



January 2012

# THE DERBY FIBRO

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**HAPPY  
NEW  
YEAR**

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# *Message from Jackie*

*Hi Fibro friends,*

*Happy new year everyone, hope you all had amazing Christmas and New Year celebrations and you all got what you hoped for or asked for.*

*This year we want to get more advertising out there for the group meetings so that we can hopefully get more people to attend the meetings, if anyone has any appointments or visits to their doctors coming up it would be greatly appreciated if you could take some posters or leaflets and ask if they could put them up for us.*

*If anyone has any ideas for content for the newsletter or website please don't hesitate to forward it to Doug by any of the communication methods at the bottom of the front page.*

*We will be starting the library again this year and will be asking people their thoughts on way in which we can stop the books from going missing as they are not cheap to replace.*

*Best wishes*

*Jackie x*

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*Disclaimer: The information given in this document does not necessarily imply endorsement by The Committee Members of Derby Fibromyalgia Support Group. The Committee Members or the Group cannot be held responsible for omissions and / or errors of detail in any information that is exchanged in a discussion session - whether it is in a formal or informal situation, delivered to the body of the meeting by a visiting speaker or produced in a printed document.*

*Any information or recommendation of a medical or legal nature must always be discussed with a qualified professional*

# Meeting Dates 2012

Thursday	Saturday
10.30am - 12.30am	2.00pm - 4.00pm
January 12 <sup>th</sup>	January 28 <sup>th</sup>
February 9 <sup>th</sup>	February 25 <sup>th</sup>
March 8 <sup>th</sup>	March 24 <sup>th</sup>
April 12 <sup>th</sup>	April 28 <sup>th</sup>
May 10 <sup>th</sup> <i>Coffee Morning venue to be clarified</i>	May 12 <sup>th</sup> <i>National Fibromyalgia awareness day</i>
June 14 <sup>th</sup>	June 23 <sup>rd</sup>
July 12 <sup>th</sup>	July 28 <sup>th</sup>
<b>THERE ARE NO MEETINGS IN AUGUST</b>	
September 13 <sup>th</sup>	September 22 <sup>nd</sup>
October 11 <sup>th</sup>	October 27 <sup>th</sup>
November 8 <sup>th</sup>	November 17 <sup>th</sup>
December Christmas Lunch Venue and Date to be clarified	
All dates are subject to cancellation or change at short notice	

## Forthcoming Church Events

Speakers			Regular Events	
<b>January</b>			<b>Open Circle</b>  Every 2 <sup>nd</sup> and 4 <sup>th</sup> Thursday Of Each Month  <b>7.30pm</b>  No Admission After 7.35pm	<b>Healing Services</b>  Thursdays  <b>2.00pm – 3.30pm</b>
Sun 15 <sup>th</sup>	6.15pm	Emily Baker		
Mon 16 <sup>th</sup>	2.30pm	Ken Sharpe		
Sun 22 <sup>nd</sup>	6.15pm	Julie Brough		
Mon 23 <sup>rd</sup>	2.30pm	Richard Press		
Sun 29 <sup>th</sup>	6.15pm	Hazel Boaden		
Mon 30 <sup>th</sup>	2.30pm	Lisa Bonito-Day		
<b>February</b>				
Sun 5 <sup>th</sup>	6.15pm	Iris & Malcolm Bradshaw		
Mon 6 <sup>th</sup>	2.30pm	Maria Davey		

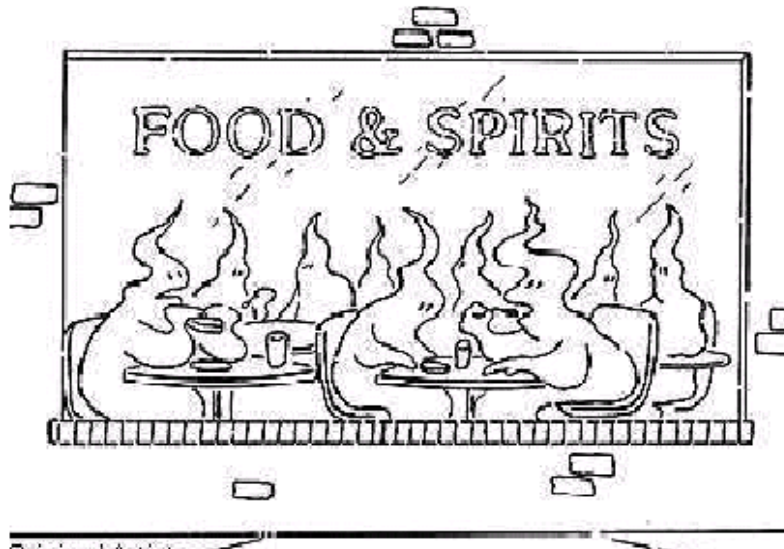
### SPECIAL EVENTS

## March

# Saturday 10<sup>th</sup>

## 7.00pm

Book in advance



For More Information

18 Charnwood Street, Derby. DE1 2GU.

Tel: **01332 386 204.**

[www.snu-emdc.org.uk/charnwood](http://www.snu-emdc.org.uk/charnwood)

