and toxicants is not in their safety, but rather in the amount of toxicants and additives your body can tolerate before it becomes overloaded. Your goal should not be crusading for the removal of additives to food, but rather the personal search for foods with a limited amount of additives and for foods which introduce a limited number of toxicants into the body.

As you search labels on containers, try and choose foods that have a limited number of additives. You may have to adjust your eating habits so that you consume more fruits, vegetables and basics. There is no set diet for a person with FMS. There are, however things to watch out for.

Watch out for:

Beverages containing alcohol

These are not pure drinks, but contain many substances that are toxicants.

Sweets, candies and chocolates

Chocolate contains many toxicants and chemicals. Experiment with this one carefully and if chocolate causes a problem, eliminate it from your diet!

Pastries like commercial doughnuts etc.

These are walking bombs! They contain loads of chemicals designed to help the local doughnut store quickly produce and keep a perfectly made, always fresh product.

Caffeine drinks

Tea, coffee, hot chocolate, Coke, Pepsi etc. should be used in extreme moderation, and if you must drink soda pop, try switching to a clear kind like Sprite or 7UP.

Potato chips (crisps), salted peanuts, pretzels etc.

Later in this chapter and in chapter eight we will introduce the concept of raising your water intake to help flush your system better. An over abundance of salt in your body can cause your body to absorb water, and will cause a weight gain. If you increase the amount of water you drink, you will need to decrease, or control the amount of salt you eat.

Fast Foods high in salt and preservatives

This includes things like fried chicken meals, Chinese foods, and many more.

Smoking and air pollution

Smoking introduces many toxicants into your body. Tobacco smoke introduces hundreds of toxicants into your body.

A Drastic Start

The best approach to cleansing the body is making a drastic start. A one-week program of body cleansing combined with accupressure and stretching exercises can quickly purge the body of toxicant buildup. Once the initial blockages are cleared up, you can begin to develop a maintenance program to keep your body functioning normally.

One Week Body Cleansing Diet

The best approach is to eat a body cleansing diet for one week, and then switch to a regular clean diet as described in chapter eight. During this time you should continue to take all prescribed medication and prescribed vitamin supplements. Non-prescribed drugs should be kept to a minimum.

Remember that you are about to embark on a life changing experience. Any change to your personal daily habits should take careful planning and preparation. You will need to:

Prepare Your Self

Spend some time thinking about living a different kind of life. Once you start down this road, you will not be stopping at the candy and chocolate displays in the supermarkets. You will also not be lying around with aches and pains. Mornings spent in bed feeling sick will be replaced by productive times. Along with this, you will learn to slow down and take strolls in the park, enjoy things in nature, and generally embark on a much more relaxing lifestyle. It will mean adjusting your schedule, and the schedules of your family, to find more time to relax.

The first week will mean a change in your eating habits, and the beginning of using accupressure and stretching exercises. Accupressure and stretching will be done at night just before you sleep, and in the morning when you wake up. You will also be able to do some of these at work or during the middle of the day when things get tense.

Your days will be much the same, except you are going to have to find time on a couple of occasions during the day to do accupressure and stretching. Your diet may change drastically, depending on what you are eating now.

Prepare Your Friends and Family

The best thing to do is to tell your family and friends that you are following a medical program, and that you will be on a diet for one week. Having an end-time to the diet will help your family and friends accept your new program. Explain to them that it is a very strict diet, and it includes everything that you put into your body. You don't have to go into details about what the diet is with

everyone, and expect that most people will not understand what a body-cleansing diet is anyway.

Along with this, if you are part of an FMS support group, get fellow members of your group to check with you once or twice a day, to encourage you in your diet. If you smoke, regularly drink alcoholic beverages, or consume large amounts of candy or chocolate, this diet is going to be tough, and you will need the help and support of friends and loved ones. The support of a spouse or partner will go along way in helping you through the week.

Prepare Your Co-workers

Most of us spend eight to ten hours at work each day. We have coffee breaks and lunch breaks with others. When you start the body cleansing diet, you must be prepared to continue your diet during your working times. If you work in a non-smoke free area, see what can be done to move into a smoke free area. Plan your lunches and coffee breaks. You may need to bring juice or bottled water to work with you, and you may want to supplement your breaks with an orange or apple.

Tell those you work with, that you are following a strict medical program and that you will have a strict diet for one week. Most will understand and try to help. Informing people ahead of time will also reinforce your ability to follow the diet, as others will be watching you.

Getting the Right Foods into Your House

Make sure that you have the right foods in your house before you start your diet. Plan to eat some fresh fruit everyday, and have it on hand. You may choose organically grown fruit if you want to be surer that you are avoiding unwanted toxins, additives and sprays.

When buying fruit juice, check the labels to find what juices are 100% pure, and contain only juice and water. These may be more expensive, but since the diet is only for one week, you

should be able to afford these. If you don't like the taste of your local water, buy bottled water. Sometimes it helps you feel like you are drinking "something," if you drink from a bottle that you paid for.

Carefully choose the foods you need according to the diet plan below. You may want to choose foods from a health food store if you want breads etc., without any additives. You will need to check with your local stores to find out what is available in your area.

Along with this, you will need to look for Echinacea herbal pills and Echinacea tea, as well as Chamomile teas and other teas labeled as antioxidants or blood and body cleansers. After the cleansing diet you will want to continue to use these herbs for regular daily cleansing so don't be afraid of buying too much.

Setting a Starting Date

Since this diet is only one week long, it is important to set a clear starting and stopping time. This will also help your friends and families understand what is happening in your life.

In addition, you don't need to find a special time to do this diet. It is not necessary to wait until you have holidays, or some special slot in your daily life to tackle this.

Three Goals

There are several specific goals to the cleansing diet.

The First Goal of the cleansing diet is to help your body deal with any excess wastes and toxins that have built up. Using some herbal body cleansers will do this. Along with this you will raise the amount of liquid you drink, in order to assist the flushing out process.

The Second Goal of the cleansing diet is to provide a better functioning waste removal system for removing the wastes as you break up the muscle knots in your body. As you begin breaking up the muscle

knots the wastes and toxins will need to be flushed out as efficiently as possible.

The Third Goal of the cleansing diet is to help you begin making changes to your life style. In the future you will need to change your regular eating habits, your exercise habits, and many other small things in your life in order to help you deal with your pain. Starting with a one week program that is a major change to your daily patterns can help you make the break to a new lifestyle that is much more free from pain.

Monitoring your progress

In order to monitor your progress you should keep a small journal. An empty sheet of paper will do, or a small notebook where you can write a bit about each day will also do.

As you progress through the cleansing diet, note the following twelve points in your daily journal.

1. The foods and drinks you take each day for the seven days. Note the food allowed in the diet, and foods you took by mistake or just couldn't help yourself.
2. The amount of urine you pass, and any associated pain or cramps. E.g.: little, plenty of urine, some burning sensations.
3. The color of your urine. A good rule of thumb is, the darker your urine, the more waste that is being flushed from your system. Dark, Medium, Light?
4. The presence of headaches or sharp pains in your body.
5. The presence of muscle cramping.
6. Cravings for sweets, stimulants etc.
7. The presence of fiberfog.
8. The amount of time spent each day doing accupressure. (as described in the following chapter).
9. The amount of time spent each day doing stretching exercises.
10. The amount of time spent each day doing mild exercises.
11. Any feelings of depression you might experience.

12. Any feelings of refreshing. (Some people describe it like waking up after a long dream).

The Cleansing Diet

This diet contains: No alcohol, tobacco, sugar (in any form), dried fruits, baked beans, black eyed peas, lima beans, caffeine. Very limited amounts of potatoes, corn, popcorn, bananas, barley, rice and pasta; no chips, salted peanuts, pretzels etc., no candy or chocolate.

Your body will struggle to accept this diet. There will probably be headaches, extreme fatigue and even nausea, as well as food craving. After these symptoms pass, your body will adjust to a new balance, and it will start breaking down excess fat, and it will release large amounts of toxic substances and waste materials. It is not fun, but it works. If the diet looks too hard, try cutting out things like coffee, chocolate and colas two weeks before hand, so you are not experiencing withdrawal symptoms while you are cleaning out the toxicants from your body.

You can watch the difference the diet is making by watching the color and texture of your urine. If your urine is darker and seemingly thicker, then it is usually washing out toxicants. This is not a 100% proof method. If you take an overdose of vitamins then your urine will also turn dark as it washes out the vitamins.

Breakfast: (Drink all the liquids, and choose from the solids, or eat them all if you are used to a hearty breakfast)

- A glass of water
- A glass of fruit juice
- An Echinacea pill (400 mg)
- A cup of Echinacea Tea with no sugar or honey
- A boiled egg (pepper is allowed, and perhaps one short small shake of salt)
- An orange or grapefruit

- A slice of whole wheat bread with butter. (Not margarine)
- A bowl of quality bran cereal with milk, and no sugar. (Raisin Bran is acceptable)
- No coffee

Coffee Breaks

- A glass of water
- A glass of juice
- An apple, and /or carrot sticks, celery sticks, etc., with no dips

Lunch: (Remember to drink all the liquids)

- A glass of water
- A bowl of soup (Some canned soups are loaded with sugar and salt. Choose carefully or make your own.)

A good soup recipe is: a medium pot of water, a chicken broth cube or two, lots of vegetables like celery, peas, carrots, potatoes, green beans and some sweet green pepper. When they have boiled together, add a tablespoon or two of spaghetti sauce and serve.

- A cup of Echinacea tea
- A glass of fruit juice
- Another glass of water
- A slice of whole wheat bread with butter (not margarine)
- No desert, no coffee

Dinner or Supper (Main Meal)

- A glass of water.
- A bowl of light soup for an appetizer. (Try egg drop soup. Beat an egg, and slowly drop (dribble) it into a pot of boiling chicken broth.)
- A regular meal with:
- A serving or two of rice or potatoes.

- A serving of lean meat, fish, or chicken that has been broiled, or fried with nothing other than a little salt or pepper on it.
- Cooked vegetables with a small amount of salt and/or butter on them. You can use broccoli, cauliflower, peas, green beans, and carrots.
- If you want salad, either make a leafy salad, or a Mediterranean Salad, with very little salt and only pepper and/or a dash of lemon juice as a dressing. *For Mediterranean Salad, finely chop equal parts: cucumber, tomato, onion and parsley. If you want some salad dressing, add a dash of lemon juice.*
- Have another glass of water and a cup of Echinacea Tea.
In the evening have more water to drink, and before bedtime drink a cup or two of Chamomile Tea and take another 400 grams of Echinacea Herbal pill.

Snacks

If you are longing for a substantial snack between meals, eat apples, carrot sticks, celery sticks (with no dips) or if you desire something more substantial try a couple of quality digestive biscuits. Check the local brands and choose the ones with the fewest number of additives. Always drink water with your snacks during this one-week diet.

A number of other good recipes for this type of diet are found in, *A Taste for Life* by Marcia Grad. (out of print)

Once your body is cleansed, you can begin to slowly readjust your diet to include some of the things you enjoy. Remember to keep your diet natural, and stay away from sugars, starches, and additives. We look more closely into your new eating habits in Chapter Nine.

During this one-week diet period you should also work on beginning to break up your muscle knots and start stretching exercises. This will help you to flush many more existing toxicants from your system.

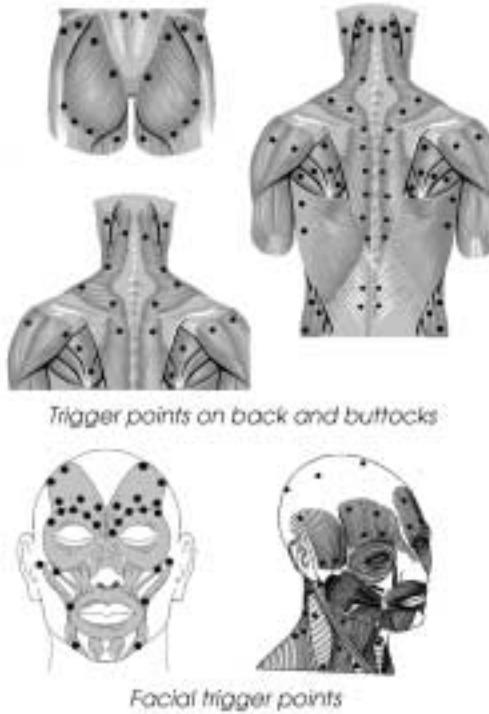
CHAPTER SIX

Step Two:

Physically Breaking Up your Trigger Points

Working on your own, or with a therapist, discover where your trigger points are. Try and work out which trigger points are primary, and which are secondary. Develop a program to break up the primary trigger points. We discuss accupressure in this chapter and stretching and massage methods in chapter nine.

Major trigger point locations vary slightly from person to person, but the basic locations are similar in everyone. Very few people have pain in all of these locations, but you can work on identifying which of these trigger points apply to your situation. . Get someone to press hard on these spots (until the thumbnail turns white), or lay on a mattress or on the floor and use a tennis ball under you. Then work on discovering where all your trigger points are.



The chart above illustrates where you might find some trigger points in buttocks, along your back and shoulders and in your scalp, and face.

Breaking up your Trigger Points

Accupressure Techniques

The basic philosophy

As I explained in chapter two, the basic trouble with FMS and

MPS is that the muscles have a buildup of excess materials and toxic matter. Until researchers come up with a miracle medicine, the best-proven method for breaking up these trigger points is to flush them manually. This approach should not be taken exclusively. If you manage to flush out some of the toxicants, and your circulation system is not functioning properly, then your gains are limited. If you manage to flush out some of the toxicants and your body is being constantly fed more and more toxicants through a poor diet, your gains will be limited. This is why it is important that you eat a cleansing diet, exercise gently but efficiently, and at the same time physically flush the toxicants from the muscle knots.

Despite the simplicity of this system, many people have found it to work. The key is doing all three at the same time. You may also want to use hot and cold techniques discussed further on in this chapter to enhance the flushing process.

Accupressure works like this: when you put pressure on a muscle knot, many of the fluids in the area are pushed out. When the pressure is released, blood and other body fluids move back in and flush the area. The technique is quite similar to putting a plunger into a sink or toilet. The secret is applying pressure then releasing the pressure.

What ever you do, do not apply the pressure for long periods, no matter how good it may feel. I have over done it on many occasions, especially when experimenting at the beginning. The danger is that while continuous long pressure might feel like it is relieving the pain, in actuality it can bruise the muscle, leaving you with a different ache, but never the less a damaged muscle. Also, long continuous pressure applied to bones in the body can move them out of place, and you may need a chiropractor to help you line them up again.

The best method of accupressure is massage. If you have regular access to a registered massage therapist, and have the finances to visit one on a daily or twice daily basis, then this is the best route to go. Unfortunately, most people in the world do not have access to massage therapists, and few could afford this kind of treat-

ment. Fortunately, there is a method of accupressure that is free, and quite easy to do on yourself.

Bedouin Arabs living in the desert have long used smooth round stones to massage their backs, but the preferred method in the west is to use tennis balls. However, stones do have their advantages. First, stones can be heated to various temperatures. If you would like to use a stone, choose several which are a bit smaller than a tennis ball.

Before you start, you may want to heat two of them in an oven, or in a pot of warm water. Do not heat them in a microwave, and do not get them too hot. Test the heated stones as you would a baby bottle, by holding it to the back of your hand. If it burns, then it is too hot. You may also want to keep a couple of stones at room temperature, or if you live in a hot climate, you may want to cool the stones in the refrigerator. Again, don't get them too cold or they will be very uncomfortable.

The object of accupressure is to put pressure on the trigger points, and massage them gently. You can do this with pressure points on your neck and in your feet and ankles. Use your fingers to find the pressure points and then using your fingers or thumbs press quite hard on the area. It should be hard enough to turn your thumbnails white. Press while counting slowly to three, then release and count slowly to three, and press again. Explore the pressure points around the base of the neck and on your ankles. The best way of massaging your ankles is shown in #1 the chart on the next page.

Now that you have the idea, let's look at some basics before working on your back and hips.

1. Work on both sides of your body equally

Most FMS and MPS patients have trigger points on both sides of their bodies. Even if you don't think this is true, massage them both anyway. If you massage one side only, the activity on that side can cause secondary muscle knots on the other side of your body. As an example, if there is a trigger point on the muscles on one side of your spine, massage it, and the corresponding muscle

on the other side of the spine. The same is important for the hips, the ankles etc.

2. Use pulsating pressure

Pulsating pressure (count to three, then release, count to three, and then press) causes the fluids in the myofascia to start to move back and forth, and they will eventually flush. If you hold the pressure for a long time, it will press out some of the fluids, but can cause bruising to the muscles.

3. Use hot for a while, and then cold

If you are using heated and cool stones, then use heat for a few minutes and then switch to the cool and then back to the heated stones, pulsating the pressure all the time.

4. Experiment and explore

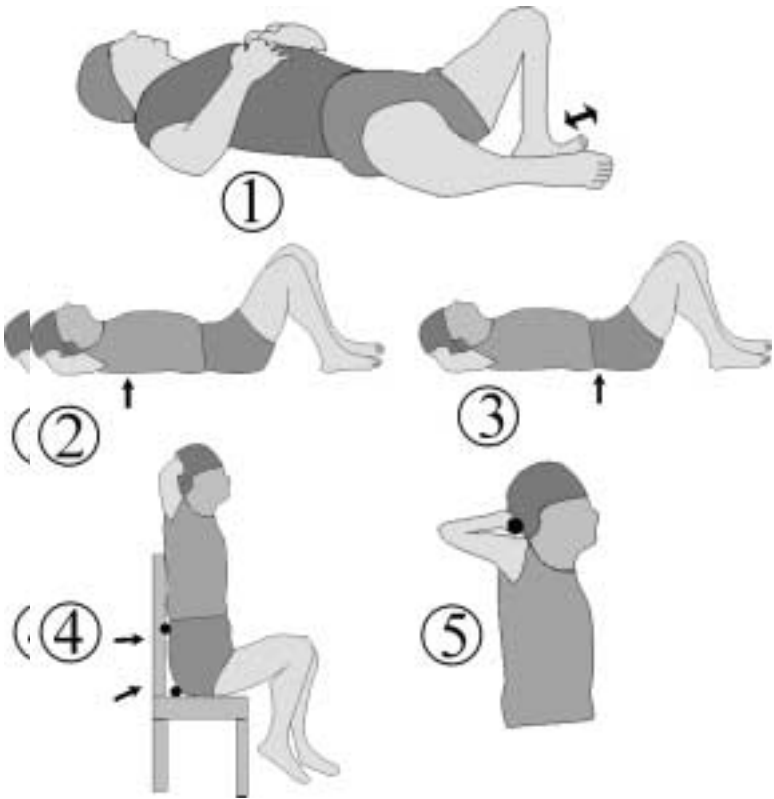
Use the stones or tennis balls to explore your back and hips to find your trigger points. Familiarize yourself with the charts on the next page showing the muscles in your body. Try massaging each of these muscle groups to discover which ones are giving your trouble. Learn to be creative in your pain management.

