

# You Can Treat Fibromyalgia And Chronic Fatigue Syndrome Successfully

BY KENNETH MUHICH, DC

For many allopathic physicians, fibromyalgia and, to a somewhat lesser extent, chronic fatigue syndrome (CFS) do not fall into the allopathic practice of relying on objective findings to complete a proper diagnosis. Today, however, more pressure is being placed upon these health providers by their colleagues to exhibit open-mindedness in the diagnosis and treatment of these conditions.

In my clinical experience of more than 20 years of working with fibromyalgia/CFS patients, alternative medicine techniques, including chiropractic, acupuncture, and physical therapy, are important adjuncts to eliminating or reducing the secondary conditions that are exacerbated by fibromyalgia and CFS. Fibromyalgia and CFS, however, are conditions that must be treated on a cellular level according to a treatment protocol that I have used with great success.

## Patient History

Mrs. DW entered my clinic in October 2007 for evaluation and treatment of multiple conditions including fibromyalgia and CFS, although these conditions had not been officially diagnosed. Mrs. DW, age 52, was working as a nurse in a local hospital. She stated that she had a difficult childhood that caused her to leave home at the age of 16. In her early 20s, she became ill with endometriosis and urinary tract infections, which led to the development of ovarian cysts, weight gain, and depression, with subsequent oophorectomy and appendectomy.

After surgery she seemed to improve and enjoyed her work as a nurse. Soon, however, she began to have trouble remembering things and suffered from irritability and sleep deprivation. Her joints began to hurt and she had constant pain that progressively worsened over several years. Prescription pain medications did not help. Her doctors were frustrated, along with her husband, for lack of a proper diagnosis.

Six years before coming to my clinic, she began seeing a chiropractor who educated her on an antiinflammatory diet, which seemed to help. As might be expected, Mrs.

DW yearned for a complete cure of her condition. She and I met at a physician pain and fibromyalgia seminar at the hospital at which she worked. During the seminar I had the opportunity to introduce the protocol I had been using to successfully treat patients with the same symptoms. Since my protocol was quite different from those proposed by allopathic physicians, Mrs. DW approached me to discuss the possibility of coming to my clinic for an evaluation.

## Examination

Initial examination of Mrs. DW included completing the American College of Rheumatology 1990 Criteria for the Classification of Fibromyalgia to validate her diagnosis. She tested positive in all areas, including 16 out of 18 specific points of tenderness. Therefore, her initial diagnosis was fibromyalgia *and* CFS, separate from any other diagnosis at this point.

This examination was followed by a thorough orthopedic and neurological evaluation for her secondary conditions. Apart from her fibromyalgia and CFS symptoms, she complained of low back pain radiating into both lower legs (posterior) and neck pain radiating into both arms, along with head pain. Her symptoms also included intermittent numbness, dizziness, muscle spasms, loss of balance, irritable bowel syndrome (IBS), bloating, gas and many others that might have been associated with fibromyalgia/CFS. Positive findings from these tests validated a lumbosacral condition along with a cervicobrachial condition that were separate from the fibromyalgia/CFS diagnosis.

## Treatment Program

The treatment plan for Mrs. DW consisted of two separate programs. The first involved ridding the patient of the secondary conditions in the neck and lower back. Since these were chronic conditions, I explained that an aggressive period of treatment, including chiropractic adjustments, physiotherapy, acupuncture, and rehabilitation, was called for to elicit functional improvement in the spine as soon

as possible. This would help separate the fibromyalgia and CFS conditions and their symptoms from the secondary spinal conditions.

As we began this initial spinal treatment, we also introduced the protocol for fibromyalgia and CFS. The protocol is a combination pre-protocol antiinflammatory dietary program and a protocol developed by R. Paul St. Amand, MD. The protocol relies on guaifenesin along with the strict avoidance of all salicylates that block the positive action of guaifenesin. Guaifenesin is thought to relieve fibromyalgia symptoms by ridding muscles, tendons, joints, and other tissues of harmful calcium phosphate deposits that result from defective kidney function.

The antiinflammatory dietary program involves a restricted hypoglycemic diet along with high levels of the omega-3 fatty acids eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA) magnesium (which stimulates the mitochondria), malic acid (another antiinflammatory),

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and conjugated linoleic acid, along with a liver detox program. This had an excellent initial response. Within two weeks, Mrs. DW's fibromyalgia and CFS symptoms had improved appreciably. Her

spinal conditions improved more slowly, but did show improvement. The patient's "fibro fog" was reduced, her energy increased, joint and muscle pain improved, and her IBS, bloating, and gas all but disappeared.

Within two months of introducing the entire protocol, the patient had lost 13 pounds and two dress sizes. Weather changes did not negatively affect her. Her mood swings decreased considerably, she smiled a lot, her sense of humor resurfaced, and she had a much more enjoyable relationship with her husband. After two years and five months, Mrs. DW is seen only for structural problems due to her normal activities of daily living. Her fibromyalgia and CFS symptoms abated completely after four months.

We have been in contact with Mrs. DW as a follow-up to her treatment over the past seven years. Because of the success of the protocol, Mrs. DW decided to retire from her position as a nurse, go back to school, and obtain a degree in ministry, which she now uses when visiting hospitals and retirement centers. She feels she never would have

been able to accomplish these changes in her life without this protocol.

### Final Thoughts

It is important to differentiate the fibromyalgia/CFS from other conditions the patient may have in order to treat them separately and evaluate symptomatic changes. As stated, fibromyalgia/CFS conditions magnify other secondary conditions and their presenting symptoms. Treating secondary conditions aggressively, especially spinal or extremity conditions, with chiropractic is very important in the overall treatment plan.

Once the fibromyalgia/CFS pre-protocol and protocol is established, it is the primary responsibility of the patient to stay on protocol at home. Educating the patient and having a strong commitment to the overall program is as important as the protocol itself.

After many years of trial and error working with many patients, I have found the above treatment protocol to be extremely successful in helping patients like Mrs. DW achieve a normal state of living. Patients are now returning to work and enjoying activities previously only dreamed of, such as unrestricted exercise and vacationing, with no negative symptomatic reactions. Normalcy is indeed within their grasp.

### Suggested Reading and Resources

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