# Try These



## Sausage casserole

### Ingredients

- 1–2 tbsp sunflower oil
- 12 good quality pork sausages
- 6 rashers rind less streaky bacon, cut into 2.5cm/1in lengths
- 2 medium onions, thinly sliced
- 2 garlic cloves, crushed
- ½–1 tsp hot chilli powder or smoked paprika
- 1 x 400g/14oz can chopped tomatoes
- 300ml/10fl oz chicken stock
- 2 tbsp tomato purée
- 1 tbsp Worcestershire sauce
- 1 tbsp dark brown muscovado sugar
- 1 tsp dried mixed herbs
- 2 bay leaves
- 3–4 sprigs of fresh thyme
- 100ml/3½fl oz red or white wine (optional)
- 1 x 400g/14oz can butter beans or mixed beans
- salt and freshly ground black pepper



### Preparation method

1. Heat a tablespoon of the oil in a large non-stick frying pan and fry the sausages gently for 10 minutes, turning every now and then until nicely browned all over. Transfer to a large saucepan or a flameproof casserole dish and set aside.
2. Fry the bacon pieces in the frying pan until they begin to brown and crisp then add to the sausages.
3. Place the onions in the frying pan and fry over a medium heat for five minutes until they start to soften, stirring often. You should have enough fat in the pan, but if not, add a little more oil.
4. Add the garlic and cook for 2–3 minutes more until the onions turn pale golden-brown, stirring frequently.
5. Sprinkle over the chilli powder or smoked paprika and cook together for a few seconds longer.
6. Stir in the tomatoes, chicken stock, tomato purée, Worcestershire sauce, brown sugar and herbs.
7. Pour over the wine or some water if you're not using wine, and bring to a simmer.
8. Tip carefully into the pan with the sausages and bacon and return to a simmer, then reduce the heat, cover the pan loosely with a lid and leave to simmer very gently for 20 minutes, stirring from time to time.
9. Drain the beans and rinse them in a sieve under cold running water. Stir the beans into the casserole, and continue to cook for 10 minutes, stirring occasionally, until the sauce is thick.
10. Season to taste with salt and freshly ground black pepper and serve with rice or slices of rustic bread.



## Chocolate mousse

### Ingredients

- 175g/6oz dark chocolate (70 per cent cocoa solids), chopped
- 110g/4oz butter, cut into cubes
- 3 large free-range eggs, separated
- 2 tablespoons of either rum, brandy or espresso coffee (according to preference)

### Preparation method

1. Melt the chocolate slowly in a heatproof bowl over a pan of barely simmering water.
2. Remove the bowl from the heat and add the butter. Stir until melted and combined.
3. Add the egg yolks one by one, stirring constantly.
4. Add either the rum, brandy or espresso coffee (depending on your preference).
5. Whip the egg whites until soft peaks form when the whisk is removed, then gently fold them into the chocolate mixture.
6. Transfer the mousse to small cups or ramekins and refrigerate overnight, or until ready to serve.

# Light & Noise Sensitivity in Fibromyalgia & Chronic Fatigue Syndrome

By Adrienne Dellwo, About.com Guide

## The Symptom of Light & Noise Sensitivity:

Light and noise sensitivity in fibromyalgia (FMS) and chronic fatigue syndrome (ME/CFS) have been scientifically established since the early 1990s, but they're still under recognized and rarely make symptoms lists. Rest assured that you're not alone in experiencing this symptom!

When I used to take my kids to daycare, some mornings the noise would hit me like brick wall. In an instant, I'd have pain, nausea, dizziness, trembling, and a looming panic attack. More than once, I had to call in sick as a result of it. I've had similar experiences with bright or flashing lights or with visual chaos in general.

## Causes of Light & Noise Sensitivity:

We don't know the causes of light and noise sensitivity, but they're often called "generalized hypervigilance." That means our bodies are constantly on high alert. It's also a symptom of post-traumatic stress disorder.

