

The
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Support for the FM FaMily

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You, Pain Free

The 6 Keys
to Break Free of Chronic Pain
and Get Your Life Back

DR JONATHAN KUTTNER & NAOMI KUTTNER

Exclusive Book extract from: **You, Pain Free**

By Dr. Jonathan Kuttner
& Naomi Kuttner



Organise a coffee and
cake morning on
Friday 12th May

for **Fibromyalgia Awareness Day!**

The Power of a Power Nap

by Karen Crosby



The Unexpected Tale Of How Your Best Friend Became Your Worst Enemy

by Dr Jonathan Kuttner & Naomi Kuttner

The idea that the pain you feel *may not* be related to physical damage is a difficult one. Since your birth, pain has always meant one thing – your body has been damaged and you are in danger. But if your pain system is malfunctioning, you can feel very real and sometimes excruciating pain, with no physical damage being present.

The most extreme example of this is phantom limb pain. In this condition an amputee can feel severe pain in a limb that is no longer there. How is this possible? Because the nerves are still reporting pain messages as if they were coming from the vanished limb. In your brain, you still feel pain and that pain is as real as when you had your damaged limb.

Let's continue and investigate exactly how a pain system can malfunction, and how you can use this knowledge to successfully make the journey out of pain.

Meet the Enemy Within...

To understand how your pain system malfunctions, I'm going to tell you *'The Terrible Tale of When I Smashed My Thumb'*.

It went like this...

I was working with my son Benjamin to put a ceiling in my garage (a task I had successfully put off for twenty-five years). All I had to do was hammer in one more nail. So I gingerly held the nail, took a wild swipe at it with the hammer... and missed it completely. What I did do was smash my thumb.

At this point I would like to relate I remained as calm as a Hindu cow in a state of serenely mindful presence. The truth is that I yelled out something unprintable, dropped my hammer (just as well there was no one below me) and wobbled down the ladder so I could curl up in a corner and moan.

That's what happened on the outside. Inside my body, something complex and marvellous was going on. When I first hit my thumb I stimulated three types of nerves. First was an A-beta nerve fibre which carries messages extremely fast. The message I got through this fibre was that something had touched the outside of my thumb – very (very) firmly. This first message was carried straight up my arm to the nerves in my spinal column, and then to my brain.

This was followed almost immediately by a message from my A-delta nerve fibre. The A-delta fibre is smaller and slightly slower. This second message was

interpreted in my brain as a sharp intense pain (that's when I yelled and dropped my hammer).

The third and final message was from the C fibre. This fibre acts more slowly than the other two. It transmitted a deep, nauseating ache about two seconds after the blow. This is the part where I stumbled down the ladder to look for a corner in which to assume the foetal position.

But by the time I reached the floor, I noticed the pain was changing again. When I looked down at my thumb, I saw a vague bluish tinge underneath the nail. Already my thumb looked swollen, red, and felt hot.. My thumb began to throb. This was the start of a process called peripheral sensitisation.

The blue colour under my nail meant that blood vessels in the area had been broken and I was getting a bruise (or haematoma). As the blood under my nail started to clot, it released chemotactic factors, which are a call to arms for your immune system. They began the inflammatory process.

My C fibres (which had caused the deep aching pain) started to produce a group of substances known as the inflammatory soup. This 'soup' includes substance P, bradykinin, and others with long Latin names. These caused blood vessels in the area to further dilate – increasing the hot redness. All the substances in this inflammatory soup are algogenic, meaning they induce pain.

This inflammatory process is again part of what keeps you safe. The substances released into my thumb – the same ones making it sore and red and hot – are essential to the healing process.

I went inside and started looking for a painkiller. I now work as a pain specialist and used to be a family doctor, so as you might expect, I could not find even the simplest pain med in the whole house. I therefore resorted to the good old fashioned anaesthetics of our civilisation – alcohol and television. I poured a good slug of whiskey and sat down to watch some TV pulp to try and take my mind off my throbbing thumb. The whiskey worked a bit; the TV didn't.

And then something fascinating started to happen. Over the next hour I became aware that the pain from my thumb extended up my forearm to my elbow. It was now 11pm, so I went to bed. I tossed and turned, trying to get to sleep. At this stage the pain reached all the way up to my neck, the left side of my head, and across my shoulder and chest.

This was a different pain from my initial swollen thumb. It was not a throbbing pain, but an intense burning pain. And I was sweaty, grumpy, exhausted and nauseous.

The question was: what on earth was going on?

I smacked my thumb with a hammer, and now I have a weird burning pain extending all the way up my arm into my neck? I thought to myself: This is not normal.

And I was quite right. A process was taking place that occurs for everyone in chronic pain. And it's one of the main drivers of any pain that lasts longer than three months.

Here's what was REALLY happening.

Dodgy Don and the Pain Amplifier...

As the hammer struck my thumb a message was sent along my nerves. At this point, it was just a message and had no intrinsic meaning. It's the same as putting your ear to a telephone line and trying to interpret the signal. Until it's decoded at the other end you won't be able to understand the conversation.

The message decoding happens in your brain. But first (and this is important) the message has to pass through two different nervous systems (think of them as communication networks). These are the peripheral nervous system (1) and the central nervous system (2).

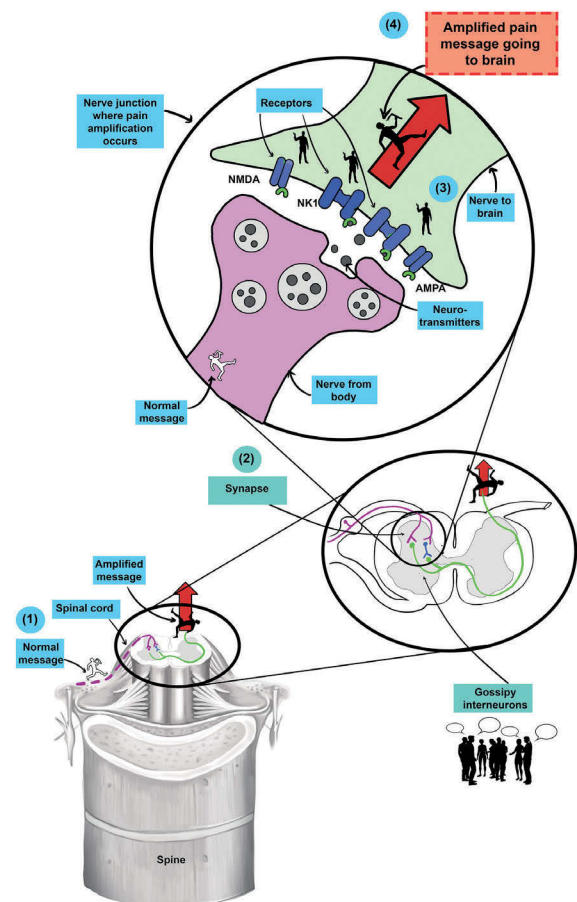
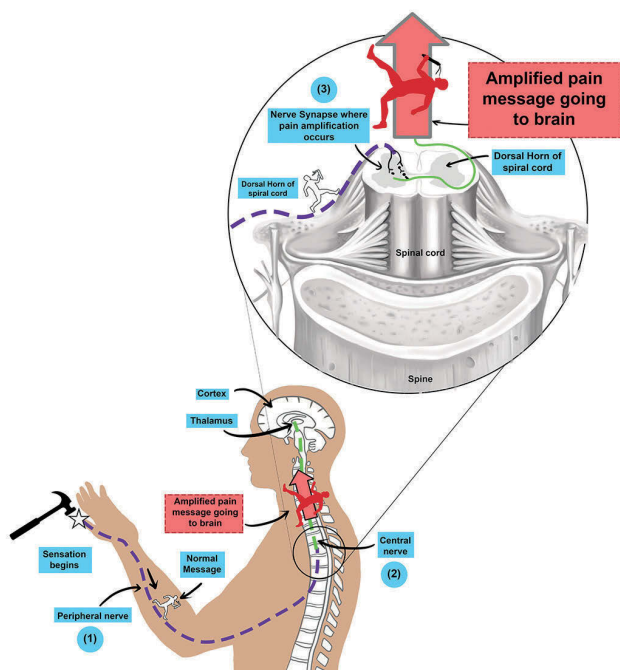
When I smashed my thumb, the pain message started in the little nerve endings there, and was then transmitted down the nerves in my arm. It travelled via the peripheral system. Then the message reached the spinal cord (3). This is where the peripheral system ends and the message needs to be transmitted to the central nervous system, which resides in the spinal cord and brain.

This point is where all the magic (and mischief) happens. For the message to go from the peripheral nervous system to the central nervous system, one nerve ending needs to talk to the other.

I don't know about you, but when I was a kid we used to play a game called telephone whispers. It works like this: a group of kids sit in a line, and one kid whispers a message in the ear of the other. The next kid whispers what they thought they heard, and the message goes along the line. And, no surprise, by the time the message reaches the kid at the end it has morphed into something completely different.

This is what happens to the message going from the area of pain – in this case my thumb – up to my brain. When the nerve carrying the pain message reaches the spinal cord there are several receptors waiting to receive the message.