5. Understand related muscle groups

Many of your major muscle groups, (hips and backs) can harden, tighten, and cause pain in other parts of your body. Major muscle knots in your hips and back can often cause dull ache in your upper back, neck or head. Learn what major muscle groups are affected and start with them, and then work your way to the lesser ones.

6. Never press on bones

This is especially true in your back and rib cage. Never press on your backbone or ribs. This pressure can cause your bones to slightly misalign, and will result in more muscle knots and more pain. It will probably require a chiropractor to re-align them.



Body Positions

Below are some positions you can use to apply acupressure to your body.

Laying on a bed

This is especially good for working on your hips (#2) and your back (#3)

Sitting in a chair

These are useful exercises while traveling or working at the office. You can work on your hips and lower back (#4) or your neck. (#5) In fact you can do accupressure almost anywhere. If your neck becomes sore at work, you can get out your balls and go to work right in your chair.

Hot and Cold Treatments

People with FMS and MPS often complain that heating pads and other heat treatment sometimes help and sometimes worsen their condition. The reason for this is simple. If a nerve has been trapped and is causing the pain, then applying heat will increase circulation, brining in more fluids to the area, which ends up causing more pain.

On the other hand, heat can relax muscles and decrease pain when there are muscle knots but no trapped nerves. However, heat treatment has to be applied carefully. Short applications (5-10 minutes) of heat can help a lot. Long applications of deep heat can cause more pain. Heat applied for too long (like in a hot bath or hot tub) can cause extreme fatigue.

On the other hand, cold treatments can also be useful. Many people say that ice treatments are too strong. One must be careful to apply cold to the affected muscle only and not to the surround area. Also, avoid getting the skin wet. If you use ice, use a plastic wrap. The preferred treatments however are the use of cold rocks and alcohol.

Use of cool stones:

Cool stones can be used briefly to put cool pressure on muscle knots. The pressure should soon be released and warm pressure applied.

Use of Alcohol:

Some people find this very helpful. Take a stick and wrap cotton batten around it. Then dip it in alcohol or a water/alcohol mixture. Get someone to help you, and apply this cool mixture in stripes down the muscles on both sides of your spin and onto the muscles at the top of your hips. If this treatment is uncomfortable, don't continue. However, if it is very relaxing, then do it at least once a day.

If cold treatment is helpful, you may consider adding a two-minute cold shower to the end of your regular shower. Many FMS and MPS patients find cold water on their backs very stimulating and relaxing at the same time.

Infrared Relaxer

If you still have some stubborn spots then you should try an **infrared relaxer** to loosen and relax the muscle. They work very well. Infrared light treatments help pro basketball stars continue to play by overcoming stiffening muscles. It is possible to make a device yourself, by getting a hold of a powerful infrared light bulb. One minute on any spot is usually sufficient to greatly relax it.

CHAPTER SEVEN

Step Three:

Developing a Maintenance Program

Step three of our plan, is to keep the body cleansed. As you finish your one-week body cleansing diet, you will want to continue to pursue ways to keep your body working efficiently at washing out toxicants. If you do not do this, your body will slowly return to its original state.

You will also want to continue with accupressure and massage therapy as muscle knots occasionally form in your body. Along with this, you will need to continue doing some gentle stretching exercises in the morning and evening and before walking or swimming each day.

As you exercise, massage and accupressure yourself, you will need to work at maintaining a clean body to wash out the toxins that are a part of everyday life.

Herbs

With this in mind, you should carefully look into the continued use of herbal cleansers such as Echinacea and Chamomile. If you visit a health food store or the health food section of your supermarket you will find many different kinds of herbs and herbal mixes, everyone with lots of different claims.

Don't be afraid or confused. Herbs are medicine in their natural form. In many cases they are the plants from which medicines are

derived. They include leaves, bark, berries, roots, gums, seeds, stems and flowers. They have been used for thousands of years to help maintain good health. Below I have listed the herbs that Herbologists claim are useful for cleansing the body.

Alfalfa

Aids in healing allergies, arthritis, morning sickness, peptic ulcers, stomach ailments & bad breath; cleanses the kidneys & removes poisons from the body; neutralizes acids; is an excellent blood purifier & blood thinner; improves the appetite and aids in the assimilation of protein, calcium & other nutrients.

Arnica

This herb helps thin the blood so your circulation increases. It also acts as an analgesic, muscle relaxer and warmer.

Blue Cohosh

This herb is an antispasmodic that contains calcium, magnesium, and potassium.

Burdock Root

Is an excellent blood purifier and cleanser; aids in healing skin blemishes, arthritis & rheumatism; promotes healthy kidney function.

Capsicum

Promotes cleansing of the circulatory & digestive system; reduces fever, purifies the blood; helps prevent muscle aches, tiredness, skin blemishes, headaches, rheumatism, ulcers & sore throats; helps in regulating your blood pressure and pulse rate.

Cayenne (capsicum) pepper

Cayenne relieves muscle pain when applied externally. Try mixing cayenne powder with wintergreen oil.

Chamomile

An excellent cleanser & toner of the digestive tract; aids in calming the nerves; expels worms & parasites; Improves the appetite & helps eliminate dandruff.

Chaparral

This herb works to help alleviate leg cramps.

Crampbark

This herb is considered a natural muscle relaxant.

Devils Claw

This herb is often prescribed as a muscle and joint anti-inflammatory medication.

Echinacea

Is the most effective blood & lymphatic cleanser in the botanical kingdom; its acts as a natural antibiotic and works like penicillin in the body with no side effects; aids in reducing fever, infections, bad breath & mucous buildup.

Enteric-coated peppermint oil

This oil is an effective remedy for indigestion. Peppermint is a great digestive aid, and relieves upset stomach and gas. **Caution:**

Do not take any other form, or esophageal reflux and heartburn may result.

Garlic

Is extremely effective in dissolving and cleansing cholesterol from the blood stream; it stimulates the digestive tract; it kills worms, parasites and harmful bacteria; it normalizes blood pressure and reduces fever, gas & cramps; it used by athletes for increasing physical strength & energy.

Hops

This is a great pain reliever which also aids in digestion.

Hyssop

Regulates blood pressure, purifies the blood & promotes circulation, excellent aid for the eyes, hoarseness, lungs, mucous buildup, nervous disorders and skin problems.

Mustard oil

Mustard oil can be applied externally for the relief of minor aches and pains. **Caution:** Poultices should be carefully attended, as too long an application can result in tissue damage and pain.

Passion flower

This herb is an antispasmodic that also aids in sleep.

Pulsatilla

People who promote this herb claim that it decreases tension, anxiety and emotional agitation.

Red clover tea

This can improve overall health and relax the body.

Sarsaparilla

Helps cure impotence; relieves inflammation & gas and will increase the flow of urine; an excellent blood purifier; aids rheumatism, heartburn, hormones, gout, fever and mucous buildup; also used to promote perspiration. Make a strong tea of Sarsaparilla Root sweetened with Licorice Root and drink 2 glasses of it daily. This should help relieve muscular distress due to fibromyalgia. Sarsaparilla tea warms and loosens muscles and increases blood/lymph flow through them as well as reducing toxicity in the blood.

Seaweeds

Seaweeds such as Irish moss, blue-green algae, and brown algae have demonstrated anti-inflammatory properties.

Scullcap

This herb is supposed to decrease pain. It is also a nerve sedative and a muscle relaxer.

Spirulina

Is an algae containing 65—70% protein; it contains 26 times the calcium found in milk; also contains phosphorous & niacin and is far more nutritious than any known food; used for rejuvenation & weight reduction; an excellent blood and colon cleanser; very high in Vitamin B12 content.

St. John's Wort (flowers)

This much touted herb decreases pain, acts as a anti-depressant, and is also thought of as a muscle relaxer. It also raises serotonin levels and improves tolerance to muscle pain. (However, if you are taking any prescription medication, don't use St. John's wort.)

Turmeric and white willow barks

These all have anti-inflammatory properties, useful for joint pain and swelling.

Wild yam

Wild yam is useful in that it helps relax muscle fiber.

Yellow Dock

A nutritive tonic, high in iron and useful in treating anemia; also nourishes the spleen and liver, thus, being effective for the treatment of Jaundice, Lymphatic problems & skin eruptions; strengthens, cleanses & tones the entire body; excellent for boils, ulcers, wounds, and cleansing the blood.

You do not need to use all of the herbs listed above. You may find herbal combinations that contain many of them. Also, be careful of overdosing on herbal medication. Many companies seem to put high recommended dosages on their bottles to sell more herbs. Some claim that herbs are a food supplement. Sometimes this is to get around food and medicine laws.

Please be reasonable and cautious about the use of herbs. They can be powerful medications, and you should experiment with the dosage until you find the right amount for your body.

Those who are suffering from FMS and MPS need to be careful not to overdose on taking too great a variety of herbs. Remember that herbs are like medication. You should only use one or two

types at a time. Unfortunately, the herb market is quite unregulated, and there are lots of people giving lots of advice about what to and what not to take.

Always take advice given to you by storeowners and merchants, and peddlers of herbs with a large grain of salt. It is a moneymaking business and these kind people may think they are doing you a service by loading you up with herbs and emptying your pocket book.

Diet

Along with using herbal cleansers to help cleanse the body, you should continue to drink good amounts of water, and eat healthy foods. Many people I know want to continue following the cleansing diet, except that they add a variety of foods to their main meal so they can eat with the rest of their family.

Once you finish your cleansing diet and initial week of exercises and accupressure treatment, you will want to begin to add things to your diet. The best practice I know is to add one new ingredient each day, and analyze your body's reaction to it. You can then begin to compile a list of foods that you react adversely to. If you find yourself back in pain and fiberfog, then begin again with a cleansing diet for a couple of days and then slowly add new foods until you find the adverse foods.

The basic rule of thumb to follow is:

Keep your food natural and eat from the three basic groups:

1. Proteins 50% for a pain free diet
2. Fats 40% for a pain free diet
3. Carbohydrates 10% for a pain free diet

Don't be afraid of limited amounts of butter, cream, vegetable oil, etc., as these forms of fat can be helpful. Fat with your meal will decrease the flow of carbohydrates into the bloodstream and decrease your craving of carbohydrates.

The basic rules are:

- Cut down on the amount of carbohydrates that you eat.
- Eat lots of protein. It helps use up the fat stored in your body.
- Exercise regularly to decrease the amount of insulin in your blood and help stimulate the body in washing out excess toxicants.

Water

Raise the amount of water you drink, and lower your salt intake. The average person loses 2 cups of water a day just through breathing. Average sweating loses another two cups. Urinating averages around 5 1/2 cups, and there is round 1/2 a cup in your feces. This amounts to ten cups a day for the average person.

In order to replace this water: we usually get 1 1/2—2 cups of water through the foods we eat, and the rest comes from drinking. So if the average person needs to drink six cups of liquid each day, a person wanting to maintain maximum flushing of the body daily, needs to add to this several more cups. So your goal should be twelve to fourteen cups of water in a day. If you drink three cups of water at each meal, you will move a long ways towards this goal. It might help to think in terms of:

1. You get 1 1/2 cups of water through the food you eat each day.
2. Start your day with three cups of liquid: try drinking one cup of cleansing tea, one cup of juice, and one cup of milk.
3. At coffee break, skip the coffee and drink another cup of water, juice or herbal tea.
4. At lunch break, have soup, and drink another two cups, perhaps one of herbal tea, and one juice.
5. Afternoon coffee break, skip the coffee and drink another cup of water, juice or herbal tea.
6. During the evening meal, make sure you drink at least two cups of water or juice.
7. Drink one or two glasses of water or herbal tea in the evening.

If you have trouble with sugar, or seem to be going to the bathroom a lot, have patience, and wait for a couple of days. The presence of excess sugar in your system can cause you to urinate a lot, especially when the sugars are being flushed out. If you feel you have a problem then cut back on the water a bit and contact a doctor.

However, most people should have little trouble adding extra water to their daily diet. Some people even carry around a water cup, some of them with lids and straws, so they can sip water all day long.

Salt

If you raise the amount of water you drink each day, you should moderate the amount of salt you eat. Salt is useful in the body for many things, and one of them is helping the body maintain water. If you raise the amount of water you drink, and continue to eat large amounts of salted foods (chips peanuts, fast foods), you will find yourself gaining weight. However, it is not fat you are gaining, but rather your body is retaining more water.

Salt should not be eliminated from your diet, but salted foods, and adding salt to your food before you eat should be eliminated. Your salt shaker should stay in the kitchen beside the stove, so you can salt food normally before you eat. This will provide your body with plenty of salt for it to function well.

Allergies

Watch for allergies when taking new herbs, medication or trying new foods. There are a number of different allergic reactions that you should be aware of. Watch for things like:

- Rashes
- Swelling or bloating
- Headaches
- Hyper feelings

- Emotional ups and downs
- Tightness in the throat or difficulties breathing
- Post-nasal drip, or flem from your nose running down your throat, especially at night.

The best way to deal with allergies is to avoid whatever is causing them. Otherwise, taking antihistamine medication can treat them. Ask your doctor for advice.

Vitamins

In general, you should not have to take vitamin pills if you are eating well. You may choose, and many people with FMS do, to take a vitamin B complex supplement, or a complete vitamin supplement.

Several people have shared with me how beneficial they have found Daily Benefit vitamin pills from Mary Kay company. They were developed to suit a woman's special needs, but they fit the FMS and MPS daily requirements almost perfectly. One box contains 30 packets. Each packet contains enough vitamin supplements for two occasions. I personally split the packet into two piles of pills, breaking the multivitamin and B complex pills into two. I then take these supplements on two occasions, usually spacing them over a week. Each packet contains: one multivitamin with minerals, two Antioxidant Softgels, one B complex with calcium and two calcium and magnesium tablets.

Scientists are continually exploring the area of vitamins. Recent research has shown that some vitamins have a smaller molecular structure than others. These vitamins seem to pass with greater ease through congested myofascial tissue. If this is true, then vitamins with smaller molecular structure could aid FMS patients by providing better nutrients to the muscles, thereby helping fight fatigue. It is my own personal opinion that vitamins from nature (e.g. eating Swiss chard, spinach and beets) are better for FMS patients than artificial vitamins produced chemically.

Trace Elements

While vitamins are important to your diet, trace elements are even more important. In order to get all the trace elements you need, you might consider using Celtic Salt, found in health food stores, rather than refined iodized salt or refined sea salt. In general, Celtic Salt contains most of the trace elements that your muscles need to function properly.

Fiberfog

Most people with FMS suffer from something called fiberfog. The name itself is quite descriptive. It feels like operating in a fog. You remember things, but in a foggy kind of way. If you have a good imagination or dream a lot, you may have trouble remembering if a memory you have is real, or something you thought of or dreamed about.

Fiberfog also affect our mental processing ability. Because the neurotransmitters from the brain are running into toxic roadblocks in the myofascia, the neurotransmitter network in your body does not run efficiently. This affects how clear your thoughts are, and how well your muscles work. You may have trouble with co-ordination, concentration and especially things that require holding on for a while. Children with FMS have great trouble playing on a jungle gym set for long, because their muscles often let go even when the child thinks he is hanging on.

People suffering from fiberfog often have a hard time learning new skills. They can enjoy reading novels, but struggle to read reference books, or learn new computer programs.

Personally, I have suffered from bouts of fiberfog all though my life. When there is no fiberfog, I can think clearly, and work effectively. When I am suffering from fiberfog, I struggle a great deal to think clearly, logically, and I usually tire quickly from any strenuous mental activity.

During my younger years I discovered a way to deal with

fiberfog. I could find relief if I took a stimulant. Candy and chocolate were my favorites. As a youngster, these usually did the trick, and they helped me with my schoolwork. However, sometime during adolescence I began to experience trouble with them. For years afterwards, I still ate chocolate and candies, but I discovered that while they aided with the fiberfog initially, they usually cause me a great deal of pain later. Research has shown that it is not just the chocolate, but it is all the other ingredients in chocolate that can affect the myofascia causing muscle knots and pain.

Research has also shown that nicotine can help clear up fiberfog. However, after a minute or two of smoking, toxins in the smoke fill the bloodstream and after a couple of minutes muscle knots can begin to form all over the body. There are several major disadvantages with using nicotine to clear fiberfog. First of all, smoking introduces many harmful toxicants to the body. Secondly, the longer one smokes the weaker nicotine's stimulus becomes and the stronger its addiction becomes. This is why smokers usually level off at twenty to thirty cigarettes a day. The amount of toxins contained in this level of smoking is serious enough to hurt the bodies of even the most healthy of people.

The Answer to Fiber Fog

Stimulants have proven to be very helpful in dealing with fiber fog. But the problem with most stimulants is that they also contain many other chemicals which act as toxins in the body. This is true for nicotine, chocolate, caffeine, alcohol, and many more. If a person with FMS starts taking stimulants to deal with fiberfog, a cycle soon develops. The stimulants help initially and then the toxins create more pain and more fiberfog. Therefore, the person takes more stimulants, which help for a while, and then they create more pain and more fiberfog. Once the toxins in the body reach a certain level, (which is different in different people), a flare occurs. A flare is simply a time when the body physically reacts to

all the toxins in it, and the person becomes physically sick, aching all over and often nauseated and depressed.

