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Brody Schmidt

Fibromyalgia patient Jeanne Barrett receives cranial sacral therapy from physical therapist Mary Silva.

Relief from pain

By SueMae Bertenshaw
Staff Writer

Jeanne Barrett had not slept in a bed since 1974. Instead, she lay on her back on the floor with pillows under her knees because the pain in her neck and shoulders was so severe.

When the stiffness spread to her legs, she switched to a soft-tissue chiropractor and blamed other symptoms on the stress of school and work.

"I would have one infection after another," she said.

Changes in weather began to bother her, along with changes in sleep patterns.

By the time she completed her bachelor's degree in leisure sciences, she realized she had too much stiffness and too little energy to work in her chosen field.

Barrett changed to a career in stu-

dent personnel and guidance, but still struggled with the demands of work. She experienced a lot of absenteeism because of fatigue and eventually was relieved of certain duties, because her performance level had deteriorated.

It was not until 1993 that her condition was finally diagnosed as fibromyalgia syndrome. FMS is a vague set of symptoms that cause pain in the muscles and connective tissue throughout the body.

"I had spent all day in a car from Austin, Texas, to Edmond. I knew I would be stiff, but by the time I finished my stretching exercises and hot bath, I was shaking all over," she said.

She went to the emergency department, received muscle relaxants and was referred to an internist. There is no test for fibromyalgia, but lab work ruled out a variety of diagnoses with similar symptoms.

According to Dr. Michael Strange, then of Stillwater, she did not have multiple sclerosis, thyroid problems, lupus or arthritis. He referred her to a rheumatologist at McBride Bone and Joint in Oklahoma City.

"Dr. (Larry) Willis said I had fibromyalgia, that there was no cure, and I would need to take pain pills and muscle relaxants for the rest of my life," she said. "It was like a happy dance — there was a name for what was wrong with me."

Unlike Barrett, many people suffering from fibromyalgia go undiagnosed and eventually hear the hopeless put-down, "It's all in your head."

Now, research is actually leaning in that direction. Patients with FMS have been shown to have chemical imbalances in the brain, especially lower levels of pain inhibitors (serotonin, dopamine and norepinephrine) and

higher levels of substance P, a pain transmitter.

Even physical therapy techniques have changed to treat patients with fibromyalgia.

Patients of Dr. John Williams, Barrett's internist, have reported measurable reduction in symptoms with cranial sacral therapy used with traditional manual techniques.

"Some patients hurt so bad, we couldn't even evaluate them at their first visit," said Mary Silva, a physical therapist certified in CST at Stillwater Medical Center's Total Rehab.

According to Silva, on a scale of one to 10, patients with fibromyalgia report feeling eight to 10 most of the time — even while taking high doses of pain medications and muscle relaxants.

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"When I went for my first treatment," Barrett said, "Mary explained what she was going to do. I was just a lay person, so I didn't question the procedure. I just know that my toes suddenly popped apart when she was working at the base of my skull."

Prior to the treatment, she added, it had been years since her toes had been able to separate because of tightness.

She remembers working on her flower beds late that afternoon — without pain — even though the May 3, 1999, tornadoic front was heading toward Stillwater. In June 1999, she slept in a bed for the first time in 25 years.

After using all her leave and being on family medical leave for four months, she gradually returned to work full-time. She has not refilled her prescription for pain medication since May

2000 and her last CST treatment was December 2000.

"My supervisor and co-workers are so supportive now. They can see a complete turnaround in my energy level and attitude. It was hard to smile before when I was in pain all the time," Barrett said.

"This treatment may not work for everyone, but if you go once, you should know whether it will or not."

Silva said patients must be referred by a physician to be evaluated for any type of physical therapy and should check with their insurance company for coverage.

Barrett also leads the Fibromyalgia Support Group which meets from 7 p.m. to 9 p.m. on the second Tuesday of each month in Room 313 of Stillwater Public Library. For more information, call 624-9748.