Let us do a thought experiment together. In our thought experiment there is a tiny man (let's call him Arthur) standing on the nerve in my thumb, waiting for the nerve ending to give him a message. As the hammer hit my thumb, the message is handed to Arthur, who whirls around and runs as fast as he can along the nerve. He screeches to a halt at the end of the nerve (1), puffing slightly and then is faced by a chasm at the synapse (2) – the point where one nerve system feeds into the other.



This is the point where the peripheral nervous system stops and now needs to talk to the central nervous system, starting in the spinal cord. Arthur can't cross the chasm of the synapse, so this is where he has to pass the message on. But, across the chasm, Arthur is faced by not one, but a group of people.

Arthur has to choose who he's going to pass it to. He has to choose between Straight Sam, Dodgy Don, and Tricky Trudy. If he hands the message over to the Straight Sam, who lives in the solidly built **AMPA receptor (3)** – Sam will collect the message and faithfully continue up to the brain. The message that reaches the brain will be exactly the same message that Arthur picked up at my thumb.

However, Arthur is dazzled by Dodgy Don in the glossy NMDA receptor. He throws the message over to Don, and as Don receives it something sinister happens. As Don whirls around to continue up the spinal cord, he takes the message and stretches it into a completely different shape.

So now, the message that reaches the brain is not the same as the one that started in the thumb (4). It is much larger, and distorted. Your brain can only decipher the final message it receives, and assumes that message is an accurate representation of the state of your body. Your brain does not know that the pain message has been altered by Dodgy Don. So you may feel terrible pain, even though in reality minimal damage has been done.

Therefore, I thumped my thumb with the hammer. And a few hours later, lying in bed, I have pain that's magnified far beyond what it should be if I was receiving accurate pain messages.

What you're hearing here is laying the foundation for a profound insight. When you realise that the pain you feel is not always an accurate representation of what is going on in your body, it changes your relationship with chronic pain completely.

What I've described is known as amplified pain, or pain sensitisation. Understanding this process and then taking steps to reverse it is one of the most powerful ways I've helped people (including myself) overcome chronic pain.



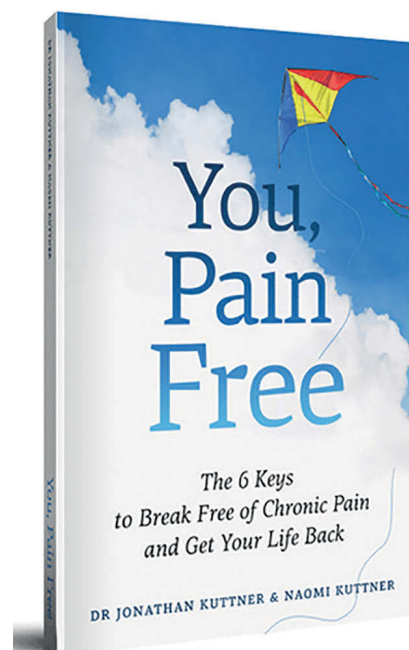
Dr Jonathan Kuttner (MBBCH, Dip Sports Med, Dip MSM, FRNZCGP, FAFMM) is a musculo-skeletal pain specialist who has spent the last 35 years working as a doctor in New Zealand. Dr Kuttner's interest in treating chronic pain came after a serious hang gliding accident. He was lucky to survive, but lived with back pain for more than seven years.

Using the information shared in his book 'You, Pain Free' he was finally able to become fully pain free and has since helped many others do this as well. Today Jonathan works as a Musculoskeletal and Pain Specialist.

Get the Book...

Now you understand how amplified pain works, you need techniques to interrupt this cycle and turn it off.

<https://tinyurl.com/kqjxeck>

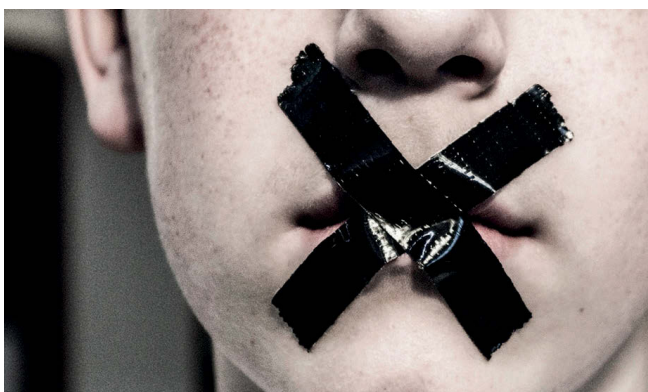




Don't suffer in silence

By Sarah Phillips

Fibromyalgia can be difficult to explain, and even more difficult for people to understand, but this doesn't mean you have to suffer in silence.



You may be reading this as somebody who is wondering if they have fibromyalgia, or maybe, like me, you've just been recently diagnosed, after a long time of feeling truly terrible and wondering what on earth happens next. Perhaps you have known for some time now that you have fibromyalgia but those around you don't quite get it. You could even be a close friend or relative of a fibromyalgia warrior who just wants to try and comprehend what all this means.

It's hard to explain to somebody who has never experienced a chronic condition quite what it means to be plagued every single day by pain, or extreme fatigue, especially when you look fine on the outside. Sometimes it feels safer not to tell people how you are feeling because of the fear that although they hear the words you are saying they just cannot understand, or perhaps you just cannot even begin to find the words to explain to somebody how you are feeling, how your body feels like it is breaking down and how weary you have become.

If you are just beginning to wonder if you have fibromyalgia, please, don't suffer in silence, begin your journey to understanding your pain and fatigue by going to the doctor. If you don't like the first opinion, or feel dismissed, then seek a second opinion. You could have been suffering for years, and just getting on with it, but I live by one of my favourite quotes by Albert Einstein "Insanity is doing the same thing over and over again and expecting different results", so why not go to the doctor and see where it may lead? If you find it difficult to get across how you are feeling then book a double appointment, chances are once you start talking you won't be able to stop.

If you have just been diagnosed, then explain to people your diagnosis as best as you can. Especially to those close to you. Fibromyalgia can be a solemn lonely journey if you do not share it. You don't have to tell the world, just somebody, anybody, who will help you. There is no shame in asking for help. Don't keep your suffering inside in the fear of it destroying those around you, because ultimately you could end up destroying yourself.

For those of you who will be told by your loved one that they have had this diagnosis, remember, it is not your job to understand the journey they have taken, after all, it is not your journey but theirs. It is simply your job to say 'I believe you, how can I help you?'.

Lastly, if you have been suffering with fibromyalgia for many years, don't just survive, live. Your head may tell you that some days appear impossible, others risky, based on previous experiences, or maybe even pointless, but open your heart and face your fears head on, preferably with somebody you trust. Tell them that you are scared, and let them help you to let go of your fear instead of suffering the familiar. You never know, with the right support, you may well surprise yourself.

Sarah Phillips lives with fibromyalgia. She works full time as a senior midwife in a busy London Hospital, is married to Matthew and together they have 6 year old twins, Edith and Emily. Sarah writes regularly about fibromyalgia on her blog:

runningmama2013.wordpress.com,

Facebook page - The F Word

Twitter - @newmidwife0904

Instagram @the_f_word_blog

Organise a coffee and cake morning on Friday 12th May for Fibromyalgia Awareness Day!

The 12th May is recognised as the international fibromyalgia awareness day. Charities and groups around the world will be organising events to increase awareness of the condition. Why not celebrate with us and raise awareness by organising a coffee and cake event? This could be with your family and friends in your home, in your workplace, in a local cafe or even a picnic in the park.

We would encourage local fibromyalgia support groups and our supporters to organise coffee and cake mornings up and down the country. If it is your local support group meeting, then why not ask partners and friends to come along, extending the reach of the support group on International awareness day.

Requesting resources for your event

If you wish to order resources from FMAUK such as leaflets, booklets and posters about fibromyalgia-see: www.fmauk.org/resources. Orders received after Friday 28th April 2017 cannot be guaranteed to reach you in time for your event.

If you would like some back issues of the Fibromyalgia Magazine from UK Fibromyalgia for your event ring 01202 259155 and we shall endeavour to get them to you before the 12th May.

If you plan to fundraise for Fibromyalgia Action UK, we can also send to you other resources to help with your fundraising efforts! For fundraising support, please contact fundraising@fmauk.org or visit www.fmauk.org/fundraising.

After the event

We hope that your event is successful, and if there is something to share afterwards, such as photographs and a summary of the day, then please get in touch with us. We can then share with others how your event went on our website, Facebook and Twitter.

Please send any information to:

head.office@fmauk.org

If you would like your event to be featured in the magazine, send the images and the copy to office@ukfibromyalgia.com





Ask the Doctor by Ginevra Liptan, MD

Any advice on how to manage menopause symptoms and fibro as not to conflicts with each other?

Anytime the balance of sex hormones, testosterone, estrogen, and progesterone get thrown off balance in fibromyalgia they can exacerbate its symptoms. Studies find that many fibromyalgia patients feel their symptoms got worse during or after menopause. In particular the hormonal changes around menopause that cause night sweats can wreak havoc on the already light and unrefreshing sleep that accompanies fibromyalgia.