The answer then is to find ways to eliminate the toxicants from your body, and at the same time find a stimulant that has minimal toxicants. It is helpful that there are a number of herbal body cleansers available that can readily help clean out your body. However, the happy news is that there is a stimulant available that produces only minimal toxicants. This stimulant is simply . . . mild exercise. All exercise produces toxicants as the body uses up food supplies to produce energy. The by-product of the energy is waste material, which must be moved through the myofascia into the blood stream and then out of the bodies waste system.

Mild, non-strenuous exercise acts as a stimulant. I have discovered that a short ten minute walk, done in a leisurely way can refresh the mind and clear fiberfog for up to an hour or two. If my body is functioning well in removing toxicants, this exercise produces no bad side affects.

As a writer, I've struggled with fiberfog a lot, as I need my brain to be clear for thinking. So I alternate writing with walking, or gentle swimming. Even shopping, and strolling in the mall can be helpful.

Conclusion

If you don't work at cleansing out your body and eating a healthy diet, you will find that your myofascia plugs up again and again. You can work and work at clearing the roadblocks by using accupressure and massage, but if more traffic keeps pouring in, you will never get ahead. This is why Step One is so important. If you can limit the toxicants coming into your system, you can begin to clear the roadblocks, and get ahead of the game. Then by maintaining a healthy diet, and by making sure the body is efficiently removing toxins, you can greatly aid the help you receive from accupressure and massage therapy.

CHAPTER EIGHT

Stretching Exercises, Massage and Relaxation

Exercises

Just the thought of an exercise program can make most folk with FMS and MPS tense! After just a couple of excesses, I personally find myself in pain! The reason for this is quite simple. Exercise has two effects. As toxin filled muscles are used they create pain. Secondly, exercise burns energy and produces more toxins, creating more pain.

However, exercises have several major benefits. First, they stimulate the muscles, and cause a greater flow of blood, thus flushing out toxins from your muscle knots. Secondly, they can stimulate your body, helping you overcome fiberfog.

Exercises however, are often misunderstood in our society. First, someone once said, if it doesn't hurt it doesn't help. This is false! Secondly, most folk think that you have to exercise a lot. They insist that you need to run five miles, or swim a hundred laps in the pool. If they can do this, great, but you do not need to measure up to others. Thirdly, commercial companies have convinced us that we need to buy a lot of expensive equipment in order to exercise effectively. This is also wrong!

As a person with FMS and/or MPS, you need to develop a regular exercise program. However, this does not mean that you have to buy anything! Don't rush into a big program, start slow and easy. We are not talking about whipping you into shape, we are only talking about gentle exercises to get the blood flowing in your muscles more efficiently.

If you are in doubt, try the exercise below. All you need is a doorway!

Doorway Exercise

Stand in the doorway with one hand firmly resting on each side of the doorjamb at shoulder height. Take a step forward and feel the stretch across your chest. Try the same motion with your hand held further down the doorjamb, and then with your hands placed even lower. Do this stretch once or twice a day for each hand height. Experiment to discover what doorway exercise pulls your muscles where they hurt. The doorway exercise is illustrated in #7 in the following pages of illustrations.

Rocking Chair Exercise

Alternatively, how about just sitting in a rocking chair and rocking! Even the most dedicated “couch potato” can exercise while watching TV! A rocking chair can be a marvelous exercise tool. Rocking tenses and relaxes the solus muscle in the calf of the leg, which is the secondary pump that helps the heart to circulate blood.

Walking

There is a right and wrong way to walk. Check with your physical therapist. Start with slow short walks, and slowly increase them. Your first walks should be leisurely and enjoyable. Then as you progress, learn to lift your legs from your hips, not your knees. Avoid foot slap and foot drop. Learn how high to lift your feet. Don't shuffle along.

Leisurely walking is great for the hips. Walking is helpful to the neck, because the head forward position can alleviate your pain. Learn to use a type of stride that will help to correct this. Shift your weight to the balls of your feet, leaning forward with your head held back for balance. Don't swing your arms. Push off each step from the toes, using calf muscles. Move twice as fast as in normal walk for a while.

Breathing is important to walking. Breathe deeply. Enjoy the outside air. (Unless you live in a polluted area). Go easy. At first, make sure you have level walking ground. If you are gasping you are going too fast.

Make sure you have comfortable well fitting walking shoes.

If you are going for longer walk do stretching exercises first.

Breathe properly. Correct breathing helps bring in the optimum amount of oxygen, and helps flush out toxicants in your system. It's as simple as learning to breathe deeply, filling your belly first, and then filling your upper chest. It requires pulling your diaphragm muscle in. It also requires breathing out all the air in your lungs. Remember that rapid shallow breathing is not efficient.

As with any therapeutic methods described in this book, it is important to remember that I am giving guidelines only. You should consult with your physician and physical therapist.

Exercise your abdomen: You can do this while sitting or standing. If you are sitting, then lean forward slightly and scoop your stomach in and up so that your abdomen so makes a C curve. If your are standing, rest your back against wall, and the same breathing without moving from the wall. This is very much like trying to press your navel to your spine.

If you are lying, then keep your hips on the mat, suck your abdomen in, and then fill your lungs with air, pressing your navel toward your spine. This exercise is illustrated in #4, in the following page of illustrations.

Callanetics

Callanetics consists of a set of exercises, each set concentrating on a separate group of muscles. Using very small movements, these exercises can firm and reduce the excess tissue that so many people have in overabundance. It works faster than most other exercise techniques. You can get books and tapes through Avon Books (800-238-0658). Tapes can be ordered through MCA Home Video Inc., 70 Universal City Plaza, Universal City, C.A. USA 91608

FMS Stretching Exercises

The objective of any FMS stretching exercise is to gently pull on the muscle, forcing the blockage in the myofascia to be freed up. Imagine the muscle to be a wet hand towel. If you hold the towel by each end and dip it in water it soaks up the water. The automatic impulse most of us have developed is to twist the towel to get the water out. This works fine on a towel, but twisting muscles usually results in sprains, tears and dislocations. If we cannot twist the towel we must find other ways of removing the water from the towel. There are several ways to do this:

1. *Accupressure*: lay the towel in the sink and press on it with the palms of your hands.
2. *Stretch* the towel over a tight surface, (like the edge of the wash basin).
3. *Massage* the towel with your hands.

Accupressure using stones or tennis balls takes very little effort. A person can basically maneuver the tennis balls to the appropriate place under the body, and then using the weight of the body, rock up and down on the tennis balls. It is an easy and effective way to start breaking up the solidified toxins and ground substance in the muscles. Initially it can be quite painful, but if you keep moving the location of the balls every few minutes, a lot of initial pressure points can be initially started to clear.

Stretching exercises can be extremely effective in a long-term maintenance program. Accupressure is used initially to break up any acute pain points, and then stretching is used all over the body to help the myofascia in all of the body's muscles to flush and clear.

If you begin on a stretching program without first doing accupressure, then the results from the stretching program will be limited, and short term results will be hard to measure. However, once you do accupressure on the tenderest points, stretching exercises can assist the clearing processes in all of the stretched muscles.

I have found that the best time for stretching is before and after sleep. At the end of a busy day, I use my tennis balls for accupressure on any acute pain I feel in my muscle myofascia. Once I have worked on the most painful spots, I then resort to stretching exercises to work on as many muscles as possible before I sleep.

The results of this practice are two fold. First, it reduces the toxicants in the muscles, lowering the low-level pain. Secondly, the exercise plus the reduced pain help give me a good night's rest. Once I have used accupressure and stretching exercises, I then try several relaxation techniques until I fall soundly asleep.

In the morning, I begin the process again. My tennis balls spend the night beside my pillow, and I begin again using pressure on the most tender points. For me, these are in my hips and often in my lower back. Then once I have worked on the tenderest points I begin gentle stretching exercises.

This quick in-bed morning exercise program has a number of effects. First, it reduces the initial pain of getting out of bed. After the accupressure and stretching I feel much better and get up pain free. Secondly, the myofascia are functioning better in my system, and I start the day free of fiberfog.

In the event of a stressful day, I try and take a break in the middle of the day to repeat the accupressure and stretching treatment.

The exercises given in this chapter are for your information only. You should learn to be creative, finding ways of stretching your muscles. My nine-year-old son enjoys finding new ways to stretch different muscles in his body. Not only does this stretching help him manning his own FMS pain it actually feels good after a while.

On the other hand, if you have had recent surgery, or have other joint problems consult your physician before starting a stretching program.

Neck, Shoulder and Arm Stretches

Initial Stretching

Stretching should be done slowly without bouncing or jerking. Stretch to where you feel a slight, easy stretch. Hold this feeling for about 5 seconds. As you hold this stretch, the feeling of tension should diminish. If it doesn't, just ease off slightly into a more comfortable stretch. The easy stretch reduces tension and readies the tissues for the FMS stretch.

FMS Stretching

After holding the easy stretch, move a fraction of an inch further into the stretch until you feel mild tension again. Then rock back and forth slowly between the initial stretching point and this second point. This FMS stretch should be held for 3 seconds on, then 3 seconds slightly relaxed. If the tension increases or becomes painful, you are over-stretching. Ease off a bit to a more comfortable stretch. This FMS stretch reduces tension and will safely increase flexibility.

Stretch only as far as feels good to you. Remember to be relaxed while you stretch and concentrate on the area being stretched. Breath slow and deep. Don't worry about how far you can stretch. The object of the stretch is to stretch the muscle and squeeze the myofascia, squeezing out the blocked fluids.



Upper Body Stretch Routine

The Upper Body Stretch Routine described below is an excellent routine to learn and do in bed before and after sleeping. The first thing you should do is rest on your back with your knees bent and

hands under your head for at least one minute. Concentrate on being relaxed.

Continue holding your hands behind your head, use your arms to slowly bring your neck and head and shoulder forward until you feel a slight stretch. (#2) Hold an easy stretch for five seconds. Repeat two times and then intersperse it with the stretch below. Do no over stretch.

Still lying in bed, continue to hold your hands behind your head. Then pull down and in with your arms. Think of your elbows, and pull them first down, and then relax, then pull them in and relax. (#3) Alternate this for 3-4 times.

You can intersperse the above stretching exercise with the one below, pushing your upturned palms above you. Hold the stretch for as long as 15 seconds. (#7) Then lower your hands behind your back and redo the exercise above.

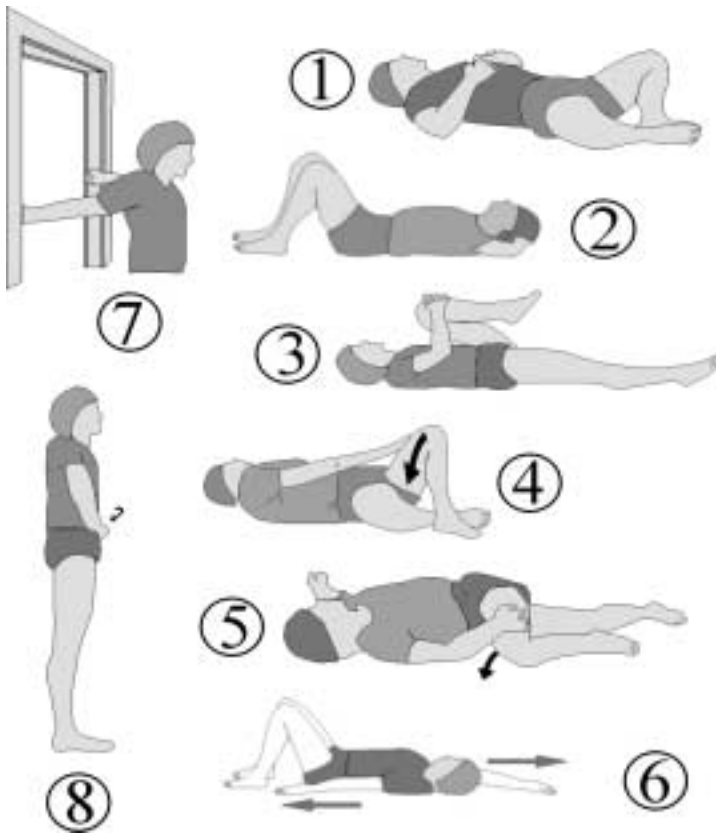
Now grab one elbow with the opposite hand and pull the elbow behind your head as you bend from side to side. You can do this standing or lying in bed. (#6)

Next, shrug your shoulders by raising the top of your shoulders towards your ears until there is tension in your neck and shoulders. (#4) Hold this tension for 3-5 seconds and relax.

Now, with your head resting on the bed, put one arm above your head (palm up) and the other arm down along your side (palm down). You may have to slide down in the bed to do this. Reach in opposite directions at the same time to stretch your arms, shoulders and back. (#6) Hold the stretch for a couple of seconds, and repeat with the other arm. Remember to keep your lower body flat, and relaxed.

Next, place your arms back along your sides and turn your chin towards your shoulder, only as far as is needed to get an easy stretch. (#5) Hold for 5—8 seconds and then stretch the other side. Repeat this 2-3 times.

Practice this workout until you can alternate the various upper body stretches without referring to the book. This should be a workout that you do two or three times a day.



Lower Body Stretch Routine

The Lower Body Stretch Routine can be very useful for stretching lower back and hip muscles. These are major muscle groups and are often very painful for those with FMS and MPS. Remember to start slowly, and to not over do the stretches. If you have major muscle knots, work at them with massage or accupressure to loosen up the myofascia.

Begin by putting the soles of your feet together, and then relaxing your legs. (#1) Hold this for up to a minute if your can. Some people like to do this with a pillow for more comfort.

Next, straighten the legs, and then slowly pull one leg towards your chest. (#3) Keep your head on the bed if possible and hold for 30 seconds. Repeat with the next leg.

Then with your knees bent, tighten your gluteus muscles (butt) and at the same time suck in your stomach. (#2) Hold this for 5-8 seconds and relax. Concentrate on prolonged muscle contraction in your butt and stomach. Do this often, tilting the pelvic down as long as possible.

Now lay on your back and slightly bend one knee and laying the leg outward. Place the other leg over it and then pull with the opposite hand on the knee to stretch your hips and lower back. (#4) Reverse the process for the other leg.

Next straighten your one leg, with your hand pull the other leg over, and press it down as far as it goes. Turn your head to look the other direction. (#5) Repeat with the other leg.

Lay on your back with one knee slightly bent outward. Take the other leg, and using the arch of your foot and your heel, massage the ankle muscle of the other leg. (#6) Do this for 5-8 seconds and then do it with the other leg.

Now lay back and relax for a moment, and then pull your head up again, this time raising your head and upper back up, so that it pulls all the way down your spine. Relax and do this again.

For more exercises, you can experiment yourself, check with a physiotherapist, or invest in a good book on stretching from your local bookstore. You can also check the Internet sites mentioned at the back of this book.

Massage Techniques

Few people have the luxury of getting regular massages. I personally believe that a good massage is far better than any accupressure

treatment. However, several things restrict us from getting good massages.

First, who will do the massage? If you need a massage in the morning and at night, and perhaps one during the day, who will perform this for you. It is very rare that a spouse or friend will commit themselves to doing two to three massages every day for the rest of their lives. In addition, it is wrong for a person with FMS to expect that a spouse or loved one should commit themselves to doing this. Before you demand that your spouse or child do a massage think carefully. The occasional massage from someone close to you can and should be a very special occasion. Don't ruin it by demanding regular massages. Self-performed accupressure can do almost as well.

Secondly, if you want to visit a registered massage therapist, you will need to pay for it. As far as I know, most insurance plans do not cover FMS. Two or three massages a day, for the rest of your life could be a costly outlay.

Thirdly, the person doing the massage should be trained in methods of massage that work best for releasing the toxicants in the myofascial. If the masseuse is simply going to perform accupressure, then you are probably better of doing it yourself. As I will demonstrate later, there are particular methods of massage that work best for massaging the myofascial tissue.

Fourthly, as a patient, you know which muscles hurt the most, and which need the most attention. A nice massage is nice, but often it doesn't give adequate attention to the spots that need it most.

So at the beginning, think carefully before looking for someone to massage you.

If you do go for a massage, here are some things to think about.

First, find a registered massage therapist, or be prepared to work with a loved one who is committing him or her self to helping you this way. Registered massage therapists have training in massage. This is important. There are lots of people and establishments out there that offer massage, but really, they are fronts for

prostitution. Some of them are very clever and I have been fooled a couple of times. For this reason, I generally do not recommend massage unless you can find a registered massage therapist. If you have medical insurance, make sure it will cover the treatment, or be prepared to pay.

Learning Massage Techniques

Massage includes a number of disciplines, which share the use of pressure, friction and strain upon the muscles and joints of the body for therapeutic responses. Massage therapists tell me that there are several types of massage: massage for preventive general health; massage for relaxation, pampering or 'beautification'; sports massage, massage for pain relief; rehabilitative massage (for recovery from physical injury); massage as an adjunct to medical or chiropractic treatment; and massage for personal psychological transformation.

The term 'bodywork' is often used to refer to therapies that are often combined and confused with massage, e.g. Shiatsu, Trager, Rolfing, Polarity and Reflexology.

Swedish Massage (which is simply its name, not a reference to Sweden) refers to a collection of techniques designed primarily to relax muscles by applying pressure to them against deeper muscles and bones, and rubbing in the same direction as the flow of blood returning to the heart. The lymph system and veins (which carry blood back to the heart) both rely on muscle action, rather than heart pump pressure, to operate. Many believe it is safe to apply light pressure in the opposite direction.

Friction is reduced by oil, or lacking that baby powder. Some practitioners claim benefits from vegetable rather than mineral oil while others disagree.

Swedish massage can relax muscles, increase circulation, remove metabolic waste products, help the recipient obtain a feeling of connectedness, a better awareness of their body and the way they use and position it.

The strokes and manipulations of Swedish Massage are each conceived as having a specific therapeutic benefit. One of the primary goals of Swedish Massage is to speed venous return from the extremities. Swedish Massage shortens recovery time from muscular strain by flushing the tissue of lactic acid, uric acid and other metabolic wastes. It improves circulation without increasing heart load. It stretches the ligaments and tendons, keeping them supple. Swedish Massage also stimulates the skin and nervous system while at the same time relaxing the nerves themselves. As it can help reduce emotional and physical stress it is often recommended as part of a regular program for stress management. It also has specific clinical uses in a medical or remedial therapy.

