

Understanding the 7 types of fibromyalgia pain



What if Fibromyalgia pain was optional?

In the thousands of people I've treated for fibromyalgia, I can count on my fingers how many I've not been able to get pain free, or at least get good solid pain relief, where it no longer interfered with their lives.

But first it helps to understand what the pain is and what it's telling you. This information will put YOU back in control.



Unlike infections, and many other health conditions, pain isn't an outside invader. It's actually a normal and healthy part of your body's monitoring system, telling you that something needs attention. In many ways, it's like the oil light on a car's dashboard, telling you that you're low on oil – If you put oil in your car, the oil light goes away. If you give your body what it's saying it needs, the pain goes away.

So when you have your hand on a hot stove, the pain tells you to take it off. But sometimes it's not clear what the pain is asking for. This article will help you understand your pain, so you can help it go away. In our published research,

fibromyalgia pain decreased by 50% in the first three months just by treating with this approach. Other treatments can then help eliminate the remaining pain.

The 7 Major Types of Fibromyalgia Pain

1. Myofascial Pain

This comes from tight muscles. As the muscle shortens, the belly of the muscle forms a tender knot, called a trigger point. In addition to causing pain locally, it can cause pain at a distance as well as symptoms such as nasal congestion, indigestion and others.

A critical point is to understand that, like a spring, it takes more energy for muscles to relax than to contract. When muscles don't have enough energy, as occurs during the human energy crisis seen in fibromyalgia, they get locked in the shortened position. This can occur throughout your body, and after a while they start to hurt. Often severely. That's why after a hard day's work, you don't come home and say "Honey, I've worked so hard my muscles are all loose." Instead, you come home talking about how tight your muscles are.

The same is the case in fibromyalgia, where your muscles are shortened and become tight and painful throughout your body. These muscles attach to bones with bony ropes called tendons. When the tight muscles keep pulling on your tendons, you can also see tendinitis. This will often feel like joint pain, chest pain, or deep organ pain. For example, pain that feels like it's coming from the liver, spleen, or kidneys is usually coming from tight muscles attached at the bottom of the lowest rib. You can tell this is so by pushing up on the bottom group of those muscles with about 10 pounds of pressure and see that you reproduce the pain.

Tight muscles are the major initial source of pain in most people with fibromyalgia. Unfortunately the body responds to this chronic pain by developing two other pains, central sensitization and neuropathic pain.

2. Central Sensitization

Sometimes called “brain pain,” central sensitization extends the analogy of the oil light: As the oil level continues to drop, the brain amplifies the signal. In fibromyalgia, sensitivity to pain then increases in the brain itself. This can be addressed by a number of treatments, including medications such as Lyrica, Cymbalta, and Neurontin. Especially important for decreasing central sensitization is a treatment called low-dose naltrexone, along with eliminating the source of the pain so the brain can recover.

3. Neuropathic Pain

This often comes from the nerve being pinched by tight muscles, and compression of the joints they pass through, as occurs in carpal tunnel syndrome. Helping the muscles to release, and decreasing tissue swelling by optimizing thyroid function and adding nutritional support can be very helpful for this kind of pain. In addition, small fiber neuropathy can occur, which also contributes to the autonomic dysfunction (i.e. low blood pressure, weakness, and gut problems).

4. Allodynia

Allodynia is a type of skin pain where it hurts to be lightly touched. This tends to be a later stage of fibromyalgia. For this kind of pain, the medications Namenda, along with Neurontin and/or Lyrica, can be very helpful

5. Pelvic Pain Syndromes (Including Pain

With Intercourse)

Most often, these come from muscle pain in the pelvic floor, but may also be neuropathic. Pelvic floor physical therapy combined with the medications Neurontin (300-600 mg) and Elavil (10-25 mg) at bedtime can help somewhat initially, while treating the root causes of the pain with the S.H.I.N.E.® protocol. A future article will discuss treating pelvic pain syndromes in both men and women.

6. Migraines and Other Headaches

These are very treatable using proper tools, as we will discuss in an upcoming article.

7. Certain Kinds of Abdominal Pain

Abdominal pain from indigestion, small intestinal bacterial overgrowth (SIBO), and irritable bowel syndrome. Treating the underlying infections and improving digestion are very effective for these.

Each of these 7 types of pain, and how to make them go away, will be discussed in depth in future articles.

Treatment Tools

Treatment tools fall under 4 key areas, and pain resolves best when all of these are combined as needed. Unfortunately, medical training by and large only includes a tiny part of this toolkit—using medications and surgery—with virtually no training in doing a proper examination to determine the source of fibromyalgia pain. Simply put, although most physicians are well-meaning and very good at what they are trained in, they are no more familiar with pain management than most chiropractors are with doing heart bypass surgery. This does not make them bad physicians. It simply means you need to see somebody who is trained in pain management. Chiropractors,

bodyworkers trained in myofascial release, physicians trained in Physical Medicine and Rehabilitation, and others are often better trained. However, the information we give you in this series will allow you to eliminate much of the pain on your own.

The 4 key treatment areas are:

1. *Biochemical*. This includes herbs, nutrients, and medication. The S.H.I.N.E.® Protocol (Sleep, Hormones, Infections/Information/Impingement, Nutrition, and Exercise) helps to get to the root biochemical causes of the pain and can be very helpful. Until these are addressed, structural treatments will generally not hold and only give temporary relief.
2. *Structural*. This includes massage, chiropractic, ergonomics, yoga and surgery.
3. *Biophysics*. This includes acupuncture (which generally is not very effective for fibromyalgia) and frequency specific microcurrent (which is effective).
4. *Mind-body issues*. There is a reason some people are called a pain in the back (or lower).

In the next article, I'll discuss natural treatments for pain relief. Three of these are especially helpful after six weeks of use. These include the herbal mixes Curamin and End Pain, and topical creams such as Traumaplant Comfrey Cream. These can be combined with any pain medications. After this article I'll discuss pharmacologic treatment for pain including Neurontin, Ultram, Flexeril, Namenda, low dose naltrexone, compounded topical medication mixes for local pain, Lyrica, and Cymbalta.

There are dozens of other natural and medication pain relievers as well.

Isn't it time for you to be pain free?

This article originally appeared on Dr. Teitelbaum's website,

Vitality 101.