Trying to lessen the impact of hormonal fluctuations on fibromyalgia is tricky, because the usual treatment for menopause is hormone replacement therapy, which is not risk-free as it has been found to increase the risk of breast and uterine cancer. In my clinical experience I have seen hormone replacement often alleviates the worsening of fibromyalgia symptoms during menopause; but the one study that has been done concluded that estrogen replacement does not improve fibromyalgia pain in post-menopausal women. If menopausal night sweats or hot flashes are disturbing your sleep, hormone replacement can give you relief and improve sleep quality. However, given the risks associated with hormone replacement, and the fact that the intensification of symptoms that occurs as hormones transition to the lower levels seen in menopause is temporary, usually lasting about a year or two, the safest approach is usually to avoid hormone replacement therapy if possible.

An alternative approach for fibromyalgia patients to ease the menopause transition is to optimize adrenal gland functioning. The adrenal glands secrete cortisol, and also make small amounts of the sex hormones. Their role becomes very important as the ovaries shut down their sex hormone production. Unfortunately for those of us with fibromyalgia, our adrenal glands really take a beating due to the prolonged fight or flight response signals sent out by the brain in fibromyalgia, often resulting in sub-optimal adrenal gland function as we head into menopause. This may be part of why the transition is so hard for many

women with fibromyalgia. Menopausal women with more severe fibromyalgia symptoms also have lower DHEA levels, a marker of adrenal health. So if you are struggling with worsened fibromyalgia symptoms during menopause, first focus on improving the health of your adrenal glands. You can learn more about how to support your adrenal glands in The FibroManual.

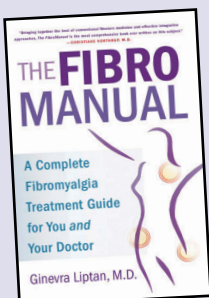
Can fibromyalgia be partly genetic predisposition and then triggered by a stressful life event?

Is there correlation between trauma and fibromyalgia?

There is strong evidence to support a genetic component to fibromyalgia, and it tends to run in families just like diabetes and many other chronic illnesses. But it is just a genetic predisposition, and seems to require a trigger. There is also a strong correlation with trauma, as more than half of women with fibromyalgia report childhood sexual abuse and 90 percent have experienced a sexual or physical assault in their lifetime. There is an overlap with another disease closely linked to trauma, post-traumatic stress disorder (PTSD). Almost half of male patients with combat-related PTSD meet the diagnostic criteria for fibromyalgia.

My fibro started when I had chemotherapy. Is that common?

The most widely accepted theory is that in genetically or psychologically predisposed people, a trauma in adulthood triggers a prolonged activation of the stress response or fight-or-flight system. One study found that "physical trauma in the preceding six months is significantly associated with the onset of fibromyalgia." Other potential triggers may include a major infection or illness, or prolonged pressure on the spinal cord in the neck. A life-threatening illness such as cancer, or exposure to toxic chemicals or medications such as chemotherapy can also be a common trigger. While most people with fibromyalgia can identify a provoking event such as an injury, car accident, or emotional trauma, not everyone does.



About Dr. Liptan: Ginevra Liptan, M.D. developed fibromyalgia during medical school. She is a graduate of Tufts University School of Medicine and board-certified in internal medicine. Formerly an associate professor at Oregon Health and Science University, she is now medical director of The Frida Center for Fibromyalgia, a fibromyalgia specialty clinic (www.fridacenter.com). The clinic is named for Frida Kahlo, the Mexican artist who endured years of chronic pain and is thought to have been a fibromyalgia sufferer. Dr. Liptan received a Gerlinger Foundation Research Award to study myofascial release for fibromyalgia, with results published in Journal of Bodywork and Movement Therapies. She has also published articles in peer-reviewed medical journals about fibromyalgia exercise and self-management strategies.



The Incessant Need To Do

By Linda Hall

www.audiomeditation.co.uk

Linda Hall is a meditation teacher, personal development coach and audio author with over twenty years experience in the integrative healthcare field. She runs meditation and mind-body awareness courses for patients at The Optimum Health Clinic, a leading UK clinic specialising in the treatment of M.E./C.F.S and Fibromyalgia. Her guided meditation audios for relaxation and self-growth are distributed globally.

Rushing life away

Throughout my thirties I rushed my life away. Never walking when I could run, an inner voice constantly urged "Do better! Do it faster! Keep going!" Driven by this need to relentlessly push myself, I only stopped when I hit a wall of exhaustion or self-medicated with a glass of wine too many at the end of the day to bring my system down to a more comfortable level. Of course, this pace of life wasn't sustainable, and contributed to a state of burn-out in my health that started in my late forties, lasting well into my fifties.

I had seen the writing on the wall some years earlier, and as a consequence had made some big changes in my life-style which included embarking on a programme of counselling, receiving holistic therapies regularly and reviving my lapsed meditation practice. But the damage had already been done. Several significant personal losses in my life came one after the other, presenting a perfect storm that proved too much for my overstretched system to cope with. It would take me almost a decade to return to more equable, robust health.



A burden of stress on the body

The real journey to recovery began when the penny dropped that ingrained perfectionist and achiever tendencies had not only contributed to my becoming ill in the first place but were actually blocking my recovery. I learnt how unhelpful habitual thought and behaviour patterns were affecting my physical health and well-being generally through their direct influence on my

nervous system and immune response. By learning to manage my thoughts and moderate my behaviour, I removed a burden of stress from my body, allowing it to respond more easily to everything I had put in place to support my recovery.

Since then, I've learnt to take time to 'stop and smell the roses', and nowadays enjoy nothing better than an afternoon nap with my two dogs. Just turned sixty-five, looking back on my life, I'm not sure I was ever very comfortable or relaxed in my own skin. The subtle layers of inner tension I carried were my 'norm' as I didn't know any other way of being. I see now that this stemmed from a combination of nature and nurture: a genetic predisposition mixed with my life's experiences. Together they led to the perfectionist and achiever patterns that developed in my youth along with issues of low self-esteem, all of which fuelled my incessant need 'to do'.

Incessant doing as an avoidance strategy

If we're honest, most of us will recognise that inner incessant need 'to do', and will have our own reasons for it being there in the first place. Keeping busy may serve as a strategy of avoidance so we don't have to acknowledge painful emotions and memories, or indeed physical pain itself. We may use it to avoid making difficult decisions or dealing with stressful situations. It may be our way of distracting ourselves from anxiety or from looking after our own needs properly. It may also make us feel that we are more in control of what's going on in our lives.

Just a habit

There's another interesting aspect to keeping busy; it gives us a high because it constantly tops up our cortisol and adrenaline levels. We can literally become addicted to the habit! It's not the easiest of habits to break as it feeds such complex layers of need within us; emotional, psychological and physical. But nevertheless, it is just a habit, and given commitment, care and time, habits can be changed.

In today's multi-tasking, techno-addicted Twenty First Century, Rene Descartes' "Cogito ergo sum", ("I think therefore I am"), could perhaps be substituted with the more apposite "I do therefore, I am". The incessant need 'to do' offers the illusion that we are employed in gainful endeavour. For some of us, it justifies our very existence. Without it, we imagine we'd be nothing and life itself a meaningless void.

Fear of non-doing

As a meditation teacher, it's not unusual for a student to fear that stopping the endless chatter of their mind will reveal an uncomfortable emptiness stripped of all familiar reference points. I encourage them to see the simple here and now as a rich, multi-dimensional space that's far from empty, and I help them to explore it through their senses. This brings them away from their head and down into their body so they can experience a felt sense of their relationship with the actual, physical world. A major benefit of this exercise is that their senses anchor them to the present moment - away from the limbo lands of the future and the past.

Opening the senses

Coming down into the body on a sensory level brings the mind's attention to the ebb and flow of the breath, which provides it with a passive occupation. This has the effect of freeing it from the obsessive compulsive need to make lists, plan ahead, analyse and so on, and creates an all-important sense of inner space that's essential to mental and emotional well-being. These precious pauses enable us to acknowledge our needs in the present moment and allow the body's relaxation response to restore, repair and replenish us.

Trusting the spaces in-between

Perhaps it all comes down to learning to trust in the processes that happen organically in the spaces in-between doing. It appears to me that the natural order of things is a balance between action and stillness. Everything and everybody needs space and I certainly know I do.

I've created the following mindfulness exercises to help you loosen up ingrained habits of 'constant doing' and to provide some healthy breathing spaces in your day-to-day life.

A Simple Exercise for Stopping 'Incessant Doing'

Pause whatever you are doing and:

Breathe out fully.

As you do so, slow your breath down

Become aware of three things you can see around you

Become aware of three things you can hear around you

Become aware of three things you can feel

Breathe out down the full length of your body allowing any stress, tension or feelings to be released

Take a few moments to ground yourself

Be kind and reassure yourself

Allow yourself some space to just be in the moment I hope you've enjoyed this article and found it useful. I wish you a good month. Go well!

Linda at audiomeditation.co.uk

More on Stopping 'Incessant Doing':

Learn to meditate: see my audio course 'Step Into Meditation – The Foundation Course', available on CD and MP3

<http://bit.ly/2cRNQpD>

Read my article 'How to Reduce Stress':

<http://bit.ly/2nZScC6>

Watch my YouTube video 'All Is Calm':

<http://bit.ly/2mBphE4>



To help you keep on track

Stop › Breathe out › Calm

(Stick your Post-It reminders where you'll easily catch sight of them: the fridge door; your computer; the mirror; the back of the loo door; the front door; your bedside table).