On-site massage is one name for a short (15-20 minute) massage of a client sitting in a special, portable massage chair. The client remains fully clothed and no oils are used while their shoulders, neck, upper back, head and arms are massaged. On-Site is popular at some offices as an employee benefit and for some conferences, workshops and certain social events.

Trigger Point and Myotherapy Massage are pain-relief techniques to alleviate muscle spasms and cramping. The therapist locates and deactivates trigger points, which are often tender areas where muscles have been damaged or acquired a re-occurring spasm or 'kink' that worsens painfully when aggravated. The major goals are to reduce spasm inducing new blood flow into the affected area. The spasms are partly maintained by nervous system feedback (pain-spasm-pain) cycle. A spasm also physically reduces blood flow to the trigger point area, reducing oxygen supplied to the tissues and increasing the spasm.

Pressure is applied to trigger points, for a short time (between about 7 to 10 seconds per point), which can be momentarily painful but is greatly relieving. It is common to hit the same trigger points several times during a session, but you won't be leaning into a sore spot for several minutes. Often ice or another cooling agent is used to reduce nervous system response, making the area easier and more comfortable to work. Then the muscles are gently stretched to complete

the relaxation process, hence the name 'spray and stretch'. Myotherapy aims to erase pain and soothe tightened muscles. People with acute or chronic muscle tension and the associated pain are likely to benefit greatly from this type of treatment.

Craniosacral Therapy is a type of myofascial release that is especially suited to addressing tensions in the Craniosacral system: the membranes that contain the cerebrospinal fluid within the head and spinal column, as well as the cranial (head and face) bones to which these membranes are attached. Release of restrictions in these membranes and at the sutures between the cranial lobes is deeply relaxing and may relieve certain types of headache, spinal nerve problems, temporomandibular joint dysfunction (TMJ), and stress in the nervous system.

Things to watch out for:

If you or a friend want to try massage there are some things of which to be careful. First, read a good book, to learn all you need to know. In general, be careful of organs, joints (including vertebrae), and veins. Avoid applying heavy pressure to the kneecap, back of the knee, the abdomen and the front of the neck. There is a right direction (toward the heart) and a wrong direction to apply pressure. (Veins have valves that act to prevent the back flow of blood returning to the heart. You don't want to blow those valves!) Similarly, the abdomen should be massaged in a clockwise direction because of the way the intestines are laid out.

Obviously avoid broken bones, acute inflammations, etc. and use caution if the recipient has a medical problem, including infections. Cancer and plebitis are usually considered as conditions incompatible with massage.

Glossary

On the next page is a list of terms used in relation to massage that may be helpful:

- *Draping* refers to the covering of the client's body while they are being massaged.
- *Effleurage* is used in Swedish massage made up of long gliding strokes.
- *Holistic Massage* treats the body as a whole and does not concentrate on only a troubled area. The opposite is usually therapeutic massage.
- *Petrissage* is used in Swedish massage. They are kneading, grabbing, and wringing strokes used to focus on body regions.
- *Strain and Counter Strain* are a set of techniques for relieving musculoskeletal spasm and pain. It is a passive procedure that places the body or limb into the position of greatest comfort. This reduces or arrests the inappropriate nervous system activity that maintains protective muscle spasm.
- *Normalization* of both muscle tone and joint function normally accompany the decrease or elimination of pain that result.
- *Tapotement* are a variety of percussive strokes, hitting, tapping, or pinching strokes used in Swedish massage.
- *Therapeutic Massage* usually concentrates on a particular area which needs treatment. The opposite is usually Holistic Massage.

Creative Pain Management Massage

Using the information above, you can begin to work out how to best massage the muscles that cause you pain. Check the blood flow and muscle charts below to discover the direction you should be massaging the muscles. Then use oil or baby powder to help your hands move over the skin easily while still applying pressure to the muscle below.

Use your thumbs and palms to alternate pressure that is more direct and general pressure. Don't press too long or too slowly on the muscles. Alternate some slower heavier strokes with some faster lighter ones. Remember the idea is to use pressure and friction to

break up the roadblocks in the myofascia and release the toxicants. You can also use light pounding with the fists. This helps break up solidified ground substance and helps increase the blood flow to the area, which will take the toxicants away.

If you are new as massage, experiment. But remember the basics: Work with the flow of blood, and massage only the muscles, just, not organs or bones. The chart on the next page is for your reference.

Relaxation Techniques

Deep relaxing techniques are often recommended by therapists, and are used to decrease blood pressure, heart rate and oxygen consumption. There are many techniques which have been used over centuries by many different cultures. Some of these techniques are taught with Asian martial arts or in Indian religion. All of them include three basics, which can be learned by anyone, and need not be part of any religious or other teachings that are often included in eastern techniques. The three basics are:

- Focused breathing
- Progressive Muscle Relaxation
- Guided Mind Imagery

Extensive research has shown that regular practice of deep relaxation techniques bring about a decrease the responsiveness of the sympathetic nervous system. In addition to the immediate results of decreasing heart rate, blood pressure, breath rate, and oxygen consumption, regular practice over a month or more seems to lead to a change in how the body responds to adrenaline. Research suggests that there are decreases in anxiety and depression, and an enhanced ability to cope with life stresses, in those who regularly practice deep relaxation techniques.

Deep relaxation techniques should not be confused with feelings of relaxation one may experience after reading a good book, watching TV, or listening to music. While those activities may be enjoyable, they do not result in any long-term changes to the bodies systems. If you practice deep relaxation techniques over a long period, you will

learn to relax the body to a state where you can enter deeper levels of sleep at night more quickly, and for longer periods. When you are in a deep level of sleep your body has time to repair itself.

Once you have finished your accupressure and stretching exercises, you should begin deep relaxation techniques before you go to sleep.

Step one: Breathing

Deep abdominal breathing is the basic skill necessary for most deep relaxation techniques. After many years of stress, tension and anxiety, most people have “unlearned” the healthy abdominal breathing we all did as infants and children. We take short shallow breaths that result in our chest and shoulders expanding on inhalation. Our abdominal muscles (and diaphragms) are often very rigid and tight.

The goal is to learn to relax the diaphragm, allowing expansion of the lung cavity, so that the lungs may fill more completely upon inhalation. You can learn to do this by lying quietly in your bed after your exercises. Then place one hand on your chest and the other over your belly button. Close your eyes and become aware of which hand is rising and falling as you breathe slowly and deeply. Try to make the hand over your chest remain fairly still, while you allow the hand over your belly button to rise (as if a balloon were filling inside your stomach) each time you inhale, and to fall again as you exhale.

Practice this everyday until you can breath deeply and smoothly with your stomach muscles.

Step Two: Relaxing

The next step is to start relaxing all of the muscles in your body. Start at the top of your head, and focus on letting go of the muscle tension across your forehead. Allow sensations of relaxation to release, and heaviness to flow downward from your forehead,

downward through your face, shoulders, arms, torso, and legs. Imagine all the muscle tightness and tension draining right out your feet. Exhale as you allow the tension to drain away. Every time your exhale let your mind whisper “relax.” Make sure that your breathing is deep diaphragmatic breathing as mentioned above.

Step Three: Guided Imagery in the Brain

Since your goal is “going to sleep relaxed” you need to control the activities of the brain. When you sleep your brain goes into action and often works long into the night. These brain activities often give us dreams. By controlling the things in your mind before you sleep, you can slow the brain activity down and concentrate on peaceful things. Some people like to concentrate on a peaceful scene like a meadow or a waterfall. Some like to think of a peaceful face or a loved one. Some focus their thinking on a loving God. As you slow down your thoughts, continue to relax and breathe deeply.

At first, it may seem difficult to drop off to sleep in this state. If you struggle with this then you will need to work at it each night, until you unlearn your regular pre-sleeping routine, and learn to relax and meditate before sleeping.

Conclusion

Fibromyalgia Syndrome is now the subject of carefully controlled research in many of the leading universities of the world. The results of this work will determine if it can be controlled with new drugs, or if the currently prescribed treatments of stress reduction, exercise, relaxation and improved sleep will remain the best strategies for coping. The secret for those of us with low-level pain is coping. Most likely there is no cure. But I believe that those who follow the simple steps of cleansing the body of toxicants, physically massaging the blocked myofascia and maintaining a good maintenance program can and will live their lives free of most pain.

I am convinced that many of the other aches and pains that come from a poorly functioning body will disappear as you develop a good maintenance program.

The secret to success lies in creative pain management done over a long period. You must be in charge of your own pain management. Only you know where you hurt, and only you can experiment, and find the right body cleansers, the right amount of accupressure, and the right stretching exercises and diet. By working hard, paying attention to your body, and keeping a journal, you will be able to not only track your progress but analyze it, and discover what step you personally need to take to live a near-pain-free life.

No doctor, no physiotherapist and no medicine will ever work a miracle cure for you. You are the secret to your own healing. The basics are included in this book. Other information is available from your physician, on the Internet and in new books that are coming out all the time. The start will be painful as you learn the secrets to cleansing your body and breaking up the myofascial blockages in your muscles. Long term maintenance using accupressure, stretching, massage and relaxation is the secret to keeping you going for a long time to come.

A couple of years ago I never dreamed I could write books. Sitting for hours at a computer was beyond my pain-endurance level. Now I not only write, but I carry on a relatively stressful lifestyle. While I cannot do everything I might like to, I have striven to find the balance between being active and living in pain. Sometimes I step over the edge, and have to repeat the process of cleansing my body of toxicant buildup. Sometimes I stop my maintenance program and slowly slip back into a state of perpetual low level pain. When this happens I have to remind myself of my failure, and start again to seek the fine edge between being pain-free and active. I want to be active. I want to live life to the fullest, and the secret to this is continuing a good maintenance program the rest of my life.

You too can work through the three basic steps and come out

the other side. You too can discover what it means to be almost pain free. The secret is in listening to your self, your body, and working hard at discovering and maintaining a creative pain management program.

CHAPTER NINE

Living on the Edge of Pain

Pain is a personal issue. Only you know how much you hurt. Only you know how overwhelming it can be as pain seeps through the tiniest cracks in your life, threatening your stability, your health and sometimes your life itself. Only you know the added pain you experience as those close to you dismiss your suffering by saying: “Well, you look OK to me!” This type of reaction can hurt tremendously. Some patients have been known to physically attack their doctors when their doctors have responded in this way. Spouses have left partners and families, because of the emotional pain they have felt when those close to them do not understand their struggle, and may even insist that they “get their life together” and that they “stop being lazy and get on with things.”

Everyone suffers pain. When you break a limb or cut yourself, the pain can be sharp and overpowering. Throbbing pain from wounds can overwhelm the body. However, most of us learn to deal with this type of pain, because we know that the pain is short lived. In a few days or weeks we will get through the pain, and be back to normal.

Those suffering from chronic pain however, face a different story. In their minds, they know that while they may lessen or activate the pain through certain activities, pain will be their constant companion. Pain is there during the day. It flares and wanes during the various activities of the day. Some activities, such as entertainment, eating and sex will cause the mind to focus on other things, and they don't notice the pain, but in the end, the

pain returns. Even sleep brings no respite, for during sleep the body twists and turns and every position eventually bringing on pain. In the morning they are tired, and ache all over. More sleep brings more pain. Rising means pains shooting down their legs. The day ahead of them means facing more low-grade pain.

It is no wonder that we who suffer from chronic pain struggle with depression. Moreover, as we struggle with depression the effects of the struggle bring on more pain, and this brings on more depression. Medication for depression brings on more unwanted side effects, and we slowly spiral downward.

I personally have spiraled downward many times. However, I am convinced that if a person can deal with certain factors in his or her life, this tendency can be reversed, and life can become livable, if not enjoyable. You can become active again, and reach goals in life that provide personal satisfaction.

The pain management program described in the previous chapters is designed to help your body overcome the overload of toxicants that you are presently struggling with. As of this writing, researchers don't know what causes blockages of the myofascia and they don't know of any simple cure. Most likely, there is a certain percentage of the population that has a low threshold for handling toxicants. This threshold is most likely hereditary, but no one knows for sure. What we do know is that millions of people who live normal lives in western cultures struggle to handle the amounts of toxicants that their bodies receive and produce. The best solution for these millions of people is to find how much toxicants they can handle and then live within those limits.

All your life, you will live with the potential of slipping back into a life of pain. By choosing to change your lifestyle, you can live an almost pain free life. The choice is yours.

The secret lies in your attitudes and what you do to redeem your situation. In this chapter we cover the following six basic steps:

First: Preparing for major changes in your life

Second: Avoiding pain causing activities and foods

Third: Avoiding high stress causing situations

Fourth: Continue your maintenance program

Fifth: Getting proper rest

Sixth: Building a support network that works

Remember that it is vitally important not to just treat symptoms such as poor sleep, pain and nerves but to treat the causes. The secret is to get rid of muscle waste and not to introduce more waste than necessary into your system.

1. Preparing for major changes in your life

Chronic pain and fatigue can mean a major life adjustment. However, there are things you can do on your own which will empower you:

- Continue to do the things you enjoy. You may have to modify the way you do some activities or do them slower or less often, but do them.
- Accept your limitations. Grieve about how you are different from other people.
- Then get over it. Place all your energy into designing a new lifestyle.
- Have realistic expectations for yourself. Change your work or home environment.
- Change certain habits or physical arrangements in your daily routine. Experiment and discover what makes a difference. For example, pain in your arms, neck or shoulders can be brought on by long hours spent at a computer. If you must work at the computer or desk, then get up from the desk every five or ten minutes and do some stretching exercises or go for a short walk. A more comfortable mattress or firm waterbed may help relieve aching muscles and reduce morning stiffness. If driving in heavy traffic causes your muscles to tighten, try using a backrest or changing the way you sit in the car (support your arms).

- Deal with emotional factors. Emotional factors may also affect your symptoms. Feelings are sometimes harder to pin down and understand than your physical symptoms, yet they may contribute to your suffering. Denial of the very existence of the condition or of the limitations imposed by it is a problem for many people. Trying to carry on as usual can make matters worse.
- It is important that your doctor be aware of the special stresses in your life. He may want you to undergo some standard psychological tests, which will provide information about the ways that you cope with stress. Do not be offended by this suggestion; everyone has stress, including your doctor; and everyone reacts in different ways, some effective, some not.

If you are experiencing negative situations or feelings, both of which can make fibromyalgia worse by disturbing your sleep and causing added muscle tension, psychological counseling may help you cope more effectively. Sessions for the entire family can also be arranged. They can help family members handle the stress of a chronic illness and better understand the feelings of frustration and anger, which emerge under such circumstances. Mild depression can also contribute to symptoms, (chronic pain is depressing), and medication may be needed to alleviate the problem.

2. Avoiding pain causing activities and foods

If you have worked through the cleansing diet and have started working on clearing your muscle knots, then you have progressed a long way down the road to recovery. From this point, you need to monitor carefully all the things that bring pain into your life and deal with them.

For myself, I have had to eliminate certain sports that I only do occasionally. Things like bowling, where I only go two or three times in a year have been eliminated. If I was to regularly participate in bowling, then I would get over the initial pain, and my body

would adjust to the muscles that are being strenuously used and the activity would probably be ok.

It is important to discuss these things with your family, and spouse. You may find that helping move furniture in your house brings on hours of pain. You may find that you can help hang out laundry for only ten or fifteen minutes before you get a bad back-ache. This doesn't mean you shouldn't try and carry your load, but it does mean that you have to pace yourself in these activities, and intersperse them with accupressure, massage or rest.

Some activities, like sex, need to be carefully discussed with a partner, so that refusal to partake in a sexual act isn't taken as rejection, but rather with understanding, as that form of exercise may bring on several hours of unwanted muscle pain afterward.

3. Avoiding high stress causing situations

Stress can cause muscle tension, which puts great pressure on the myofascia to perform. You can eliminate a lot of pain in your life, by avoiding stress. However, stress is also an important part of daily living as our personalities learn and develop as we learn to handle stress.

The first step in handling stress is to avoid all unnecessary stress. Try to avoid putting yourself into stressful situations if you don't have to. For instance, if driving during rush hour traffic is extremely stressful for you, take a longer round about route, or stay put for a while and take a gentle walk in the park while the traffic clears a little.

The second step is to find ways of relaxing even in the midst of stress. Watch yourself, catch yourself when you are stressful, and focus on relaxing.

4. Stretches and Exercises

Stretches and exercise must become a part of your daily life. You need not exercise hard. Gentle exercises, short walks, and fresh air

are what you need. They will help you relax, gently loosen up the roadblocks in the myofascia, and stimulate the circulation system in your body. If you try strenuous exercise, then it will just cause more pain.

If the thought of exercise frightens you, consider exercise in a warm pool. Visit your local swimming pool, or check out a swimming center with a Jacuzzi. Some people can tolerate some walking. Start out very slowly and gradually increase to whatever you can handle.

Gentle stretching in the morning and at bedtime can alleviate pain and stiffness . . . just be very gentle.

Get enough rest and relaxation. Adequate sleep is very important . . . sometimes 10 hours or more is required. Also take naps as required.

Pace yourself. Take frequent breaks during routine activity.

Use proper body mechanics. Always sit up straight and maintain good posture when standing or walking. Stay warm. Cold weather aggravates our symptoms.

5. Continue your Maintenance Program

Accupressure and massage will need to become a regular part of your life. If you have a spouse or family member who can massage you, and is willing to do so on a regular basis, you have a wonderful resource. Don't squander it. I have taught my young children to walk on my back, taking small steps, with one foot on each side of the backbone. The on and off pressure of the child slowly stepping up and down, and moving up and down the back muscles works wonders.

However, please be considerate. Your spouse or children must never be expected to help. If they want to help, you are blessed. If they don't, then they are probably normal. Most people these days have trouble fitting all they want to do into their hectic schedules, and massaging or walking on someone's back is not part of most people's life.

