Fibromyalgia (FM) is understood as a chronic disorder of an unknown cause that is characterized by widespread hyperalgesia, which can be seen associated with loss of muscle strength and endurance. It can also relate to other clinical entities such as the syndrome of chronic fatigue, morning stiffness, irritable bowel syndrome, headaches, interstitial cystitis, sleep disorders, anxiety, depression and cognitive disorders, and it is common for patients to come to health centers seeking medical attention. It affects women six times more than men aged 22-55 years and the white race is the most affected by 90%. Estimates indicate that 5% of consultations in public attention and 20% of rheumatology are associated with those caused by the FM disorders, generating great economic cost to people with it as to the health system (1,2).

US prevalence from 0.7% to 13% is described in women and 0.2% to 3.9% for men in other countries like Spain a prevalence of 2.4% and a worldwide prevalence is estimated at 2 -8%, other studies indicate that in the general population ranges from 2-3% being higher in people 35-60 years old. In Chile the prevalence of this disease is estimated at 6% (3).

The diagnosis of this condition is made according to criteria of the American College of Rheumatology, it considers three instruments to quantify the symptoms associated with this disease, and these are the indexes of widespread pain (WPI), Index symptom severity (SS Score) and the impact questionnaire FM (FIQ). Currently there are no laboratory tests or imaging that allow a more accurate differential diagnosis or that can be used as a positive indicator of the evolution of the disease (4).

Its etiology is unknown, but it is associated with several factors, among which are mentioned; chromosomal alterations affecting coding serotonin transporter, disorders in muscle metabolism, increased release of substance P, alterations in the central nervous system and endocrine, environmental factors, stress and food allergies that favor the release of pro-inflammatory cytokines, which enhances the widespread hyperalgesia (5).

Currently there are new tools considered for diagnosis and treatment of this disease, including those are; electrical bioimpedancia, anthropometric assessments, thermography, allergy food
tests and genetic analysis in order to identify the evolution of patients and relate them with the most effective form in improving disease therapeutic alternatives (6).

New treatment regimens that incorporate physical activity, behavioral therapy, dietary hygiene and the use of prebiotics, antioxidants and modulators of pain have joined the classic pharmacological approaches, delivering promising results in identifying specific patient groups who have improved their quality of life and controlling the factors that interfere with their pathogenesis and onset of symptoms.

References


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