Practical Guidance

Conscious Process: An MP3 audio programme to help manage the symptoms of M.E./Chronic Fatigue and Fibromyalgia and support recovery. Download the first 4 Sessions Free

www.TheMeditationProgramme.com

Conscious Process is also available as a multi-media on-line course:

<http://bit.ly/1PrhORp>

Visit my on-line store for relaxation, meditation and personal growth CDs and MP3s. Mindfulness, creative visualisation, positive thinking, sleep inducer, meditation courses, blog and articles

www.AudioMeditation.co.uk

Audio Meditation's YouTube Channel

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Email:

info@audiomeditation.co.uk



Power of the Power Nap by Karen Crosby

In my years of power napping through necessity, there has been evidence emerging of just how helpful it is for our brain health and our energy levels, among other things.

Personally the power nap has been my lifeline, and I can remember even in my 20's, (when my fibro was not yet diagnosed) I needed to have a quick sleep in my car in my lunch break, or at home on the sofa.

Sara C Mednick PhD is a sleep expert and author of *Take a Nap! Change Your Life*, and tells us that we do get great benefits with 15 to 20 minutes of napping. This gives us an energy boost and even increases in motor performance. This makes sense to me since I get more and more clumsy when I am very tired!

Also if the time napping is longer, for example 30 – 60 minutes, it helps us with decision-making and memory boosting, and if you nap for 60 – 90 minutes into rem sleep (rapid eye movement), the sleep you get plays an active role in making new brain connections and so helps solve creative problems.

However, the 15 – 20 minutes is recommended as you can go into a deeper sleep level if longer than this, making you a bit groggy when you wake up, (I know this but I still sleep longer if I can)!

When we sleep on a night, we have four or five levels of sleep, and when we have at least a 20-minute power nap we can access the first two levels of sleep, where we achieve a slower brain wave pattern.

Napping also has other benefits: -

1. Helps hormonal maintenance.
2. Helps cell repair (this happens during sleep at night too).
3. Improves the functioning of the heart (a study of adults found that napping for 30 minutes at least 3 times a week or more was associated with a 37% lower risk of death from heart disease).
4. Neurons involved in muscle memory are strengthened by electrical signals in the nervous system with level 2 sleep – so the neurons work faster and more accurately.
5. Lowering of stress levels.
6. Improvement in productivity.
7. Lift in mood.
8. Brain activity stays high throughout the day with napping, and without a nap it steadily declines.
9. Provides a boost to intelligence and help live a longer, healthier life.

Top Tips for a Power Nap: -

Nap after lunch as later in the afternoon is more likely to make you feel groggy afterwards because of our circadian rhythms, if not, do it late morning instead (I nap between 11am and 2pm if I can).

Use a blanket to keep warm, I have a big soft one for comfort and warmth, because when you are sedentary and sleeping your temperature drops.

Cut down on caffeine as this is a stimulant and will interfere with your sleep patterns, do not drink caffeine before a nap and for the same reason for 2 – 3 hours before bedtime (I have a herbal night-time tea on an evening that helps promotes sleep).

Find a peaceful and quiet space with no phones in the room to get a peaceful sleep.

Close the curtains or wear an eye mask to bring the darkness required to release the sleep inducing hormone melatonin.

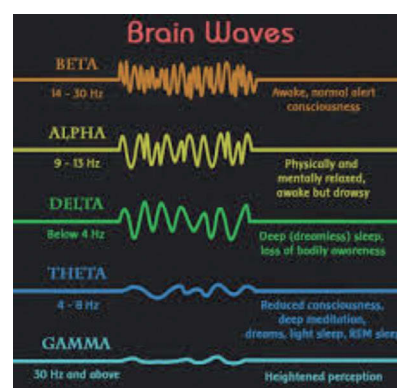
Set your alarm for how long you want to sleep to avoid over sleeping and affecting your night-time sleep.

When you get up drink a glass of water, go out for fresh air, wash your face or do some deep breathing in through the nostrils and out through the mouth to re-energise you and let your body know it is time to wake up.

Lie down, as it takes 50% longer to fall asleep if you are sitting, and I find it is more comfortable.

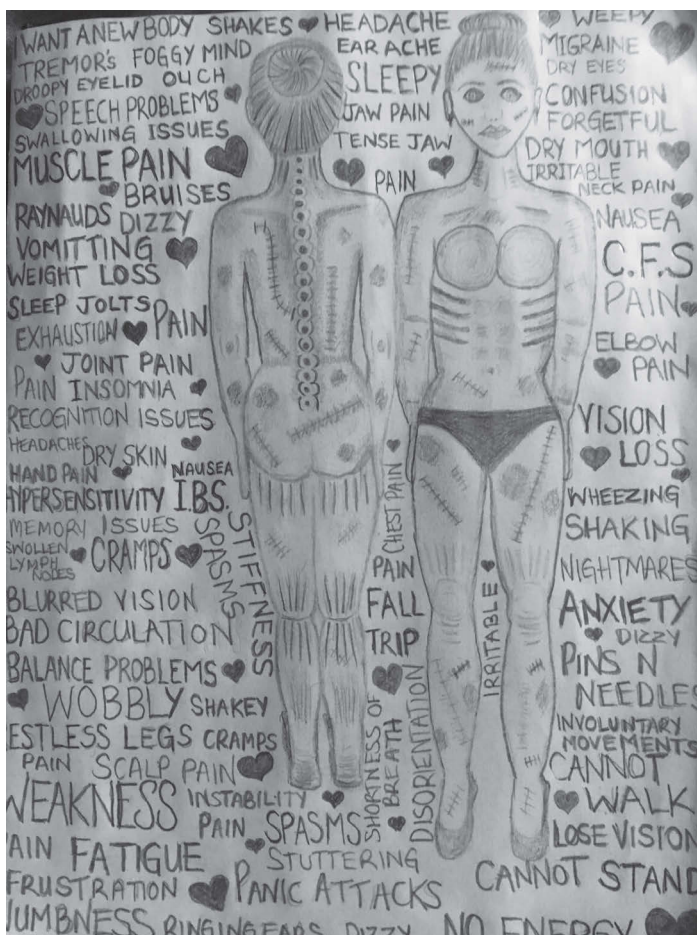
Slow down the busy mind by meditating first to avoid worrying about what needs doing when you wake up (there are lots of downloads and meditation CD's on the market).

Meditation slows the brain wave pattern down from the busy beta brainwaves, which are present when we are active and multi-tasking, to the slower alpha brainwaves which are present just before sleep and when we are at our most creative (have you ever heard of the saying "sleep on it" when you need to make a decision or solve a problem, this is likely to happen during the alpha brainwave pattern just before sleep or during meditation)



Researchers from the School of Psychology at Flinders University in Australia have discovered a new biological process called process O, suggesting that sleep onset followed by 7 – 10 minutes of sleep can result in a substantial increase of alertness!

Enjoy a nap and don't feel guilty, it is our body telling us to rest and what is more natural than that?



Rachael Freer sent in this excellent drawing to help raise FM Awareness.
Rachaelfreer@gmail.com



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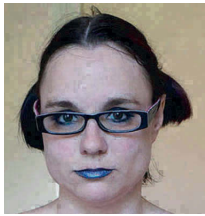
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* Taylor, A., Anderson, J., Riedel, S., Lewis, J.E., Kinser, P.A., Bourguignon, C. Cranial electrical stimulation improves symptoms and functional status in individuals with fibromyalgia, Pain Management Nursing, 2013, 14(4): 327-335. Taylor, Ann Gill, Anderson, Joel G., Riedel, Shannon L., Lewis, Janet E. and Bourguignon, Cheryl. A randomized, controlled, double-blind pilot study of the effects of cranial electrical stimulation on activity in brain pain processing regions in individuals with fibromyalgia, Explore, 9(1):32-40, 2013.

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The Benefits Agony Aunt

by Nim McCoan-Thornhill

ESA & PIP Problems

Welcome to the monthly benefits problem column for people with Fibromyalgia. The essential focus is PIP and ESA, but if you've other problems, do please also bring them to my table and I will do my best for you. In order to submit your problems please email office@fibromyalgia.com.

This month we meet someone on the transfer from DLA to PIP, and a lass with no income at all.

Dear Nim,

I have fibromyalgia and have been claiming DLA for years with no reassessments. I've just had the letter informing me that I will be changing to PIP, and have to be assessed for this. I work part time, but have done the whole time. I am anxious that it will affect my application. What do you know about PIP? Anxious of Durham.

Dear Anxious,

That's a very open question! I couldn't possibly put all that I know about PIP in my column! In short, PIP is the replacement benefit for DLA. The biggest difference is that it is assessed using a points based system, which means that the results of assessments should be more even, no matter who is assessing someone. The "life awards" that existed under DLA, no longer exist under PIP, which may be why you're suddenly being assessed after a very long time. PIP, like DLA, is means tested, so the fact that you're working will not affect it. However, should you be called for an assessment, you'll need to think carefully over how you describe your work responsibilities. Make it clear what you are and are not able to do repeatedly and without experiencing symptoms – including symptoms that you'll experience as a knock on effect.

I hope this helps,

Nim.