The best solution is massaging your own body, using accupressure to massage your own back. On the other hand, if you have an unlimited budget and schedule, you may want to take daily trips to a physical therapist and or a massage therapist

6. Getting proper rest

People with FMS often have trouble with sleep. Low level pain throughout the night can rob them of a good night's sleep. First, getting to sleep can be a problem. During the day, low level pain can be masked by the activities of the day. At night, however, aching muscles can easily rob a person of sleep.

Secondly, even if one does get asleep, low level pain will often rob the body of the deepest levels of sleep. There are various levels of sleep and a person needs to rest well in order to drop into a deeper and deeper level of sleep.

Many people with medical or psychological problems never reach this deep level of sleep. FMS sufferers often sleep with their muscles tense and low level aching acting all night. Consequently, restful sleep eludes them. Some people resort to using sleeping medication. In my own case, I use sleeping medication only if I cannot get to sleep. I usually use a mild form of antihistamine to help make me sleepy. The drawback to using medication is that I usually feel totally exhausted when I wake up in the morning.

As an alternative I have developed a program to help me relax before I go to sleep. If you have trouble getting to sleep, try these things:

Deep Breathing

Don't hyperventilate, but practice deep rhythmic breathing Relax each muscle separately. Start at the top of your head and focus on each muscle and limb, causing each one to relax. If they tense up again, go over your body a second or third time until you have reached a point of relaxation

Focused thoughts

Try and take your thoughts off of the activities of the day. Focus your thoughts on something relaxing. Picture in your mind a relaxing scene, perhaps a peaceful lake, meadow or deserted beach. Slowly put the details in place, noticing the beauty of nature. Your picture should have no or few animals in it.

Taking naps

I have discovered that some people can take a five-minute nap and really enjoy it. I find that when I sleep my body metabolism slows and I am groggy and foggy. It usually takes several hours to get my body back to functioning properly again, and the fiberfog to clear. Then when I want to sleep at night, I find that I cannot get to sleep because my body clock is all out of whack.

If you cannot take naps, or you find naps disturb you, don't worry. A good replacement for a nap is a five-minute accupressure work out, or a nice relaxing massage.

Schedule

It is important to work out a good sleeping schedule for yourself and keep it.

Don't be tempted to stay up at night to watch a late night movie, because the disruption to your schedule can rob you of deep level sleep for several nights to come.

If you can get your body to relax, and to have several consecutive nights of deep level sleep you will have made a significant step in fighting against FMS and related syndromes.

7. Building a Support Network that Works!

Get informed. Help people in your life get informed. Let them read this book, so they also begin to understand. Meet other people, locally and via the Internet who also suffer from chronic pain.

Take an Active Part in Treatment

In order for any of these (or other) treatments to be effective, you must become knowledgeable about your condition. Many communities now have seminars and/or self-help (support) groups. The Internet is a good source of information about the options available to you. Use your browser.

Take pain medication only if you need it. If you are in great pain, you might adopt the following credo and get used to the idea that you may have to be quite assertive in order to have your needs properly met in an uninformed and sometimes unsympathetic society:

When you are younger, your body is better able to battle pain. Your body makes a natural narcotic to fight pain. My suggestion is that children, adolescence and young adults should learn to fight pain with exercise, massage, tennis ball techniques etc. Then as the body ages and its ability to fight pain diminishes, medications can be introduced to help.

My experience has shown that younger sufferers of fibromyalgia struggle with muscle spasm more than other symptoms. Then as the body ages, and as physical and emotional stamina wane, fibromyalgia patients suffer more from fatigue, depression and throbbing pain that can only be squelched with stronger and stronger medication.

Get a physician who is willing to work with you. It can be a real challenge to get a supportive physician and proper treatment. Many physicians have trouble dealing with patients they cannot cure. Remember that they work for you. You can fire your doctor any time you are dissatisfied. If they simply prescribe pain medication and want to see the next patient, then find another doctor. Be careful of falling into the trap of taking pain medications to mask your pain, because myofascia that is overloaded for long periods can be damaged. You will want to work at cleansing the body and physically assisting the myofascia first. Remember that

you will always have some pain. This is normal. Learn to live with as much pain as possible.

In dealing with insurance companies, learn to do things their way. File all the forms and get the best from the coverage you have.

Some last minute advice from others who have suffered from FMS and survived:

- Protect yourself from the elements in your life that sap your energy.
- Do something for yourself every day.
- Help others . . . especially people with fibromyalgia. They need it and you will feel good about being useful.
- If you become withdrawn from the world, try to get back into living.
- Do something . . . preferably something you enjoy.
- Accept that you might be at least partially incapacitated. Use devices and aids to save your energy whenever possible.
- Recognize that help with the emotional aspects of your life may be a very important part of your treatment program.

You may have to modify your lifestyle by adding relaxation and exercise to your routine. However, most people with fibromyalgia continue their “normal” activities to some extent. Again, this varies from person to person. Don’t be intimidated by those who tell you to do what you cannot, and don’t be self-critical if you are honestly functioning at your maximum level under the circumstances.

- Set margins in your life.
- Deal with mourning . . . your old life is gone, and the new life isn’t very wonderful.
- Fight denial/isolation thinking. Don’t think “I readily don’t have this! I don’t want to talk about it!”
- Fight anger. Don’t go around asking “Why me?”
- Fight Bargaining: maybe if I do this, it will go away),
- Fight depression. Never think, “My life isn’t worth much.”

Try to arrive at acceptance. Think, “If I’m fortunate and work hard, I can!”

- Achieve the positive attitude of: “OK, I have this, now lets see what I can do about it.”
- Take control of your life and your own healing
- Work with a health team: your doctor, you physical therapists, and a network of others who are also suffering
- Educate yourself
- Set realistic goals.

Pursue a Simple Lifestyle

The more simple your life style, the less stress it will bring into your life. Accept the fact that you may have to change things in your lifestyle to help you deal with pain. Perhaps you will no longer be able to watch a late night movie. Stop smoking. Ask others not to smoke in your presence. Stop drinking. Take control of the medications you are taking.

Self Esteem

Your Worth in Your Own Eyes

- Stop negative perceptions. Pay attention to your own body. Visualize yourself being happy and relaxed. Form positive thoughts.
- Keep a journal of your progress and record the positive things in your life in your journal for reviewing later.
- Make signs around your house that display positive statements that you have seen or you develop
- Meet with a qualified counselor to help you work through raising your self-esteem and confidence.
- Do something you enjoy, that makes your feel better. This may be things like: taking up painting, cleaning your house, taking time for walks in the woods, playing a musical instrument, reading a light novel etc.

- Do something that makes you laugh. Hang out with funny friends. Enjoy a funny book or TV show.
- Do something nice for yourself. Buy yourself a gift, perhaps some flowers or a new after-shave lotion. Take an afternoon off for a nap, or to read a good book. Take time to watch a sunset.
- Do something special for someone else. Read a child a story, shop for a sick friend, send an “I’m thinking about you” card, visit someone who is infirm, buy someone an unexpected gift.

Your Worth in your Family’s Eyes

This takes guts, but you need to do it. Begin by spending time communicating with your family. Communicate to them what you are going through. Listen to them and discover what they are also going through.

Find out how members in your family best respond to communication. Do it over a dinner, or in a quiet time alone, or through a letter or note. Most importantly, let them read something substantial, like this book or other books you find on the subject. Get a diagnosis from a doctor so that your family will take you seriously. Keep your family informed about the things you are doing to do in order to help yourself.

Talk to your family about how you feel: That sometimes you feel depressed and wonder if you are worth anything. Tell your family how much it hurts you when people seem to think that you are not sick and that you don’t feel pain. Tell them how angry this make you feel inside, and apologize for any anger you have shown, because you know that they don’t really understand or that it may be difficult for them to understand. Be open to receiving help. Verbalize your thoughts so others know how you feel. Bottling them up inside only creates more tension.

Think of how your family must feel

You look fine, but want to sit or lie down a lot. You don't pull your share of the load like before. You aren't as much fun to be around as before. Perhaps you are complaining a lot more about "aches and pains" than before. Some of these things can frustrate and hurt your family and friends. It's going to take a lot of guts and hard work but you need to concentrate on restoring and building relationships with those in your family. I hope to soon release a book that focuses on this subject which I have tentatively titled "*The Road Back*." It should be available on the Internet shortly.

Your Worth in the Eyes of the Community

It is easy to feel sorry for yourself. You have FMS or MPS and struggling with it can take up a great deal of your time. As you will have discovered in this book, your lifestyle will revolve around regular daily maintenance just to keep yourself free of pain. In many cases, people with FMS and MPS begin to lose their self worth. They feel like they are a drain on society. If you are starting to feel this way, think again. Once you have discovered how to live a life that is free of pain, you have a valuable experience to share with hundreds of other people in your community. Your experience in learning how to live on the pain free edge of life can be very beneficial to others. Join or start a FMS support group. Don't join in order to get support, but rather to help other people! Your experiences are valuable. You can be the key to helping others find the same freedom from pain.

Your Worth in God's Eyes

It is often common for people with handicaps or chronic conditions to question their condition. Why did God make me this way? In my years of working with Christian organizations helping

handicapped people I have often come across this question. It is a question that each of us needs to find an answer to.

For my self, I have come to realize that in the normal course of life on planet earth, millions of people suffer from many different ailments and handicaps. The reason for this pain and chaos can be found in man's broken relationship with God. The Bible tells us that sin, sickness and death are all a result of man's fallen condition. Everyone suffers from these things. The only place that has no sin, sickness or death is heaven. As a person on planet earth, I suffer from certain things. My neighbors suffer from others. It is normal to experience pain. No one lives a pain free life. Only fictional characters in movies and TV seem to be able to live a life without pain.

In working this through I have come to realize that my pain is not a result of any specific judgment from God. I am simply one of millions of people who have a low threshold to toxicants. Therefore, I have to be careful with my lifestyle. FMS and MPS are simply things in my life that I have to face and carry. The important issue remains. How do I deal with these things? Am I angry with them? Do I use them as a cop-out?

Alternatively, do I face my struggles squarely and realistically or do I allow my pain to interfere with my relationships with people around me? Do I allow my pain to affect my relationship with myself and with God? There are many good Christian counselors around the world who are prepared to help people work through these issues. If you feel you need help in this area, my advice is to seek out a registered Christian counselor.

Dealing with Escapism

There are lots of ways we can escape. Some folk like to escape the pressures of working in the city by spending a weekend at the lake. Students may like to escape the pressure of an upcoming exam by hanging out with friends or watching a movie. Escape is a common way of dealing with pressure. Time away from the pressure

helps our bodies recuperate and deal with the situation better when we re-enter it.

However, it is possible for those suffering from chronic pain to develop an escape-centered life. This type of lifestyle is actually a form of denial. As a child, I would spend hours daydreaming. While some daydreaming is normal in childhood, I discovered on later reflection that my daydreaming was a way of escape. I wanted to escape the never-ending struggle with low-grade pain. Actually I had discovered that the pain was not “never ending.” I could escape into some form of escapism, and the pain would be forgotten or ignored. Consequently, I found myself quickly entrapped by the lure of escapism. The attraction was the same, whether the escape was in the form of reading novels, watching TV, watching movies, daydreaming, or escaping into the fantasy world offered by pornography. If it removed me from my situation into another world where there was no pain, I was attracted to it. Even eating became a form of escapism, because when I was eating, I wasn't hurting.

The danger here lies in the fact that when you escape, you actually deny. Denial is a form of psychology where you force your brain to accept a lie. It seems to work for a while, and then it backfires in various other forms as your mind struggles with living a life that is a lie.

Learning to live honestly, in a real world, where you do actually hurt can be a freeing experience. You need to both fight the hurt by taking pain management into your own hands, and accept the hurt, by not letting it affect you emotionally.

I've provided the materials in this book to assist you in developing your own creative pain management program. A program where you learn to live on the fine edge between a restrictive lifestyle and freedom from pain. I firmly believe that the vast majority of people suffering from FMS and MPS can live lives that are relatively pain free. The choice is yours. Will you pursue a creative pain management program or will you simply put this book on a shelf and forget it?

RESOURCES

These appendixes include information for keeping informed. Please remember that this information is shared from a personal point of view. The bibliography includes many articles and books. I suggest you look over the materials for two reasons. First, acquaint yourself with what sort of research is being done in medical circles. Secondly, look for books and materials you may want to read, and then look for them in your local library or bookstore, or ask your doctor where you can find professional journals.

In the Appendixes on Non-traditional Approaches and in the Internet sites, I am simply providing you with information. There are many people out there claiming their techniques work. I do not promote or condone anything in these sites, they are simply for your information.

APPENDIX A

Non-Traditional Approaches

I have split this appendix into two parts. The first part lists some of the more accepted non-traditional approaches, and the second lists new, emerging, or controversial non-traditional approaches. Remember that in many cases the more traditional approach is for doctors to prescribe a chemical to help the body. In many cases these chemicals work, but in some cases the chemicals also have adverse side effects. Non-traditional approaches usually do not use medication, but rather rely on other techniques and philosophies.

Accepted non-traditional approaches

Chiropractic Care

Chiropractors are trained in manipulating the bones in the body to align them correctly. This alignment can put less strain on the muscles and thus bring a measure of relief to those with chronic pain. As with all professionals some chiropractors understand FMS and MPS and some don't. Choose carefully. People have said that chiropractors using a small "Activator" often have the best results in helping those with FMS and MPS.

Massage Therapists

Massage is becoming popular these days. There are many different forms of massage many of them originating in the east and Middle

East. Registered Massage Therapists can greatly help FMS and MPS patients. The problem is that patients usually need a lot of massage, frequently, and this is usually expensive. If you have access to a Registered Massage Therapist, this is the best way to go. If you do not have this type of access, you can still resort to accupressure techniques and exercise that will work almost as well.

Electro-therapy

A number of physiotherapists are excited about Electro-therapy. The therapy uses two pads with wires that are attached to your body, and mild doses of electricity are passed through the muscles between the pads. This therapy has proven useful and helpful for people. Apparently, the electricity stimulates the muscles, and this stimulation could aid in helping the muscles release toxins and move neurotransmitters more efficiently.

Other non-traditional approaches

In the mid 1980s I had the opportunity to work for almost four years in the Yemen Arab Republic with a medical team. I moved my family from Amman Jordan to the city of Sanaa, in what was then known as North Yemen. During those years I had a number of opportunities to observe Yemeni traditional medicine and was horrified in what I saw. True, there were some things that we in the west could learn from, but for the most part the village Yemeni healers understood nothing of hygiene, cleanliness or science. Their practices included things like burning and even beating.

However, in the midst of their attempts to heal people, they did do some things that were of actual benefit to those who were suffering.

I have also discussed local forms of medicine with people who are working in many remote parts of the world. Through this informal research, I have noted that there are a number of patterns around the world. First, much local medicine is based on religion.

Beliefs about spirits, life after death, special attributes given to fire, water, earth etc., and beliefs about disharmony with nature and how that can be restored. While some of this may sound intriguing, in the end, much of it is similar to the old western practices of blood letting and cutting into the skull to release pressure. All of them seemed to have some scientific ring to them at the time, but now we know them to be based on false suppositions.

Therefore, with this in mind, I would like to warn you about falling in love with non-traditional medical practices. I do not recommend most of the practices below. Modern doctors do not recognize many of them and many of them have been tested in various ways with limited results.

However, there are a number of people who readily claim that these nontraditional medicines work. I'm sure that there is some merit in all of them but please be warned about spending a lot of money on any of them, or accepting all of their teachings as accurate. In this volume I have tried to discover some of the useful practices, such as accupressure, that are practiced around the world, and have tried to show the scientific evidence for their success. It is not based on a particular religious worldview, or on a hypothetical balancing with nature. Thus, in separating the practice from other religious backgrounds, and demonstrating how they work scientifically, I believe that they are beneficial. Many of the practices below cannot be understood scientifically, and cannot be separated from the eastern religions they originated from.

I have listed these in alphabetical order:

Acupuncture

Acupuncture has been around for a long time, and it is practiced in a number of countries. There have been mixed reviews about acupuncture's abilities. Acupuncture involves inserting needles into the skin at different depths, along imaginary lines called meridians. It is based on the theory of balancing energy and body harmony. Some scientists believe that acupuncture may raise endor-

phin levels in the body (endorphins are the body's own natural painkillers), thus giving temporary relief from pain.) The question remains: does acupuncture provide any long term benefits other than the temporary relief of pain? If you try this, make sure that you have a qualified, certified acupuncturist. In the USA they should be certified by the National Commission for the Certification of Acupuncturists.

Ayurveda

This form of treatment originated in ancient India and has been around for many years. It is based on a theory of spiritual and physical balancing. It uses a mix of lifestyle changes, diet modifications, enemas, vomiting and bloodletting. The theory is based on balancing five elements: earth, air, fire, water and ether. The goal is that patients heal themselves after the body is balanced.

Biofeedback

This form of training teaches you to control parts of your body that you didn't know you could control. The most commonly used form of biofeedback is electromyographic (EMG) biofeedback. In this therapy, machines are attached to your body to monitor blood pressure, skin temperature and other biological and neuromuscular activities. You then learn how to influence your blood pressure, temperature etc by making changes in your mental and emotional states. Some claim that this therapy is useful for learning to relax simple muscle tension.

Focusing

Focusing is a technique that uses a series of well-defined questions or steps to help you focus on what are the most important issues at any given time, not what you think you should do. The sequence

then connects you with the feelings generated. The theory is that when you connect with your feelings, and explore them, positive changes can be made.

Hypnotherapy

Hypnotherapy is a form of self-hypnosis that claims to help you focus your energy. It is supposed to help you banish negative thoughts and enhance your own creativity. It is similar to trying to capture daydreams and put them to work for you in a positive way.

Pet Therapy

Some people with FMS or MPS claim positive effects when they have a pet. Obviously, if you have social or emotional needs, having an animal to help fill that void can be rewarding. Spending time with your pet can be relaxing, and can help add positive aspects to your life. Pets are not critical, threatening or judgmental and they don't try to change you. Many pets respond to love and encourage play and laughter. Some people even project positive understanding feelings on their pets, talking to them as a close confident, or friend. Having this type of relationship helps them both emotionally and physically.