Dear Nim,

I recently left my job because I could no longer cope with how ill it was making me. I live with my boyfriend, whom works nearly full time. I have been told by the Job Centre that I cannot claim JSA because I am too ill, but cannot claim ESA because my boyfriend is working. He isn't earning enough for us to pay our bills, and buy food. What can we do? Kirsty, 25, Norfolk

[Note: this letter was heavily edited to fit in the column].

Dear Kirsty,

I am sorry to hear of your predicament. There are a few things that you can do.

1) Go to your nearest Citizens Advice Bureau and outline your predicament. They should give you a food voucher, which you can take to a food bank, where you will be given a food parcel. This should help tide you over for the time being.

2) Have a look through the Turn2Us website, at their grants section. If there are any that you feel are relevant to your situation, print them out (or copy the info by hand), and take that with you to Citizens Advice, too, to ask whether they may be able to help you apply for those grants.

3) Contact your utilities companies to inform them of your current situation. They are then likely to be more lenient towards you if you have problems paying bills. If you inform them that the problem is because of your health, you may find that some companies have slightly different tariffs available for you.

4) If you might be able to work part time, speak to the Job Centre about whether you can claim JSA while you seek part time work. I suggest this, simply because the process is quicker than for other benefits. The problem you may encounter is that having willingly left work, they may impose a penalty time period in which you cannot claim benefit at all.

5) If your partner is not already claiming Working Tax Credits, see if he may be able to. You can also check this on the Turn2Us website.

6) Talk to an organisation such as CAB, DIAL, MIND, etc, about making a claim for PIP. PIP is a disability benefit that is not means tested. Many people with Fibromyalgia claim PIP.

7) Contact the DWP's National Insurance department and request a statement of your National Insurance payments for the last six years. Because you were working, you should be able to claim Contributions Based ESA, which is not means tested, so your partner working should not be relevant. What you are looking for with the statement of your National Insurance Contributions is whether you have paid an entire tax year last year or the year before. If you have an entire years contributions, then return to the Job Centre with the statement, and tell them that you wish to apply for Contributions Based ESA. However, if you have not worked consistently for one of those tax years, that may well be why they have not considered Contributions Based ESA (which means they are assuming you would be on Income Related ESA, which is means tested).

I hope this helps,

Nim

www.turn2us.org.uk/



Forum News

By Claire Collopy

Recently a member of the Fibromyalgia forum asked for some tips for coping with fibro fog.

B posted: 'Hello! I won't speak for anyone else, but for me fibro-fog is one of the most frustrating and humiliating things! I know exactly what I am trying to say but I cannot get the words together/ forget what I am talking about- often mid sentence. Sometimes I find that it helps to close my eyes, but most the time I just find myself apologising and looking like a right numpty! What are everyone else's experiences? Anyone got any handy/helpful tips to clear the all-mighty fog?!'

C replied: 'Sadly not found anything to clear the fog. My brain seems to be so easily distracted and I forget what I am talking about. Sometimes I get quite frustrated but other I just have to laugh at myself.'

L commented: 'I wish I had! I'm the same-forget words, what I'm trying to say, stammer etc. I have to write everything down or I'll forget. I used to be so verbally articulate. I just laugh. What else is there for it? I used to get so frustrated, but there's no point, as that just causes stress, and stress causes increased pain. Like being stuck on a whirly gig.'

I shared: 'Hi. Like Lindy I just laugh at myself when I get tongue tied, I try (sometimes unsuccessfully) not to let it get me down or to stress about it. I also write everything down, either in a small notebook I keep with me or a note-taking app on my tablet and phone.'

Do you have any tips on how to cope with fibro fog? Can you help answer other members' questions about Fibromyalgia? Do you have any questions of your own?

Come and join the friendly and supportive discussions on the UK Fibromyalgia forums:

<http://ukfibromyalgia.com/forums/index.php>

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Fibromyalgia and Sex: Part 2: Turning the pain into pleasure by Brandi Clevinger

Sex is everywhere in today's world. It forces its way into every facet of life whether we notice it or not. We are exposed to sex in marketing tactics, on the big screen, in music, and more. Everywhere a person looks there is sex in some way, shape, or form. It's hard to escape its presence especially when involved in a relationship. Every relationship, for the most part, is faced with the topic of sex at one point or another. For some this may not be an issue, but for others – many others – it is an issue. There are many reasons why sex may be avoided, but for fibromyalgia thrivers, sex is usually avoided because of the physical pain it causes.

In April's issue, we discussed The Painful Truth about fibromyalgia and sex. Sex is avoided in a relationship affected by fibromyalgia because of the painful touches, the effect of pain on the brain (the most sensitive sex organ in the body), loss of libido, muscle pain and soreness, and difficulties with sexual performance. These reasons can result in the complete avoidance of sex, leading to strained relationships and disgruntled partners.

However, even with these painful reasons to avoid it, sex is good and healthy for your relationship. If you haven't already, go back and read why in The Painful Truth, and open yourself up to improving the intimacy in your relationship. There are ways to improve your sex life which we will now discuss.

How can your sex life be established or improved?

Acceptance

In order to solve any problem that fibromyalgia presents, coming to terms with the issue is the first step. Sex is no different: you need to understand accept WHY you are not have sex. Accept that it's more about the pain sex causes rather than self-esteem. Accepting this fact is key to starting on the road to a healthy, intimate relationship. Once you have acceptance, the other steps will be easier to achieve.

Open Communication

Having open communication is always subsequent to acceptance when it comes to fibro relationship issues. First identifying, then talking through your feelings, experiences, and thoughts will help your partner understand how you feel; not only with fibromyalgia, but with sex as well. Communicate with your partner the effects on sex that fibromyalgia has for you. Be clear that you have been avoiding sex because of physically painful effects and not because of your lack of feelings. In fact, feelings for your partner are the reason you are being open about sex and open to improving intimacy.

Be sure to time this conversation appropriately. Don't wait until it's "go time;" that is a setup for failure. Instead, start the talk when your partner is neither upset nor distracted, otherwise he/she will not be fully invested in the discussion.

Recognize this will be an ongoing conversation, and not one that will only take place once for a few minutes. Be patient. The conversation will evolve as the intimacy evolves. Do not withhold your feelings or truth about the effects sex is having on your body. If you reach the point of sexual intercourse, and your partner is enjoying it but you are not, stop. Let them know how it's hurting you. Silently suffering through sex for your partner's sake is dishonest and detrimental to your relationship.

Nurture Your Body

Despite sex being painful to your body, try changing your perspective. View sex as nurturing your body, not harming your body. There are many ways that sex is beneficial to the body, and it's important you understand those reasons. As discussed in last month's article, sex can strengthen your body, ease body pains through the release of endorphins, improve sleep with hormones released during orgasm, and reduce overall stress.

Talk to Your Doctor

If you are experiencing a loss of libido due to medications, talk to your doctor about it. Sexual side effects with medications are more common than not, and doctors are aware of this. There are alternatives that can be discussed and considered.

Do NOT stop or change your dosage without your doctor's consent. Stopping or changing your dosage can have fatal side effects.

Natural Treatments

If you are experiencing a loss of libido due to There are ways to manage fibromyalgia symptoms of pain, fatigue, anxiety, and muscle stiffness in addition to (or instead of) medications. Some of these options include meditation, yoga, exercise, healthy lifestyle habits, essential oils, and more. A combination of these options may be the most effective in relieving those symptoms.

Find a Comfortable Position

Just as you find a comfortable position when watching television, you must also find a comfortable position when having sex. Each position affects a part of the body with some positions relieving pressure and others causing pressure. It will take time, but finding the right position for each partner will enhance the pleasure.

For example, if you have low back pain, have your partner get on top or try lying on your side. If you are a woman and experience hip pain, place a pillow under your hips to stabilize your body.

Morning vs Night

Have sex during the time of day that is best for your body, rather than when it's expected. The "norm" is to have sex around bed time, when it's time to go to sleep. However, by the end of the day our fibro bodies are spent and we've hit a wall that prevents us from being able to fully enjoy intimate activities. Even if our minds are looking forward to sex, it can be hard to fully engage when our bodies have checked out for the day.

Rather than wait for bed time, have sex when it's best for you. This may be right after waking in the mornings or after a midday nap. Find what works best for your body and for your partner.

Take It Slow

Throughout the process of finding what works best for you, take it slow. Rushing through any part of the process can cause both partners to become agitated, upset, and turned off. These are opposite results of what you want in a healthy, intimate relationship. Remember that the best results are the ones that take time and that time is going to take patience.

Be Patient

It has been said time after time throughout this article, but it's essential to this entire learning process. Patience, patience, patience, and more patience. Improving your sex life is not going to happen overnight and sex will not likely be instantly pleasurable after one time of trying something new. It may take many trials and error, but you will succeed if you keep your patience and determination focused on the end goal – pleasure for you and your partner.

Soak Before Showtime

Soaking in a warm bath helps loosen muscles and temporarily alleviates muscle pain. Having temporary relief will help the body tune in to the pleasures of sex rather than be interrupted by the pains of it. Take it up a notch with your partner and have a bath together!