Polarity Therapy

This therapy is based on the theory that energy fields are everywhere, and that the human body has energy fields within itself and surrounding itself. Wellness is defined as harmony between your energy fields and the energy fields in the environment. Illness is related to blocked energy flow. Healing supposedly takes place when the flow of energy is redirected to find a harmonic balance.

Qi-Gong

It is often called Chi Kung in the USA. The term in Chinese means, “breathing exercise.” The exercises are designed to massage the organ systems and can be tailored to affect your specific problem areas.

Reflexology

This form of treatment treats the feet and or the hands. It is based on a theory that there are areas of the hands and feet that correspond to areas of the body, including the organ systems. These areas are treated with pressure point therapy to heal the corresponding internal body part. It is often done after soaking the feet in a herbal bath.

Subliminal Tapes

It has been claimed that people with FMS/MPS complex respond well to subliminal tapes. The concept of these tapes is to play them while you are working, especially around the house. The audio tapes have subliminal messages on one side and the same message with the audible words on the other side. People with FMS/MPS often have hypersensitive neurotransmitters and thus respond well to this type of therapy. If you are unsure of using this treatment, try simply listening to quiet music to sooth the mind and body. In addition, if you attend a church, you might try listening to sermon tape while in the house or car, even if they are played quietly in the background.

Tai Chi Chuan

This is a form of exercise that claims to enhance mind/body communication, balance and harmony. It involves slow fluid circular motions that strengthens lower body muscles and can improve

coordination and balance. As with all exercise programs it increases flexibility, improves posture, and promotes relaxation and focus. There are various forms of Tai Chi, all of them part of the East Asia martial arts groups.

Yoga

There are many forms of yoga, all of them requiring you to sit in extreme positions for long lengths of time. This puts undue pressure and strains on joints and muscles and can be counter-productive for those with FMS and MPS.

APPENDIX B

The Medicine Game

I do not promote the use of any medication for treatment of FMS or MPS. However, in extreme cases, medication can be helpful. Please do NOT TAKE ANY MEDICATION without the supervision of a qualified physician. Doctors are trained in the science of medicine, and their help is a must if you wish to take medication.

Having said this, there are several types of medication you may find helpful. First of all, if you are experiencing sufficient pain, so much so that it interferes with your sleep, then you may want to discuss with your physician the possibility of using some sort of sleep medication. I have found that the occasional use of an antihistamine when my sleep patterns are sufficiently out of kink is helpful. I use Chlorpheniramine Maleate 4 mg, which contains Chlor-Trimenton. I also have found that occasional use of Ibuprofen(Advil) before sleeping is also helpful. Otherwise, I reserve pain medicine for use during extreme flares of muscle tension when accupressure methods can't keep up with the tension in my body. In addition, muscle relaxants are reserved for those few occasions when a flair creates direct pressure on a nerve. These occasions are usually the result of doing something stupid, like helping a friend move house and assisting with moving the refrigerator.

In this chapter, however, I have compiled a list of the medications that I am aware of that doctors may prescribe for patients with FMS or MPS. I mention what they are used for, and mention some concerns that people have expressed either to me directly, or to the medical profession in general. Remember again,

that this chapter is simply for your information, and is not intended as a guide or a recommendation to take any particular medication.

WARNING:

Please remember that I am not infallible. Please discuss the use of all medications with your physician. Please tell your doctor what non-prescription medications, what herbs, and what vitamin supplements you are taking as well as all medication. If you find something in the list below, that concerns you, about the medication you are taking, or if you think there may be a better medication, then talk to your doctor. If you are not satisfied, then talk to a second doctor. If you are still not satisfied, then talk to other folk in your network. Nevertheless, in the end, remember that your doctor specialized in medications and I and the folks in your support network do not have this specialty. We can only gather information, and speak first hand, about how we have personally responded to these medications.

Medications

No single medication alleviates all FMS or MPS pain and other symptoms. Many sufferers of pain have looked to doctors to provide a simple pill to cure their ills. Be assured none exists, but when it is discovered the Internet Web sites specializing in FMS will be sure to announce it.

You can, however, fool yourself into believing that by taking large amounts of pain medications you have beaten the pain. You will be pain free and you can operate this way for some time. However, because you have not treated the medical problem, just the feeling of pain, you can actually be doing your body damage. You can be over using certain muscles and damaging the myofascia and other muscle tissue. Then when you stop taking the pain medication, you are faced with a worse scenario than when you started.

Secondly, you may discover that your body slowly becomes immune to many pain medications and that the dosages will have

to be increased over time. Eventually they will lose much of their effect, especially if taken over a long period. At that point you will have damaged your body so much, that there is no longer a solution to dealing with the pain.

So remember, that taking the easy way out at the beginning can create more complex problems farther down the road. Also, remember that most drugs have side effects, and sometimes they can mimic the condition they are intended to treat! Therefore, it is important that physicians monitor your medications closely. Some doctors however, are not terribly careful in the medications they prescribe. It is therefore important that you are informed about the medication that you are taking. It takes time, persistence and good communication between doctor and patient to determine the proper balance of exercise, relaxation, and medication (type and dosage/s). Many variables are involved, and both of you will have your patience tested over time.

Drugs such as aspirin and Advil are not particularly effective and seldom do more than take the edge off FMS pain. In general, narcotic painkillers containing codeine and other similar substances should be avoided, as in the long run they down regulate the body's production of its own pain produced substances called endorphins (see page 157 to discover how ineffective some drugs can be.)

There is quite a list of available medications, with new ones coming along all the time. The difficulty is that NONE of them provides anything like total relief. Each medication will treat a particular set of symptoms, but may create other difficulties. Getting the right balance of medications is hard.

Rather than try and group the medications into classifications, I have decided to list them in alphabetical order, and then include with them the odd notes that I have collected over the years. Remember that most drugs have two or three names. They have their chemical name, and then they have the brand name that various drug-producing corporations put on them. In such cases, I have included the same information under each name.

Acetaminophen (or Aspirin) Analgesic or Pain Medication

Non-steroidal anti-inflammatory can cause stomach upset and some patients have developed bleeding ulcers. They can also produce tightness in the chest, itching skin, swelling of the limbs, malaise/fatigue/loss of appetite, blurred vision, and mental confusion—many of the symptoms normally associated with FMS.

Recently a possible replacement for aspirin, ibuprofen and acetaminophen has been developed which appears not to have these side effects.

Celebra is expected to be the first of a new class of drugs called cox-2 inhibitors, so named because they block the inflammatory enzyme cyclooxygenase.

Aspirin and similar anti-inflammatory drugs do that too, but they go too far, also blocking the cox-1 enzyme that protects the stomach lining. Celebra's manufacturer, Monsanto Corp.'s Searle unit, is expected to ask the U.S. Food and Drug Administration for an expedited six-month review shortly. If approved, the drug could be on the market by sometime in 1999. If approved for rheumatoid arthritis, doctors could be free to prescribe it for a number of other painful conditions as well. Merck & Co. is about six months behind in developing a rival painkiller named Vioxx. Glaxo Wellcome PLC, Johnson & Johnson and Roche Laboratories also have cox-2 drugs on the way.

Advil (non-steroidal anti-inflammatory drug) (Ibuprofen)

Used alone, these medications have not generally proven effective in reducing FMS pain. However, they do help some people. The explanation offered for this is that there may be some arthritis, osteoarthritis or tendinitis present in such cases or that placebo effect is at work. It is best to try NSAIDs (available over the counter) and see if they provide any relief.

Alprazolam (see Xanax)

This is a Benzodiazepine anti-depressant and anti-anxiety medication.

Ambien

This is a hypnotic sleeping pill used for short-term insomnia. There have been however, some reports of serious depression when using this medication.

Amitriptyline (see Elavil)

This is a Tricyclic Anti-depressant.

Ampligen

Ampligen may become the first FDA-approved drug for Chronic Fatigue Syndrome. It is so new that I have not been able to find much information about it.

Anafranil (see clomipramine)

This is a Tricyclic Anti-depressant

Atarax (hydroxyzine HCl)

This drug suppresses activity in some areas of the central nervous system to produce an anti-anxiety effect. This is really an antihistamine, and may be useful when itching is a problem.

Aurum

It is a topical analgesic cream composed of methyl salicylate, camphor and menthol, and, similarly, has helped reduce pain in some FMS patients. Pharmacists may recommend other topical creams with similar properties. There are many on the market that may be as somewhat effective.

Benadryl (diphenhydramine)

This is a helpful nonprescription sleeping aid. It is actually an antihistamine, and is safe to take during pregnancy. However, about 20% of people who take the drug become more excited rather

than sedated. Many people who find Benadryl stimulating rather than sedating will have the same response to Pamelor, Paxil and Ultram

BuSpar (buspirone CH1)

BuSpar may improve memory, reduce anxiety, and regulate body temperature. It is an anti-anxiety drug and generally considered not as sedating as other similar medication.

Celebra

This is a new drug. It is expected to be the first of a new class of drugs called cox-2 inhibitors, so named because they block the inflammatory enzyme cyclooxygenase. Aspirin and similar anti-inflammatory drugs do that too, but they go too far, also blocking the cox-1 enzyme that protects the stomach lining. Celebra's manufacturer, Monsanto Corp.'s Searle unit, is expected to ask the U.S. Food and Drug Administration for an expedited six-month review shortly. If approved, the drug could be on the market by early next year in the United States and late 1999 abroad. If approved for rheumatoid arthritis, doctors could be free to prescribe it for a number of other painful conditions as well. Merck & Co. is about six months behind in developing a rival painkiller named Vioxx. Glaxo Wellcome PLC, Johnson & Johnson and Roche Laboratories also have cox-2 drugs on the way.

Codine (narcotic pain medication)

While there are people like the Chronic Pain Outreach Association in Bethesda MD valiantly fighting for a loosening of restrictions on the use of these medications including codeine, morphine, methadone, etc., the fact is that they may be contraindicated in FMS. They disturb Stage IV sleep and create a host of very troubling side effects. The problem of addiction or dependence is really secondary, almost academic. The fact is they are simply not effective for many people with this condition.

Clinoril (non-steroidal anti-inflammatory drug)

Used alone, these medications have not generally proven effective in reducing FMS pain. However, they do help some people. The explanation offered for this is that there may be some arthritis, osteoarthritis or tendinitis present in such cases or that placebo effect is at work. It is best to try NSAIDs (available over the counter) and see if they provide any relief.

Clonazepam (see Xanax and Klonopin)

This is a Benzodiazepine anti-depressant and anti-anxiety medication.

Cyclobenzaprine (Flexeril)

Tricyclic Anti-depressant and Muscle Relaxant

Cytomel (T3)

Cytomel is a hormone—not T4 (synthroid or eltroxin) . . . for those interested in pursuing the hypo-thyroid theory. There are other hormones from the field of alternative medicine—DHEA, melatonin, etc.—the use of which are supported primarily by anecdotal evidence and research which has been largely ignored by mainstream medicine. The list of alternative compounds which find anecdotal support from some people is a long one and includes taurine, magnesium, potassium, pycnogenol, 5 htp, St. John's Wort, etc. Opinion is divided.

Darvon

Analgesic or Pain Medication This medication is generally prescribed for those requiring a greater analgesic effect than acetaminophen can deliver, and/or those who are allergic to, or cannot take, aspirin. The role of narcotic pain relievers in fibromyalgia is to temporarily relieve of an exacerbation of FMS pain. However, some researchers are challenging the prolonged use of these drugs.

Desyrel (Trazodone)

The usual dose is 25 mg to 50 mg per night. Desyrel is as effective as the other anti-depressants, however, is chemically different and may be less likely to cause side effects. Desyrel is a mild stimulant and may make a sleep problem worse if combined with a tricyclic anti-depressant at night. This is a Tricyclic Anti-depressant. Tricyclic anti-depressants have side effects that may be intolerable for some people. These include constipation, drowsiness, dry mouth and eyes, headache, heart rate abnormalities, increased sensitivity to sunlight, morning “hangover,” and weight gain. This drug should be taken with food.

Diflucan (Fluconazole)

This is an antifungal medication that penetrates all of the body's tissues and even the central nervous system. This medication is used if a yeast infection is considered the root of the problem. It is a very expensive medication.

Doxepin (see Sinequan)

A Tricyclic Anti-depressant

Effexor (venlafaxine hydrochloride)

The usual dose is 27.5 mg twice a day. This dosage can be adjusted, depending on effect. Effexor is not directly related to the tricyclics, however, it does boost serotonin and has tricyclic properties. The typical side effects are nervousness, anxiety, insomnia and increased blood pressure. This is a serotonin boosting medication. Other side effects of serotonin boosting medications include anxiety/nervousness, headache, insomnia, mood swings, sexual difficulties, nausea and stomach distress. Warning. Practitioners have recently identified something call the Serotonin Syndrome (yes, yet another syndrome) which appears in some sufferers using this standard protocol. Apparently at high dosages or on interacting, can produce dangerous adverse reactions—agitation, behavioral changes, exaggerated reflexes, profuse sweating, tremor, diarrhea,

and lack of co-ordination, fever and shivering. If recognized and properly treated, symptoms can be brought under control. If not recognized and properly treated, well, you know it's all in your head!

Elavil (Amitriptyline)

A dose is typically 2.5 to 50 mg per night. Elavil is known for pain relieving effects and ability to help sleep. This medication should be taken early in the evening or half-dose in the evening and the other half at bedtime to avoid morning hangover. It is a Tricyclic Anti-depressant. Tricyclic anti-depressants have side effects that may be intolerable for some people. These include constipation, drowsiness, dry mouth and eyes, headache, heart rate abnormalities, increased sensitivity to sunlight, morning "hangover," and weight gain. While this medicine is an antidepressant and inexpensive, it may cause Restless Leg Syndrome and craving of carbohydrates usually resulting in weight gain.

The effectiveness of Elavil and Xanax is increased in some patients when used in combination with one NSAID, ibuprofen (up to 2400 mg per day). No one knows why this is sometimes the case. EMLA is a prescription only topical cream that may help when applied to muscle knots and trigger points. It is a mixture of various topical anesthetics.

Flexeril (Cyclobenzaprine)

Dose is usually 10 to 30 mg per night. A tricyclic drug similar to Elavil with muscle relaxant qualities. May be taken along with Elavil to provide muscle relaxant relief. This medication usually reaches its maximum effect after one to two weeks of continuous use. This is a Tricyclic Anti-depressant. Tricyclic anti-depressants have side effects that may be intolerable for some people. These include constipation, drowsiness, dry mouth and eyes, headache, heart rate abnormalities, increased sensitivity to sunlight, morning "hangover," and weight gain. This medication can sometimes stop spasms, twitches and tightness of some muscles. It is related

chemically to Elavil, and generates a stage-four sleep, but may cause stomach problems and a spaced out feeling.

Fluoxetine (see Prozac)

This is a serotonin boosting medication.

Fluori-Methane

This is a spray designed for spray and stretch treatment. It can inhibit pain impulses and allow for more vigorous stretching.

Guaifenesin

Guaifenesin is an over the counter medication commonly used for coughs. However cough medication usually has sugar, alcohol and other medications included. Guaifenesin can be found in pill form but is usually a prescription medication. This is an new experimental medication, and different people experience different results, even at different times in their treatment. Guaifenesin has the ability to remove excess uric acid from the body. Thus, it works well as a cleanser in some people. Recently Guaifenesin has received a lot of attention and many Internet Web sites focused on FMS also carry information about Guaifenesin. I personally believe that it's success with FMS and MPS patients is because of its body cleansing characteristics.

Hismanal (astemizole succinate)

This is a strong antihistamine given for allergies. Do not take this medication at the same time as ketaconazole!

Ibuprofen (non-steroidal anti-inflammatory drug)

Used alone, these medications have not generally proven effective in reducing FMS pain. However, they do help some people. The explanation offered for this is that there may be some arthritis, osteoarthritis or tendinitis present in such cases or that placebo effect is at work. It is best to try NSAIDs (available over the counter) and see if they provide any relief.

Imitrex (sumatriptan)

This is used for treating migraines. It comes in pill and injection solution. It may provide relief in 20 minutes from migraines and alleviate some of the nausea, head pain and light sensitivity. Imitrex should not be taken within 24 hours of taking ergot. Imitrex is very expensive.

Inderal (propranolol HC1)

Inderal is used in the prevention of migraine headaches. It may cause a drop in blood pressure, and antacids will block its effect.

Ketamine (narcotic pain medication)

While there are people like the Chronic Pain Outreach Association in Bethesda MD valiantly fighting for a loosening of restrictions on the use of these medications including codeine, morphine, methadone, etc., the fact is that they may be contraindicated in FMS. They disturb Stage IV sleep and create a host of very troubling side effects. The problem of addiction or dependence is secondary, almost academic. The fact is they are simply not effective for many people with this condition.

Klonopin (klonazepam)

This is an anti-anxiety medication, and also an anticonvulsive antispasmodic medication. It is used when treating Restless Leg Syndrom and night time teeth grinding.

Lidocaine Jell (a topical analgesic cream)

While Lidocaine injections in the TRPs have not proven successful in the long term, some have found Lidocaine jell (2%) in a product named Xylocaine to be less invasive and of temporary relief when applied externally to a small area of the body. Available OTC (without prescription), it numbs the point to which it is applied for about a half-hour. It costs about \$10 Can (tax included) for a very small quantity and may not prove satisfactory to everyone. However, it does seem to interrupt the pain cycle to provide a brief respite.

Methecarbamol (see Robaxin and Delaxin)

A Muscle Relaxant

Methodone (narcotic pain medication)

While there are people like the Chronic Pain Outreach Association in Bethesda MD valiantly fighting for a loosening of restrictions on the use of these medications including codeine, morphine, methadone, etc., the fact is that they may be contraindicated in FMS. They disturb Stage IV sleep and create a host of very troubling side effects. The problem of addiction or dependence is secondary, almost academic. The fact is they are simply not effective for many people with this condition.