Massage and Foreplay

Foreplay readies the body for sexual engagement and turns your attention to the pleasures of sex. Effective foreplay is a great tactic for the fibro body, which is usually preoccupied with the pains of sex. Turn the foreplay into something that will benefit your body while also prepping you for sexual engagement. A sensual massage will have the similar benefits of soaking in a warm bath – it will help loosen the muscles and alleviate muscle pain.

Focus on Quality, Not Quantity

Just like good sleep, good sex is more about quality and not quantity. Determine what can be improved or

adjusted to make sex more pleasurable for both partners. If something is hurting or uncomfortable, communicate to your partner when it happens so quality can be improved.

You could be having sex twice a day, five days a week, but if it hurts each time, it won't be enjoyable. You would be better off having sex once a week when it's most pleasurable for the both of you.

Other Ways to Pique Interest

As stated earlier, effective foreplay gets you ready for pleasurable sex. When the brain can focus on the pleasures of sex, pain takes a back seat. There are several ways to engage in foreplay with your partner. Try these suggestions:

Sharing fantasies: Talk about what you would like to do together and try those fantasies, if possible.

Talk about sex: This is like sharing fantasies, but with more realistic topics such as positions or locations.

Watch sexy movies together: Not necessarily pornography, just a good steamy romance will do. If you both like porn though, go for it!

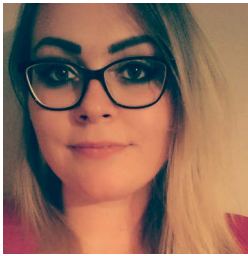
Read an erotic book together: This takes more time and effort than watching a movie together, but a book will allow for more imagination.

Although sex can be painful for the fibro body, the techniques presented here can make it pleasurable. Take the time to figure out what works best for you and your partner; it's worth the pleasure you can achieve. Remember, to turn the pain into pleasure, you must be willing to accept your fibro body, communicate with your partner, and be patient. Those three key ingredients will help you achieve a healthy, intimate relationship.

I am the writer and creator of Being Fibro Mom (www.BeingFibroMom.com) as well as a member of the Board of Directors and Fibro Parenting program director for the non-profit organization Support Fibromyalgia.

I am a follower of Christ, wife to a supportive husband, mother to four sweet children, and a fibromyalgia thriver. Being Fibro Mom was created in 2013 with the hope of helping fibromyalgia sufferers become fibromyalgia thrivers.

My mission is to advocate for parents while enduring the hardships of fibromyalgia.



Trust Your Gut by Emma Stark

Did you know that 90% of the cells within us are not ours? 90% of these cells are microbes, which is the name given to microscopic life forms such as bacteria, fungi and mites. So, if we don't look after these guys, how can we be healthy? Our microbiome (the collection of all the genes in all the microbes in and on our bodies) is vitally important to maintain good health. Humans and microbes depend on each other to survive. Some microbes do cause disease; however, most are harmless and often helpful.

Over the years, the top minds have touched on the importance of looking after your gut. Hippocrates stated that "all disease begins in the gut", which might sound like a bold statement, but considering around 80% of your immune system is in your digestive tract it sounds to me like a pretty good place to start. Thomas Edison realised the importance of eating right and the power of knowledge when he exclaimed "The Doctor of the future will give no medicine, but will instruct his patients in care of the human frame, in diet and in the cause and prevention of disease."

We might be a while to move away from the current protocol of treating all symptoms with medication, however; back when there wasn't even half of the research available than there is now William Oster said "The person who takes medicine must recover twice. Once from the disease and once from the medicine"



So, the importance of looking after your gut has been known for a long time and yet other than the odd advert for probiotic yoghurts we don't seem to be given the right information to do so. You visit the Dr or a pharmacy when you have an upset stomach, you're given a pill to remedy your situation. Only when things get out of hand are they investigated further. Let us end this vicious cycle and become better at trusting our guts and looking after ourselves.

As fibromyalgia warriors, we often suffer from a host of stomach complaints. Many of us have IBS, food sensitivities and intolerances, bodies suffering from deficiencies caused by our conditions and often medication and stress. It's vitally important that we look after our gut health to help feel better each day. Unfortunately, it often feels like a mystery as to what is causing cramps and bloating. I'd like to cover stomach related advice over the next two months as it really is such a big factor of our overall health. To put things into perspective, the average human brain weighs around 3lbs where the bacteria within your digestive tract weighs up to 4lb on average. Knowing this, it's clear to see why our stomachs contribute so much to our overall wellbeing.

What I'd like to cover this month is the role of probiotics and how we can improve our gut health by adding some good bacteria to our diets. Probiotics are a great boost to our immune systems as they help keep bad bacteria at bay and make it difficult for other bad bacteria to survive. They do this by both consuming the nutrients the bad guys need to eat and by blocking receptor sites that the bad guys use to latch on, to cause infection. Put more simply, probiotics are nature's antibiotics!

9 Proven Benefits of Probiotics

1. Improve digestion
2. Produce vitamins
3. Lower cholesterol
4. Regulate hormones
5. Boost immunity
6. Increase resistance to infections
7. Relieve IBS symptoms
8. Relieve thrush symptoms
9. Reduce the risk of certain cancers

Top Probiotic Foods

1. Yoghurt
2. Miso Soup
3. Sauerkraut
4. Kefir
5. Kombucha
6. Pickles

The role of probiotics is particularly important with those of us with fibromyalgia as it helps our bodies heal from the medication that we take, as well as the related symptoms we suffer from. Where possible, try to add probiotics to your diet each day. This can be from fermented foods such as probiotic yogurts or some supplements. However, sometimes probiotics in foods aren't enough. Particularly if you are under prolonged periods of stress, just completed a course of antibiotics or recovering from a virus. In these circumstances, it's wise to take a multivitamin which contains probiotic cultures to help boost the level of good bacteria in your gut which in turn will aid your body's recovery.

By eating foods that feed the good bacteria in our gut we can help to boost the number of good guys! The best food for health promoting bacteria are called "fructo-oligosaccharides" (FOS) or "prebiotics" which you can find in banana's, barley, garlic, onions, soya beans and wheat.

One study has shown that by eating banana powder the lining of the stomach was thickened, where aspirin, which is commonly used, thins the lining of the stomach.

The last part I would like to cover on improving your gut health is how to look for food sensitivities and intolerances yourself. I often get asked about the best things to eat to get rid of stomach complaints but as we are all different there is no one size fits all which is why many of us still have stomach complaints when we are trying our best to eat healthy and do the right things. If you follow these simple rules you can help find out if you are sensitive or intolerant to any allergens.

Pursue a simple, pure diet of lightly cooked vegetables, fish, non-gluten grains (rice, millet, corn, quinoa), lentils, and beans, plus ground seeds for essential fats. Avoid any suspect allergens, including wheat and dairy products, coffee, alcohol and spices for ten days to see if this makes a difference. With any food sensitivities or intolerances, you should feel your symptoms improve with keeping your diet simple and allergen free. If this is the case, slowly start to introduce each type of food gradually e.g for a few days implement wheat and monitor symptoms, if no changes occur with wheat then you can move on until you have gradually completed your list of omitted foods. When you have implemented all foods back into your diet you should have a clear idea of any foods that may be aggravating your symptoms. You can then alter your diet accordingly. However, in many cases, you will go through this process and notice little difference during the diet, if this happens and you are still feeling as though your

stomach isn't right, trust your gut and get referred to a gastrointestinal clinic where anything serious can be ruled out.

As always, if anyone would like to discuss further or has any questions please do not hesitate to contact me. For anyone who would like for me to discuss their nutritional needs individually please record food and symptoms for two weeks for me to get a good picture of your diet.

Emma qualified as a nutritional therapist after struggling to deal with the symptoms of fibromyalgia and M.E. She has previous experience of strength and conditioning from being a rugby coach for years before becoming a mortgage advisor and having to leave her job for health reasons. Now she is committed to helping others with what she has learned and continuing recovery.

The Fibromyalgia Exercise Guide

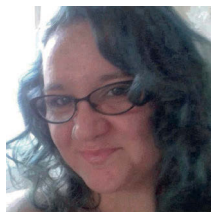
by David Jenkin

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The hidden signs of depression

By Naomi Harvey

We all have periods in life where we just can't find anything happy. These aren't always depressive episodes but it's good to know what to look for in those we love for the ones that are. Especially when it can be so hard to spot in ourselves when the depression starts. I know for definite when I have hit a bad spot in as I sleep for most of the day every day, but my husband spots it coming long before I do. No matter the trigger, if there is even one, depression tends to have similar symptoms that while may not seem a warning to most are usually always present in some form or another and knowing your own signs and the one of those you love it helps to know them.

Unusual habits

Changes to your sleeping habits, sleeping longer or less than before, always tired and irritable, not sleeping at all, can all be indicators of depression. Changing to eating habits too, eating less or more of the wrong foods as an inability or lack of interest in cooking/preparing healthy foods. Drinking more, esp alcohol, or not drinking at all. Knowing your own "healthy" habits when it comes to eating/drinking/sleeping can help you find the warning signs of an episode beginning. I tend to go off food altogether in the worst points for me, I avoid alcohol in general completely but when I did still drink my intake would rise rapidly at the bad points.