Morphine (narcotic pain medication)

While there are people like the Chronic Pain Outreach Association in Bethesda MD valiantly fighting for a loosening of restrictions on the use of these medications including codeine, morphine, methadone, etc., the fact is that they may be contraindicated in FMS. They disturb Stage IV sleep and create a host of very troubling side effects. The problem of addiction or dependence is secondary, almost academic. The fact is they are simply not effective for many people with this condition.

Motrin (non-steroidal anti-inflammatory drug)

Used alone, these medications have not generally proven effective in reducing FMS pain. However, they do help some people. The explanation offered for this is that there may be some arthritis, osteoarthritis or tendinitis present in such cases or that placebo effect is at work. It is best to try NSAIDs (available over the counter) and see if they provide any relief.

Naproxen (non-steroidal anti-inflammatory drug)

Used alone, these medications have not generally proven effective in reducing

FMS pain. However, they do help some people. The explana-

tion offered for this is that there may be some arthritis, osteoarthritis or tendinitis present in such cases or that placebo effect is at work. It is best to try NSAIDs (available over the counter) and see if they provide any relief.

Nefazodone (Serzone)

This is a serotonin boosting medication.

Norflex (Orphenadreine Citrate)

A muscle relaxant sometimes used if you do not respond to Elavil or Flexeril. The recommended dose is 50-100 mg twice a day. Norflex is a central acting analgesic muscle relaxant. It is most often taken at night, but some patients are able to tolerate it in the morning as well. Muscle relaxants can cause drowsiness and you should not operate a motor vehicle when taking this type of medication. Side effects can include fatigue, uncoordinated movements, blurred vision, and drowsiness.

Norpramin (see desipramine)

This is a Tricyclic Anti-depressant.

Nortriptyline (see Pamelor)

This is a Tricyclic Anti-depressant

Orphenadrine Citrate (see Norflex)

A muscle relaxant

Pamelor (Nortriptyline HC1)

The usual dose is 10 to 50 mg per night. Similar effects as Elavil but may be less sedating. This is a Tricyclic anti-depressant. Tricyclic anti-depressants have side effects that may be intolerable for some people. These include constipation, drowsiness, dry mouth and eyes, headache, heart rate abnormalities, increased sensitivity to sunlight, morning "hangover," and weight gain. Some people have reported depression when using this drug.

Paroxetine (Paxil)

This is a serotonin boosting medication that may also reduce pain. It should not be used with other medications that also increase brain serotonin, and may cause insomnia if taken before bed.

Paxil (Paroxetine hydrochloride)

The usual dose is 5 to 20 mg in the morning. This is a serotonin boosting medication. Other side effects of serotonin boosting medications include anxiety/nervousness, headache, and insomnia, mood swings, and sexual difficulties, nausea and stomach distress. Warning. Practitioners have recently identified something call the Serotonin Syndrome (yes, yet another syndrome) which appears in some sufferers using this standard protocol. Apparently at high dosages or on interacting, can produce dangerous adverse reactions—agitation, behavioral changes, exaggerated reflexes, profuse sweating, tremor, diarrhea, lack of co-ordination, fever and shivering. If recognized and properly treated, symptoms can be brought under control. If not recognized and properly treated, well, you know it's all in your head!

Peptide

Researchers from the Kansai Medical University in Japan discovered a peptide (a short protein) which binds to cell membranes in the brain and spinal cord. The peptide nocistatin seems to block pain when it is injected into animals. The peptide counteracted a second molecule, nociceptin, which can amplify pain or transform harmless stimuli into pain. Administration of nocistatin blocked nociceptin and alleviated pain although both have a common origin.

The two biologically active peptides, nociceptin and nocistatin, while generated from the same precursor, play opposite roles in pain transmission. The discovery of nocistatin it was thought might lead to the development of a novel analgesic devoid of addiction and dependency problems. The study, a reputable one, was collaborative

and involved Osaka Medical College, the National University of Singapore, Osaka Bioscience Institute, and Peptide Institute, Inc.

Unfortunately, there are many known peptides that influence pain. One problem with them is that our systems can develop antibodies to them. Peptides, then, cause allergies to develop. Because of this tendency, non-peptide analogs must be produced, and these take quite a while to develop.

Another concern is that peptides of this type don't normally mediate only one event in the brain. In addition to modulating pain, they can effect memory and other processes. Distribution of the drug throughout the body might also result in other undesirable side effects. Therefore, although the discovery of a peptide that impacts pain is exciting, it is also a long ways from therapeutic application.

Percocet

Analgesic or Pain Medication This medication is generally prescribed for those requiring a greater analgesic effect than acetaminophen can deliver, and/or those who are allergic to, or cannot take, aspirin. The role of narcotic pain relievers in fibromyalgia is to temporarily relieve of an exacerbation of FMS pain. However, some researchers are challenging the prolonged use of these drugs.

Placebo

A placebo is a phony medicine used in medical experiments to make people think that they are taking some sort of medication. Only the scientists doing the experiment know which patients are taking a placebo and which are taking the real medication. The scientists can then monitor which patients get some sort of relief, and which don't.

Some treatments most commonly used for FMS have not been shown to work any better long term than placebo. The only long-term study done on elavil and flexeril, for example, shows that the conclusions from earlier short term studies were wrong.

In his book, "*The Metabolic Treatment of Fibromyalgia*" Dr. John Lowe MA, DC, Director of Research, Fibromyalgia Research Foun-

dation, Houston, TX reviews most of the double blind scientific studies of treatments for fibromyalgia and finds them lacking. Most studies proving the efficacy of amitriptyline (elavil) and cyclobenzaprine (flexeril) with FMS patients, for example, were short-term and showed improvement in about one third of patients.

Then Dr. Simon Carrette, a Canadian rheumatologist, and colleagues carried out a long-term study on these two drugs. When they reported their results in 1992 in *A Controlled Trial of Amitriptyline, Cyclobenzaprine, and Placebo in Fibromyalgia*. Arthritis and Rheumatism, Vol. 35 Supplement 9 Page 112, 1992 and Vol. 37(1) Pages: 32-40, 1994, they confirmed a mild improvement during the first month of treatment. But at 3 and 6 months, no difference could be shown between patients' responses to placebo and either of the two drugs. In addition, 98% of patients taking cyclobenzaprine had adverse effects, and 13% stopped treatment because of them. This means more patients had negative side effects than improved slightly during a month's time.

In another publication, Dr. Carrette reviewed other treatment studies and stated: "So far, no treatment has been shown to have any significant impact on the natural history of this condition." (*What have Clinical Trials Taught us about the Treatment of Fibromyalgia?*, by S. Carrette, Journal Musculoskeletal Pain, Vol. 3(2) Pages:133-140, 1995).

Some argue that the poor outcome of these studies is due to the fact that the researchers used only a single medication in these studies. In practice, multiple modalities are used, sometimes with better results, or so it seems. However, well-known FMS Specialist, Dr. Robert Bennett, and his colleagues in Oregon have tested the multiple modality approach. The anticipated more-positive effect of drug combos did not materialize. Using a number of different treatments favored by rheumatologists hasn't produced cumulative therapeutic effects in many sufferers.

In the Fibromyalgia Network Newsletter, October 1994, Bennett stated that there is currently NO one modality, which consistently provides more than 40% improvement in fibromyalgia

symptoms in a majority of patients. Many other examples of conflicting findings are all too readily available in the literature.

The best that can be said is that some drugs work for, or at least help, some people with FMS and none work for everyone. Trial and error treatment based on conflicting research findings has not gotten us very far in a practical sense.

The USA Fibrositis Association, for example, in their information material say categorically that “ medications, physical therapy, massage and other traditional treatments have all proven INEFFECTIVE in providing long term relief. Because there is no cure, the first steps to dealing with FMS is developing a positive attitude, learning how to modify activity and adjusting to the condition”. However, I believe that physical therapy, massage and other traditional treatments have proven ineffective because they have not been tested together. Without maintaining a body cleansing diet, using body cleansing drugs and accupressure massage and physical therapy are indeed ineffective. But used together, as the three-step plan illustrates, they can go a long way in helping FMS patients deal with their pain.

Potaba (aminobenzoate potassium)

This is a member of the B-vitamin complex group and is used to diminish fibrotic tissue. It should not be used with sulfa drugs.

Procaine

Procaine injections are generally considered a last resort treatment. It is not as effective with people suffering from FMS/MPS complex as those with MPS only.

Prozac (Fluoxetine)

Prozac is available in liquid as well as tablet form. Typical dose is 10 to 20 mg in the morning. Prozac may cause insomnia, so it should be taken in the morning. It has been reported to more effective if used in combination with one of the sedating tricyclics such as Elavil or Sinequan taken the night before. This is a seroto-

min boosting medication. Other side effects of serotonin boosting medications include anxiety/nervousness, headache, insomnia, mood swings, sexual difficulties, nausea and stomach distress. Warning. Practitioners have recently identified something call the Seratonin Syndrome (yes, yet another syndrome) which appears in some sufferers using this standard protocol. Apparently at high dosages or on interacting, can produce dangerous adverse reactions—agitation, behavioral changes, exaggerated reflexes, profuse sweating, tremor, diarrhea, and lack of co-ordination, fever and shivering. If recognized and properly treated, symptoms can be brought under control. If not recognized and properly treated, well, you know it's all in your head!

Quotane

This is a topical prescription ointment that is helpful for trigger point relief where muscle knots are close to the surface of the skin.

Relafen (non-steroidal anti-inflammatory drug)

Used alone, these medications have not generally proven effective in reducing FMS pain. However, they do help some people. The explanation offered for this is that there may be some arthritis, osteoarthritis or tendinitis present in such cases or that placebo effect is at work. It is best to try NSAIDs (available over the counter) and see if they provide any relief. It is often well tolerated because it is absorbed in the intestine and not the stomach.

Sertraline (Zoloft)

This is a serotonin boosting medication.

Serzone Nefazodone)

This is the newest of the Seratonin boosting medication. As well as increasing serotonin, it also increases norepinephrine. Serzone's efficacy and side effects are similar to those of Effexor. Other side effects of serotonin boosting medications include anxiety/nervousness, headache, insomnia, mood swings, sexual difficulties, nausea

and stomach distress. Warning. Practitioners have recently identified something call the Seratonin Syndrome (yes, yet another syndrome) which appears in some sufferers using this standard protocol. Apparently at high dosages or on interacting, can produce dangerous adverse reactions such as agitation, behavioral changes, exaggerated reflexes, profuse sweating, tremor, diarrhea, lack of coordination, fever and shivering. If recognized and properly treated, symptoms can be brought under control. If not recognized and properly treated, well, you know, it's all in your head!

Sinequan (Doxepin)

A typical dose is 2.5 to 75 mg. Sinequan is a tricyclic that functions in the body as an antihistamine. Available in tablet form as well as liquid. This is a Tricyclic Anti-depressant. Tricyclic anti-depressants have side effects that may be intolerable for some people. These include constipation, drowsiness, dry mouth and eyes, headache, heart rate abnormalities, increased sensitivity to sunlight, morning "hangover," and weight gain. It can enhance Klonopin but it can also reduce twitching by itself.

Soma (Carisoprodol)

This medication acts on the nervous system to relax muscles, rather than working directly on the muscles themselves. It works quickly and can last from four to six hours. It is considered a medication of choice by some people with FMS and MPS. It can raise the seizure threshold and may cause drowsiness. It is not recommended for children.

Tagamet (cimetidine)

Tagamet is used to treat stomach trouble, and may increase stage-four sleep.

Tofranil (see imipramine)

This is a Tricyclic Anti-depressant.

Trazodone (see Desyrel)

A Tricyclic Anti-depressants

Tylenol (or Tylenol with Codeine)

Analgesic or Pain Medication This medication is generally prescribed for those requiring a greater analgesic effect than acetaminophen can deliver, and/or those who are allergic to, or cannot take, aspirin. The role of narcotic pain relievers in fibromyalgia is to temporarily relieve of an exacerbation of FMS pain. However, some researchers are challenging the prolonged use of these drugs.

Ultram

Analgesic or Pain Medication This medication is generally prescribed for those requiring a greater analgesic effect than acetaminophen can deliver, and/or those who are allergic to, or cannot take, aspirin. The role of narcotic pain relievers in fibromyalgia is to temporarily relieve of an exacerbation of FMS pain. However, some researchers are challenging the prolonged use of these drugs. As this drug is well tolerated, doctors may prescribe it more liberally than other strong painkillers. Some side effects are constipation, nausea, dizziness, headaches, and weariness, tightening of the jaw and neck muscles and vomiting. It may also lower the seizure threshold. However, some doctors believe that this is a great medicine, if taken on a regular basis.

Venlafaxine (Effexor)

This is a serotonin boosting medication.

Vicodin

Analgesic or Pain Medication This medication is generally prescribed for those requiring a greater analgesic effect than acetaminophen can deliver, and/or those who are allergic to, or cannot take, aspirin. The role of narcotic pain relievers in fibromyalgia is to temporarily relieve of an exacerbation of FMS pain. However, some researchers are challenging the prolonged use of these drugs.

Vioxx (a cox-2 inhibitor) (See Celebra)

Voltaren (non-steroidal anti-inflammatory drug)

Used alone, these medications have not generally proven effective in reducing FMS pain. However, they do help some people. The explanation offered for this is that there may be some arthritis, osteoarthritis or tendinitis present in such cases or that placebo effect is at work. It is best to try NSAIDs (available over the counter) and see if they provide any relief.

Wellbutrin (bupropion HC1)

This is a weak SSRI and an antidepressant that is sometimes used in place of Elavil. It may promote seizures.

Xanax (alprazolam)

Xanax is an anti-anxiety medication. It has been found to be more effective if taken with 2400 mg (per day) of ibuprofen. However, Xanax may cause depression in some people and has been known to cause dependence. It may be effective for some patients if taken in low dosages. This is a Benzodiazepine anti-depressant and anti-anxiety medication. The anti-depressant and anti-anxiety properties of these medications can cause the following effects: depression, drowsiness, impaired coordination, impaired memory, muscular weakness, concentration problems, and dependence. Anti-seizure medications: Klonopin (Clonazepam), Dilantin (phenytoin), Halcion (triazolam), Tegretol (carbamazepine), etc. can work on nerve pain (neuralgia). You also need to get a blood test periodically, at least until you're sure you know the right dosage for you. This may require individual adjustment. There's a range in which these drugs are effective. Above the recommended level, there can be bad side effects. However, taken at night, they can help with sleep myoclonus (arm and/or leg spasms) and teeth grinding. They stay active in the body a long time, but, again, they have a potential for addiction or dependence and may cause depression in some people. The effectiveness of Elavil and Xanax is increased

in some patients when used in combination with one NSAID, ibuprofen (up to 2400 mg per day). No one knows why this is sometimes the case.

Zantac (ramitidine HC1)

This medication is used to treat stomach and heartburn trouble. Some people recommend taking vinegar instead. A tablespoon of dill pickle juice is claimed to be as effective as taking medication. I've tried it, and it seems to work. (Now to find someone to eat all those dill pickles!)

Zoloft (Sertraline)

This is an SSRI and antidepressant. The usual dosage is 50 to 200 mg. Anecdotally proven helpful for some patients. Sedating medication needed to combat insomnia. This is a serotonin boosting medication. Other side effects of serotonin boosting medications include anxiety/nervousness, headache, insomnia, mood swings, sexual difficulties, nausea and stomach distress. Warning. Practitioners have recently identified something call the Serotonin Syndrome (yes, yet another syndrome) which appears in some sufferers using this standard protocol. Apparently at high dosages or on interacting, can produce dangerous adverse reactions such as agitation, behavioral changes, exaggerated reflexes, profuse sweating, tremor, diarrhea, and lack of co-ordination, fever and shivering.

Zostrix cream (Capsaicin 0.25 percent)

This topical analgesic cream can be purchased over the counter. It is effective for the relief of pain of arthritis in specific areas and has been shown to help some FMS patients. It should be used three to four times per day for maximum effectiveness.

APPENDIX C

Bibliography and Suggested Reading

The major two books that everyone seems to recommend are:

Fransen, Jenny RN, & I. Russell, Jon M.D., Ph.D. *The Fibromyalgia Help Book* "The purpose of this book is to assure you that you are not alone." This 240-page self-help guide is available through: Fibromyalgia Network, P.O. Box 31750, Tucson, AZ 85751 (800) 853-2929.

Starlanyl, Devin & Copeland, Mary Ellen, *Fibromyalgia and Chronic Myofascial Pain Syndrome, A Survival Manual*, New Harbinger Publications, Inc, Oakland California USA, 1997 ISBN 1-57224-046-6

I have listed sources of information on FMS and MPS below. I have not made a proper bibliography, because over the years I have lost track of what materials I have gotten from where. The materials listed below are a collection of sources, both from my own research and from others. You will notice that there are actually few books on FMS and MPS and pain management, and that most of the materials are gleaned from Medical Journals. Many of these journals are available through local and specialized libraries, some are available over the Internet, and some may be available through your local doctor.

By browsing through the list of titles below you will get an idea of the kinds of research that is being done.

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APPENDIX D

Internet WEB sites about

Topics Mentioned in this Book

Internet sites come and go. I cannot promise that all or any of these sites exist. However, all of these sites were in existence when this book was published. As always, it is best to use a good search engine to find Internet sites. Remember that most search engines only catalog a fraction of the sites available on the Internet, so you may want to use several different search engines.

I give these sites below for your reference. However, anyone can publish almost anything on the Internet, so please exercise your own judgement and discernment when gleaning information from the Web. I don't promote or condone anything on the sites listed below, they are simply to help you in your research.