Seemingly forced emotions and/or making excuses

Look behind the smile, see the emotions in the eyes, seems poetic clap trap but it's a good indicator if you don't see the happy emotions in the eyes that someone is forcing themselves to show emotions they think people are expecting of them. The deeper into the depressive episode they go though they will start to reject invitations and make excuses for why they can't attend occasions or get together. This isn't a reflection on who's doing the asking but more on emotional state of them.

Talking more philosophically then normally

They may change how they talk, going from normal conversation to deep, intellectually philosophical conversations.

Asking for help then retracting it

They may ask you to talk, or to help them out but then change their mind and decide that they don't need the help or want it. This is usually because they can't seem to hide the emotions they are feeling and know they do need help but aren't sure exactly how to really ask, or even if they deserve help. Most emotions are so heavily intensified that any normal emotion will be completely overwhelming to them. They also feel less happy emotions or optimism as before so while they know they do need help they have little faith anything could actually help.

Less aware of physical appearance

Body awareness drops significantly with depression, they have less interest in self care and so they fail to complete basic hygiene. They will take less interest in the way they dress, or do their hair, they may not bother with personal hygiene itself and not see any reason to actually make an attempt at being presentable.

Unusually irritable

With the sleep issues and mood disturbances it becomes harder and harder to control the mood swings. Small things that really shouldn't be much of a problem can be greatly increased and wind them up something rotten. Little annoyances become huge issues, and things that wouldn't normally bother them become triggers of nasty mood swings.

Find it hard to respond to concern or optimism

Offers of help will tend to be spurned as they find it hard to believe that anyone would want to actually help them out. Not out of any failure on the friends or loved ones part but simply because their mind is telling them that they aren't worth the help. They fail to see hope and optimism as well, feeling that these emotions are simply not justified given their current state.

Lack of interest in previous enjoyments

Normal hobbies/entertainments simply can't hold their interests any more, not because of a change of interest but a feeling of complete lack of interest in anything, try as they might to keep up the act that they are enjoying things it all becomes just too much effort for the most part.

Days are various

An important thing to remember is that like most chronic illnesses their days will be completely various. There is no warning as to how each day will be, and just how their moods will be as well. Be patient with them and hopefully you will be able to help them get through each dark episode, one day at a time.

For me depression is always with me, and while I know when I am in the worst episodes, and I try hard to fight through some days it just seems too hard, I know if I can make it to the next day then I will, with all the love and support of those around me. Be patient if a loved one is struggling with depression, their mind is telling them they aren't worthy or deserving of it so make sure your telling them that they are. If you're the one fighting this nasty black dog then all my love to you and good luck in your fight to make it though.

<http://crackedbroken.blogspot.co.uk/>



ASK BRIAN

Brian Barr is a solicitor at Brian Barr Solicitors who specialises in representing fibromyalgia sufferers with accident and insurance claims.

Dear Brian

I was in a road accident when I suffered a fracture to the head of my femur. Court proceedings have been issued and there was a Case Management Conference. By that time both parties had obtained reports from orthopaedic experts, I also had a psychiatrist and the Defendant had obtained surveillance evidence. I was still in pain and my solicitor asked for a pain management expert. This was refused because it is for the court to decide whether or not I am genuine and, if I am, the level of my ongoing pain and disability can be determined by the orthopaedic experts. Is this right and should I appeal?

Edward

Dear Edward

This argument was recently run in a case called Craven-Hodgson v Athersmith. It went to the Court of Appeal where the Claimant's barrister argued that judges managing cases routinely allow instruction of pain management experts and it should therefore be allowed here. It was accepted that it is for the judge to decide whether a Claimant is genuine or not, but the question of what pain the Claimant genuinely has was not necessarily purely for the orthopaedic experts to work out. They might not be able to give an organic explanation, but the pain may still be perfectly genuine. That is a matter for a pain consultant to consider. That was certainly the view of Lord Justice King who granted permission for the Claimant to appeal. Hopefully, the appeal will be successful and I would advise you to appeal.

Brian

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THE FIBROMYALGIA EXERCISE COLUMN



Shoulder Ligament Pain by David Jenkin

I am often asked about this particular issue in persons with fibromyalgia quite often, piercing shoulder pain deep in the joint. I do not hold physiotherapist qualifications and it would be a good idea to seek one out for them to examine you if possible, but this column will offer up some very basic movements of the arm which can alleviate deep shoulder pain.

The Rotator Cuff

Deep shoulder pain may possibly reflect a small tear in the Rotator Cuff. The Rotator Cuff is a group of tendons and muscles in the shoulder, connecting the upper arm (humerus) to the shoulder blade (scapula). The rotator cuff tendons provide stability to the shoulder; the muscles allow the shoulder to rotate. A Rotator Cuff tendon may be weakened by age or wear and tear and cause pain. Deep shoulder pain could also be caused by tendinitis, impingement, bursitis or a frozen shoulder so it is always advisable to seek advice from a physiotherapist.

Shoulder Exercises

Internal Flexion

Stand up straight and tuck your elbow in tightly by your side, and bend your elbow to 90 degrees so that the forearm extends out in front, away from the body. Keep elbow in position and slowly bring just the forearm in across the lower chest. Then slowly extend back to the start position and repeat. Add a bottle of water or a light dumbbell if you want to add intensity

Upward Flexion

Stand up straight and rest arm down by your side, with palms facing behind you. Tuck your arm in by your side. Slowly extend the back of your hand up towards your shoulder and slowly return it to the start position

Lateral Extension

Form the same start position as internal flexion. Slowly extend the forearm out to the side, away from the body, very slowly and very gradually. Slowly return to the start position and repeat.

To begin with, look to complete no more than 10 repetitions on each side. You may just as well perform these exercises on non-painful shoulders as well. These exercises should do no harm, if any of them result in a shooting pain or dull ache then stop immediately. And please do visit your doctor or a physiotherapist if symptoms persist or worsen

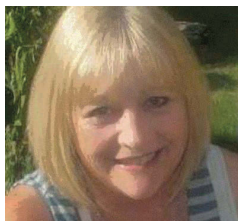
Martin Westby and I have co-authored a Self-Help Exercise Guide that includes a whole section on how to do establish this consistency effectively. To order a copy please follow the following web link:

<http://tinyurl.com/o9s6bw8>

Or alternatively you can email the magazine at office@UKFibromyalgia.com

or myself on davidjenkin@hotmail.com

and we can assist you in purchasing your copy. To contact me or enquire about 1:1 training prices www.davidjenkinfitness.co.uk

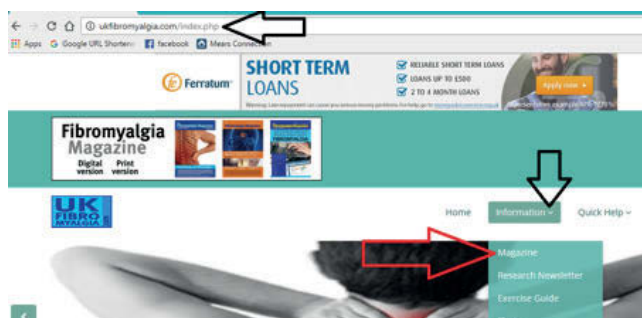


UK Fibromyalgia "How to Guide – Magazine and Shop"

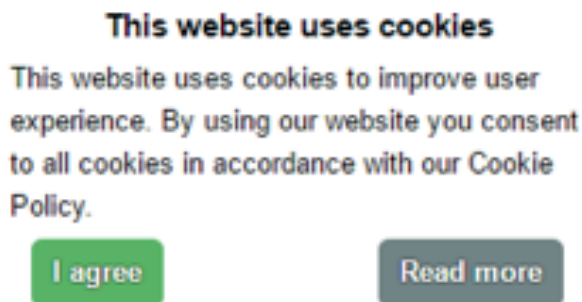
by Karen Lovegrove

This month we are showing you how to access the UK Fibromyalgia Magazine subscription, and the shop.

After clicking on either Internet Explorer, Google Chrome, Safari or whatever browser you want to use, you then need to place the following address in to the top address bar, as shown below, then click the small arrow beside the information menu, and then select Magazine...



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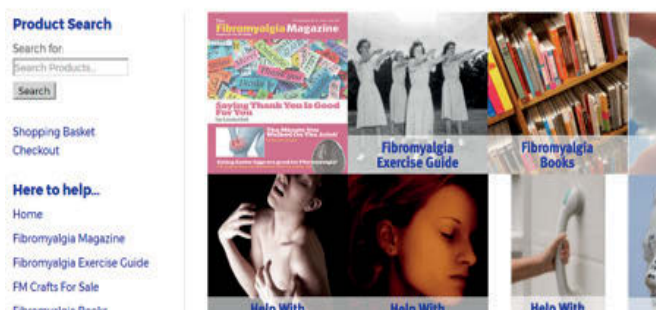
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The Fibromyalgia Shop



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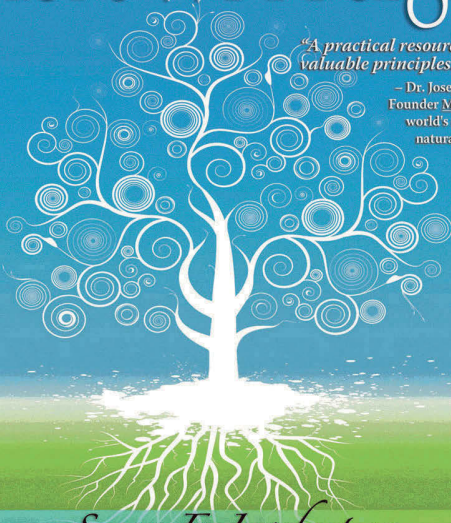


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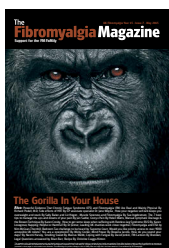
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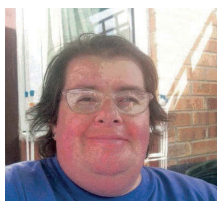
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DOWN IN THE MOUTH!

By Helen Watts

I have always had problems with my teeth and wondered if others had similar problems so I asked the Facebook groups.

'KSH' said "Since the majority of FM sufferers suffer with a dry mouth possibly due to meds, together with many of us grinding our teeth, it's no surprise our teeth suffer. I'm sick of dentists and the pain"

'MAH' replied "Yes and I'm not at all happy, as always looked after them. Since fibro I struggle with grinding, sensitivity and clenching and it shows. Chipped a front tooth and I'm terrified off dentists. I noticed amitriptyline and duloxetine make my mouth go dry within half an hour of taking them"

'SAG' stated "I've had nothing but trouble with my mouth, gums and teeth since I've had fibro. My jaw pops all the time, I have pain on either side of my jaw which is really bad, I haven't been able to eat properly for nearly 4yrs. I've had four teeth taken out and awaiting to be put to sleep to have another 6 removed. I have infections a lot, my gums become red and very sore".

'GN' said " I've had Fibromyalgia for about 5 years now (probably longer but wasn't diagnosed until 2012). I've always looked after my teeth and gums but this past year have noticed that I'm having a lot of mouth related problems. Firstly I seem to be getting a lot of mouth ulcers under the tongue and at the sides and occasionally on the tip of the tongue. At the same time my back teeth feel like they're going to fall out and the gums become slightly inflamed. I then get toothache which starts off lightly but ends up throbbing and starts of a problem with the temporal mandible joint. Now I feel that I've been punched several times in the mouth".

'JG' replied "Mine have all crumbled away to the gum line at the back and the whole of the top left side, fortunately not the front ones, never had any real big problems before fibro".

'LH' stated "I've had fibro for 8 years and my teeth are terrible, they have broken/crumbled/ hurt to put together/very sore gums and the gum around some teeth look like they've shrunk and you can see some of the tooth that should be under the gum".

'AS' said "My dentist actually said that lansoprazole, which I take for acid reflux, can help protect the enamel on your teeth. I have noticed a dry mouth through taking Amitriptyline and Oxybutin medication, my dentist advised chewing sugar free gum, to help with the dryness. My teeth have started to crumble away, as not long ago, I had to have one capped, as it crumbled. My gums are so tender and sore. I'm having problems

with my jaw locking too and being so painful. I grind my teeth too, especially in my sleep apparently".

'EP' replied "I've had two teeth pulled since I was diagnosed I also grind my teeth and have TMJ dysfunction; getting a new mould for replacement guard in June once my teeth have settled in to their position. My mouth is terribly dry a lot of the time and there's not a lot to help"

'AV' commented "My teeth are disgusting and thats putting it mildly I have snapped teeth, fillings missing and teeth growing where they shouldn't but I am petrified of the dentist".

'JG' said "My teeth are quite literally crumbling, costing me a fortune at the dentist".

'ST' replied "I had perfect teeth until started signs of fibromyalgia. Now many missing and the rest are very bad. The ones which can be painful get much worse when I am in flare and get better when I am not".

'MI' stated "I have problems with pain in the gums, the pain is unbearable dentist gave me a mouth guard, a soft tooth brush helps and I find a warm flannel or hot water bottle on the side of my face also helps".

'LA' said "I have begun to grind my teeth since the start of fibromyalgia and I have several teeth with small chips out of them. I have had to get a specially made teeth shield from my dentist to protect my teeth from further damage".

'LB' replied "I started getting a problem with a dry mouth years ago so I started chewing sugar free gum, it works a treat and helps to keep the mouth healthy and helps prevent receding gums".

'HEB' said "My teeth were beautiful then they became loose , when the dentist x rayed them he found a lot, including back teeth had no roots".

'JK' replied "My teeth started to become loose then decayed following chemotherapy but it got worse when I started to show signs of fibro. i have had two lots of dentures made but they have both made my mouth ulcerate within hours".

So it sounds like Fibro causes lots of teeth problems. Have you found this, or are your teeth no problem at all. Whatever your point of view come along to the Facebook groups or forum and join the discussions.

Helen Watts



Worldwide Research

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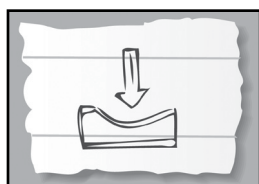


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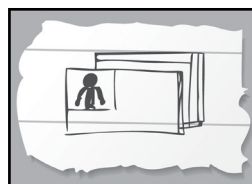
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Denise Shotter	Guildford and Bordon monthly meetings 08448872358 5-7pm email denise.guildfordfibro@yahoo.co.uk
Diane Jaques	Burnley, Lancashire - 01282 701390 after 7.30pm Mon-Fri if you would like to chat
Diane Leak	Darlington Friendship Group - 1st Wednesday of the month 12pm-2pm. Upstairs Café of the Darlington Dolphin Centre.
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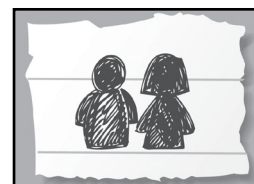
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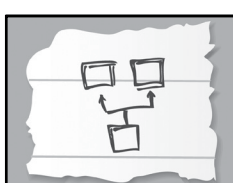
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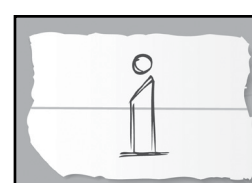
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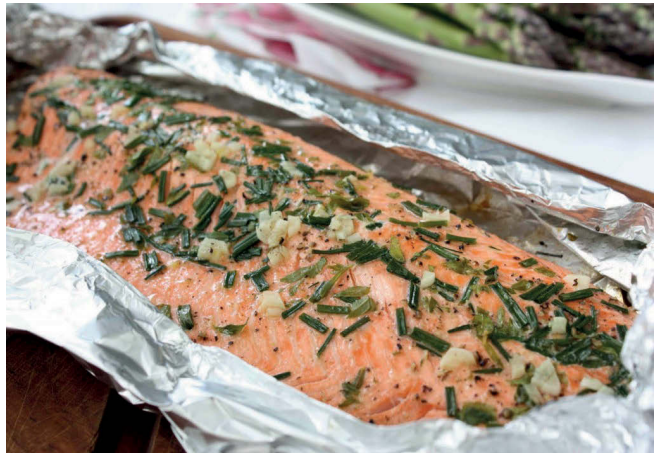
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Christine's Recipe

Here are two easy recipes for a tasty and healthy main meal and pudding. Try to make your ingredients organic - for instance, vine ripened tomatoes taste good as well as being healthy. Also, you may have heard that salmon produced from salmon farms are fed on antibiotics and various other poisonous chemicals - they are even fed coloured foods so they turn from a sludgy grey to an artificial deep pink. Unfortunately, salmon containing poisons do us more harm than good. Wild salmon, on the other hand, may be a little more expensive, but it is free from poisonous chemicals and a rich source of vitamins, minerals and oils.

Barbecued Salmon (serves 2-4)

- 1 whole wild salmon
- 1 tbsp olive oil
- 3 tomatoes, chopped
- 6 shallots, chopped
- 1-3 garlic cloves, to taste
- pinch of sea salt, or to taste
- pinch of ground black pepper, or to taste



Place the salmon on a piece of foil large enough to wrap it in. This allows steam to build up, which cooks the fish and infuses it with the flavour of the other ingredients. Drizzle the olive oil on the fish, add the tomatoes, whole garlic cloves and finely the chopped shallots. Add the sea salt and black pepper. Wrap the whole lot in the foil. Place in a pre-heated oven and cook for 20 minutes, gas mark 6/200C/450F. Serve with a salad or baked potato.

Figgy Apples (serves 4)

- 4 large cooking apples, peeled and cored
- 75 g (3 oz) dried figs, chopped
- 4 tbsp apple juice
- 1 tbsp lemon juice
- 1 tbsp raw honey
- 8 tbsp organic natural live yogurt

After making a shallow cut around the middle of each apple, place the honey, figs and lemon juice into a small pan and heat gently, stirring until well blended. Use this mixture to fill the apple cavities, pressing down firmly. Place the apples in a lightly-oiled ovenproof dish and pour over the apple juice. Bake in a preheated oven at 180F/350C, for 45-55 minutes, until soft. Serve hot, placing 2 tbsp yogurt onto each serving.



Christine Craggs-Hinton is the author of 'Living with Fibromyalgia', 'The Fibromyalgia Healing Diet' and 'The Chronic Fatigue Healing Diet', from Sheldon Press. They are available from the www.FibromyalgiaShop.co.uk website and from all good book shops.

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