Body Cleansing

1. Action Affordable Products *<http://home.navisoft.com/surge/act2.htm>*
2. BHL *<http://www.betterhealthlab.com/vt01.html>*
3. Cleanse Platform: *<http://www.hhhh.com/4hclean.htm>*
4. Green Leaf Herbs: *<http://homepage.interaccess.com/~robertso>*
5. Is your body full of poisons? *<http://www.picsmallbiz.com/poisons.htm>*
6. Mining Co. List of links of Diet and Nutrition *<http://altmedicine.miningco.com/msubmen4.htm>*

7. New Beginnings Online Bookstore http://www.magicis.com/wellness_2/Internal_Cleansing.shtml Books on Body Cleansing
8. The Process of Fasting <http://www.micronauts.com/html/fasting.html>

Electro-Therapy

1. EMS: <http://www.emslimited.co.uk/about.htm>
2. ErthenCom.: <http://www.earthen.com/articles.html>
3. Jim's Mobile Electro-Therapy <http://www.jimsmet.com.au/INDEX.html>. Click on the banner at the top to access more of this site
4. Mayatek: <http://mayatek.com/publications/SB/SB3.html>

FMS

1. CFIDS/FMS Support Group of Rockland County <http://members.tripod.com/CFIDSFMS>
2. CRAZY FOX WEB LINKS <http://members.tripod.com/~alumskin>
3. Devin J. Starlanyl <http://www.sover.net/~devstar>
4. FibroHugs <http://fibrohugs.com/index.html>
5. Fibro What? <http://www.wxcom.com/davesweb/fibrowhat>
6. Fibro World <http://hometown.aol.com/fibroworld/index.htm>
7. FM Association of Greater Washington <http://www.fmagw.org>
8. Fibromyalgia Network <http://www.fmnetnews.com>
9. Fibromyalgia <http://pages.prodigy.com/thumpersworld/fibrom.htm>
10. Harmony <http://www.phiiinharmony.com/index.html>
11. Knowledge <http://members.wbs.net/homepages/a/n/g/angelbabiesmt/family.html>
12. Living with FMS <http://www.tidalweb.com/fms> From this site you can link to 190 sites about FMS
13. Mayo Clinic <http://www.mayohealth.org/mayo/9710/htm/fibromya.htm>
14. MO_PWC_PWF Home Page http://members.tripod.com/MO_PWC_PWF

15. National Fibromyalgia Research Association <http://www.teleport.com/~nfra>
16. One To One Injury & Pain Clinic <http://members.tripod.com/~onetoone>
17. Physical Proof <http://abcnews.go.com/sections/living/DailyNews/fibromyalgia980408.html>
18. WIZOFWAZ & CFIDS <http://www.asan.com/users/wazzie/wizpage.htm>

A sample of the personal pages about FMS

- AngelbabiesMT <http://members.wbs.net/homepages/a/n/g/angelbabiesmt/family.html>
- Jim Roache <http://www.echelon.ca/jfroache/fms2.html>
- Lynne's Home <http://www.geocities.com/Wellesley/Garden/2463>
- Mission Hills Christian Church http://members.tripod.com/~ms_stix
- Nick's Netherworld <http://www.geocities.com/SunsetStrip/Garage/7771/intro.html>
- The Vynnix's Nest <http://www.geocities.com/HotSprings/Villa/8141>

Herbs

- About Herb Health <http://www.aboutherbhealth.com/HTMLpages/Directory.html>
- Cross Creek <http://ccherb.com>
- Cyber Herbs <http://www.cyberherbs.com/default.htm>
- Herbal Healer <http://www.drherbs.com>
- Reference Guide for Herbs <http://www.realtime.net/anr/herbs.html>
- Wild Flowers <http://lurestruly.com/wildflowers/herbs1.htm>

Massage

- AngelFire Communications <http://www.angelfire.com/nc/tlcmassage/index.html>
- AMTA <http://www.amtamassage.org/massagetherapy.htm>

Bodywork Central <http://www.bodyworkcentral.com/index.html>
How to get the most from your massage <http://www.amtamassage.org/findtherapist/tips.htm>
Massage and BodyWork Resource Center <http://www.massageresource.com>
Massage Related Link <http://www.connectcorp.net/~bhaase/massage1/links.htm>
Massage Therapy and Healing Arts Center <http://www.spimassage.com/info/index.html>
Self Improvement Online's Recommended and Reviewed "Mas-
sage" related websites <http://www.selfgrowth.com/massage.html>
The Backrubs FAQ <http://www.ii.uib.no/~kjartan/backrubfaq>

Sleep

Circadian Learning Center http://www.circadian.com/slee_archp.htm
Sleep Cassettes <http://www.sleepnet.com>
Sleep Net <http://www.sleepnet.com> Everything you wanted to know
about sleep disorders, but were too tired to ask!
University of Washington <http://weber.u.washington.edu/~chudler/sleep.html>

Stretching

Brad Appelon http://www.yoga.com/roots/exercise/info/stretching_toc.html
Stretching Inc. http://www.stretching.com/html/c_p_index.html
Sunshine <http://www.sunshine.net/www/0/sn0016/sbook.html>
Stretching without Pain book for sale

Other

American Association for CFS <http://weber.u.washington.edu/~dedra/aacfs1.html>
David Nye, M.D., <http://www.alternatives.com/cfs-news/fin-md.htm>

Disabilities Act (ADA) <http://www.usdoj.gov/crt/ada/adahom1.htm>

Roger Burn's <http://www.cais.net/cfs-news/action.htm>

The CDC's 1994 CFS criteria article from *Annals of Internal Medicine* can be downloaded at: <http://www.cdc.gov/ncidod/diseases/cfs/defined.htm>

The Journal of SLEEP <http://www-leland.stanford.edu/dept/sleep/journal>

Internet Discussion Areas

If you are new to Internet (Usenet) Discussion areas, contact your server about getting into Usenet discussion areas. If this is not possible try logging onto Dejanews.com or Supernews.com and look for the following discussion areas. You can read the discussion for free, but you will have to become a member of one of these news services in order to post your own messages. Look for the following discussion areas:

alt.med.fibromyalgia

alt.support.chronic-pain

alt.support.headaches.migrain

APPENDIX E

Authors Personal Story

My body has always ached. As a child in grade three I hated to color pictures. Just the intense action of coloring with a crayon would cause my arm and back to ache. I never complained a lot, simply because I had heard family members angrily comment about people who complained about aches and pain. So I said nothing and kept my feelings to myself.

As a child, I suffered from terribly knotted muscles in my ankles. I never could skate because my ankles wouldn't support me and after trying to skate, my feet ached terribly. It seemed like a terrible situation for a rural Canadian boy, but I found other things to do. Then one day I saw a world champion biker getting his ankles massaged on a TV documentary. That night I tried massaging my own aching ankles and soon it turned into a nightly ritual of trying to massage out the aches and pains.

It didn't take long after that to realize that my backaches and my headaches were all related to by ankle aches. Massage would help, but how do you massage your own back? The best I could do was to find the outside corner of a wall and rub my back against it. That seemed to work great until my mom complained of paint being worn off of the corners in her house.

I had other problems as well. I often felt strangely bloated. I suffered from intestinal gas, even when I hadn't eaten things like beans or cabbage. I also had sleep trouble. The problem wasn't that I didn't sleep enough; it was that I couldn't get a good night sleep. I always felt tired in the morning. I would sleep and sleep

and still feel tired, achy and irritable. As a child I would go to bed by 7:30 and sleep until 7 in the morning. I kept this up during my puberty, and only teenage pressure kept me up at night and then only if I had to. Added to this, I started to crave sweets. My weight started to blossom and I tried exercising. Every Saturday I would try jogging . . . but the exercise caused more pain. So I ate more, then exercised more. My weight soon started to yo-yo as I practiced the rhythm method of girth control.

All in all, I was an unhappy teenager. I had horrible smelling sweat, trouble concentrating, gas, fatigue, and lots aches and pains. My eyes would ache, then my ears, then my jaw; but always my ankles and back. I hated anything on my back and neck. The weight of a heavy winter parka would bring on terrible back and neck aches. My hands would even ache, especially when the teacher at school made us write reams and reams of notes. Sometimes my hands would just tire out. I was always afraid of dropping things, and very afraid of gymnastic sports. Therefore, I took up long distance running. Running and walking seemed the only sports I could do, other than swimming, and since we lived in the cold frozen north, swimming was only an option for a few short weeks in the summer.

By the time I was 12 years old, I began visiting a chiropractor. The man didn't have a lot of business and so we struck up a friendship. It may have seemed strange, a middle-aged doctor spending a lot of time with a young teenager. Nevertheless, I was desperate for information. Before long I read all his books and began hunting out medical books at the town library. My one compelling desire was to understand muscles. My muscles ached and I wanted to know why.

In high school, while the other kids dissected frogs and wrote their papers, I studied and turned in papers to my biology teacher on muscles, nerves, and brain waves. The amazing thing was that I didn't complain much. I tried to talk to people about what I felt, but everyone had a quick answer. I just had growing pains. My bad back was due to a fall I took as a child etc. Everybody had

aches and pains, and some people just liked to talk about them more than others. For some time, I thought that maybe what I was experiencing was normal. Perhaps everyone felt this way at some time. However, as I read and studied I began to realize that there was something wrong with me. However, nothing explained my back pain, the shooting pain in my feet when I got up in the morning or the muscle knots in my shoulders and neck. However, no matter how much I searched there was never a scientific label for what I was suffering from.

By the time I reached college age, I had a relatively clear picture of what I felt was wrong with me. According to my own deductions, my muscles were not clearing out waste material, and so they became lumpy and sore. I didn't know why this was happening, but I did know that I needed to discover ways of ridding my body of these waste buildups. It was around this time that I began to study myself, making notes and trying to discover what helped me and what would bring on the pain.

I discovered that there were lots of things that would irritate my condition. Stress was high on the list and so I finally decided that I had a problem dealing with stress. When final exams came, I would study hard like my fellow classmates, but my muscles would tense over my whole body, and my muscle knots would cause me such pain that I couldn't concentrate. I once asked my girlfriend to walk on my back with her bare feet. She was only 120 pounds but it was still horribly painful. Then after a few minutes the tension broke and nausea followed. I rushed to the bathroom to empty my stomach. After that I relaxed for a few minutes and I realized that I didn't ache like I had before. It helped for a couple of hours and then the pain returned.

It was about this time that I noticed that when I had a good massage workout it would affect the color of my urine. This confirmed my thoughts that waste materials were trapped in my muscles and that once they were massaged the wastes deteriorated and the blood carried them away and my body flushed them out. Therefore, during my college years and in the years that followed

I carefully tried to note two basic phenomena. First of all, things that helped flush out wastes from my body and secondly, things that added wastes to my body.

After college I got married and my wife and I left North America to work in the Middle East. Before we left North America I made a careful study of the availability of doctors and chiropractor and discovered that I was getting into a difficult situation. I asked my chiropractor if he could show me ways of doing self-treatment, and we spent a lot of time together working on techniques that I could use in the empty quarter of Arabia. That marked the beginning of my study of manipulative techniques and exercises that would be of benefit to me.

I had long disagreed with my chiropractor on the cause of my problem. His basic theory was that the misalignment of my spine caused my muscles to spasm and thus caused my muscle pain. I, however, felt that my muscle spasms were causing of my misaligned spine. When my muscles knotted, they created an uneven pull on my spine, and eventually the nerves in my spinal cord would get pressure on them and excruciating pain would follow.

I therefore deduced that manipulating bones and muscles was useful only in relieving pain caused from this pressure on the nerves. A real cure would have to come from dealing with the muscle knots themselves.

Around this time I began to map out the painful areas of my body that were giving me trouble. I classified these points on my body in two ways. First, there were a variety of "hot spots" on my body where my muscles would knot up. Then there were a variety of pain spots on my body that had no muscle knots, but which were terribly painful when pressed. I found however, that these pain spots corresponded with my muscle knots. Massage of one place would relieve the other. I obtained further information from a local Arab bone-man that used some unorthodox methods, but achieved amazing results. The most amazing was his simple use of heat, cold, and pressure on muscle knots. Smooth round stones would be gently heated on a stove or chilled in a refrigerator. They

would then be used intermittently on muscle knots. The patient would lie on the rocks, his body weight pressing the rocks into the muscle knots. I soon developed my own method of self-massage using rocks, and then later using tennis balls. This type of therapy brought a lot of relief and I began believing that I might be normal again.

Secondly, I began to identify various foods that had adverse affects on me, and other foods that helped. I was in the unique position of living in an area of the world where I didn't have access to all of the western prepared foods I had been used to as a child. In addition, we were in a financial position where our budget was extremely limited. Therefore, we decided to try and eat healthy on a limited diet. This meant buying the cheaper fresh foods from the local market and avoiding the more costly prepared foods in the western supermarkets. I immediately noticed an improvement in my health.

It also became obvious to me that when I ate western prepared foods and drank soft drinks my pain would increase during the following days. I didn't know the reason, but at that time, I put it down to the additives and chemicals in prepared foods. In order to live a pain free life, I need to eat a chemical free diet. Therefore, I became an avid drinker of pure water, and a connoisseur of simple meals of fruits, vegetables and meats.

I also discovered that there were things in the local Arab diet that were of great help. Garlic and olive oil topped the list. Even the Arabs told me that if I didn't use olive oil, (or drink it as some of them did), my joints and muscles would cease up! I laughed at first, but soon found some truth in it. Long constant use of olive oil helped. Garlic seemed to help clean the wastes from my system. In addition, my technique of tennis ball massage and pressure kept me sane for many years. I also used heating pads for times when pain would flare, and gentle walking exercise whenever I could.

Sometime later I joined a medical team in the UAE, and later spent four years working with a medical team in an isolated corner

of what was then the Yemen Arab Republic. The chief medical officer on the team had been there for many years and was making some very interesting observations on the absence of certain diseases in Yemen. However, as more and more modern foods and conveniences arrived in the country, more and more modern diseases and medical conditions seemed to be prevalent.

I stored this priceless piece of information in the back of my head and started to observe and record indicators of these phenomena. A few years later a house fire in Canada would destroy all my records, but the impact of this truth left a deep impression on my mind.

During the end of my time in the Yemen, I was asked to produce a manual for the persons who would be replacing me. I worked day and night on the project, and eventually my health gave out. Muscles in my body contacted and spasmed, and my back and hips seemed to lock. Sharp intense pain shot all down my legs and up my back. I was confined to my bed and the doctor prescribed muscle relaxants to help me. When no one was around I got out my tennis balls.

Around a week later, I was back in good health and up and at it. However, I was now aware that there were medications that might help me and so I began to take an interest in painkillers and muscle relaxants. A few weeks later I returned to the west with my family and we settled into life and work in North America. However, within a few weeks, I was back to battling low-grade pain again, and it lasted for the following six years until we finally made it back to the developing world.

Eventually the wear and tear of trying to manage my pain got to me. I had no idea why I was different from everyone else in the whole world. No medical doctor seemed to know what was wrong with me; and worst of all most thought "it was all in my head." After several years back in the civilized world, I approached our family doctor for help. My nerves were shot, my body ached, and I was having trouble with my memory. He contributed it all to stress.

Not only did my doctor not understand; my own family and

friends, and my employer didn't understand. I simply couldn't sit at a desk for hours on end. Long hours spent in front of the computer would end in hours of pain. I tried chiropractors and massage therapists, all of which would help temporarily.

I then decided to take my healing into my own hands. Since I knew what the basic mechanical problem was with my body, I developed a three-point program to deal with it. The program was simple. First, reduce the toxicants and chemicals that enter my body. Second, release the toxicants trapped in my myofascia and thirdly, flush out the toxicants from my body as efficiently as possible. I began researching and developing each of these three points until I had a program that worked. I used my own specially developed diet plan for the first point, and stretching exercises, and pressure therapy (self massage) for the second. Lastly, I discovered various herbs and diet that would assist my body in flushing out the toxicants. For *pressure therapy* I originally used stones like the Arabs did but once I returned to North America and began traveling to college campuses I switched to tennis balls. In the late 80's I shared this on computer discussion bulletin boards in North America (the fore-runner of the Internet) and I began to hear from more and more people who had discovered much the same therapy. At that time, I thought that I had my pain under control and my life was again manageable.

However, several years later I found I was fighting a low-grade depression. I was so tired of my own body, tired of being the normal guy on the outside while aching on the inside. Tired of not being able to do the things other people seemed to do. Tired of thinking that my wife and kids were thinking I was lazy when in reality I struggled with fatigue.

The hardest part of it was having a very active busy family. My wife is very hard working and we lead a busy lifestyle. I would do what I could to keep up a front, appearing to be normal and competent and then pay for it with hours of pain at night. Sometimes I would work late at the office and then need to take slow walks to try and ease the pain. Sometimes I would seek out someone to

massage my back. Often I just resorted to some sort of escape activity like watching movies and reading novels in order to distract my mind from my body and escape the aches and pains.

I have long struggled with escape mechanisms. I have found this a common struggle with many people who suffer from constant pain. When your body aches, it is so easy to want to loose yourself in a good book, watch a movie or TV, daydream, fantasize or loose yourself in a pornographic world. Anything to escape the real life of living with the dull aching pains.

However, escapism is not an answer. The more I sought it out, the more I struggled with depression. I knew I was taking the easy way out. I was no longer confronting my problems, I was simply ignoring them, denying them, and depression was the price I had to pay.

And then the world discovered fibromyalgia. Doctors and therapists now had a name to label people like me with. So those of us with FMS began to find each other, and support each other. Just finding others with the same trouble helped to put my world together.

In 1993, my family and I returned to the developing world where we continue to have active lifestyle and contribute to the betterment of mankind. I still have time when my pain flares, still have occasional struggles with feeling depressed about it all, but on the average I can keep up with other normal people in normal day to day activities.

The key has been to develop a creative pain management system that works for me. I hope that through this little book you too will be able to develop your own creative management system that helps you in your day to day work.

Today at least two of my four children suffer from FMS, and several of my co-workers do as well. I have been working with my children to help them learn how to manage their pain, and am convinced that everyone everywhere can also do the same.

However, I've also been amazed by the number of people who are not familiar with even the rudimentary basics of accupressure, and have only a sketchy concept of the FMS that they suffer from.

So I began to compile my notes into something that friends and co-workers could use to develop their own pain management program. This is not a professionally designed system, but rather a collection of wisdom that I have found from the people themselves who have to live with low grade pain on a daily basis.

Conclusion

I trust that the material in this book will be useful to you, in learning how to create your own pain management system. I am convinced that you do not need to buy expensive equipment. You do not need to check into expensive pain management centers. You simply need to learn everything you can about your condition, the way your body reacts, and the basics of learning to control the levels of toxicants in your body.