Hypervigilance is beneficial for people in potentially dangerous situations, such as soldiers or police officers, because it speeds up several processes and helps with crisis response.

In FMS and ME/CFS, however, hypervigilance overwhelms us. We don't know why, but possibilities include:

- Nervous system abnormalities
- Stress-system (HPA axis) problems
- Neurotransmitter dysregulation
- Blood pressure irregularities
- Symptoms of Generalized Hypervigilance:
- Common symptoms of hypervigilance include:
- Anxiety
- Rapid heartbeat
- Trembling
- Rapid or labored breathing
- Sweating
- Irritability
- Fatigue
- Sleep disturbances:

## Treating Light & Noise Sensitivity

So far, we don't have research showing that specific treatments alleviate light and noise sensitivity in FMS and ME/CFS.

In people with PTSD, treatment for the anxiety related to generalized hypervigilance can include mental-health counseling and medications, especially antidepressants. These medications are also common treatments for FMS and ME/CFS.

Supplements for anxiety and stress may help you cope better with light and noise sensitivity as well. Some people also benefit from treatments such as massage or acupuncture.

## Impact on Your Life:

Light and noise sensitivity can have a huge impact on your life. You may avoid certain situations and even fear them, which increases anxiety. It can also contribute to social isolation, which is common in people with FMS or ME/CFS, and can worsen depression.

Some work environments are difficult to endure. I used to be a television news producer, which meant sitting under a lighting grid in a room with dozens of TVs and ringing phones. I went from thriving on the chaos to having regular anxiety attacks. I decided to leave the job. Other people may be able to get reasonable accommodation to lessen the impact of this symptom.

### **Coping With Light & Noise Sensitivity:**

You might be able to eliminate or avoid many sources of excess noise and light, but you probably can't eliminate all of them. Several simple things can help you deal with light and noise sensitivity in your daily life:

- Sunglasses are a must outside.
- If fluorescent lights bother you, lightly tinted sunglasses or a hat with a brim may help.
- In a noisy environment, ear plugs or listening to music on headphones may help some people.
- Deep breathing and other relaxation techniques can help you get through episodes of sensory overload due to light and noise.
- Teach your family and friends about the impact that light and noise have on you so they understand your requests to turn off lights or turn down the volume.
- If your computer screen bothers you, try adjusting the brightness and contrast.

### **Sources:**

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# Disease Severity Markers?

By Kristin Thorson, Editor, Fibromyalgia Network

Posted: July 28, 2011

Wouldn't it be wonderful if doctors could order a blood test to see how well a therapy is doing, or document that a drug is not working? In the July 2011 issue of the Fibromyalgia Network Journal, several blood markers were identified for fibromyalgia, and the results are being refined in hopes that they will produce a diagnostic blood test for fibro. Team leader, Alan Light, Ph.D., of the University of Utah, suspects he will be able to identify many subgroups of fibromyalgia and chronic fatigue syndrome patients based on his vast array of more than a dozen types of markers.

The work by Light is absolutely exciting and represents one of the greatest achievements so far in fibro research. But in the meantime, Dennis Ang, M.D., and his team at Indiana University, is looking at the potential for a quick, rather simple lab test for objectively measuring disease severity, in particular, the pain levels in people with fibromyalgia.\*

Part of the difficulty with developing blood markers for fibro is that most of the action is occurring within the nervous system and the blood often does not usually reflect these changes. So Ang is looking for surrogate markers in the blood that might tell doctors how the central nervous system is working in people with fibromyalgia.

Plenty of research evidence shows that painful inputs from all over your body and multiple muscles places your central nervous system on high alert. This bombardment of inputs leads to a system where the concentration of pain transmitting chemicals builds up, such as substance P (SP) and corticotrophin-releasing hormone (CRH). In fact, both SP and CRH are elevated in the spinal fluid of people with fibromyalgia. As a result, the nervous system becomes sensitized to future painful inputs. Instead of toning down the pain signals, the nervous system magnifies them (e.g., making you feel worse, not better).

So why don't researchers and treating physicians just order a blood test to measure your levels of SP and CRH? While these chemicals are at least double what they should be in the spinal fluid of people with fibromyalgia, their values in the blood are normal. This is the hurdle that researchers have been stumbling over because many factors are clearly abnormal in the nervous system in people with fibro. Yet, spinal fluid measurements are only done in research studies and such techniques are simply not available for treating physicians.

Ang's team is testing a method to take a peek at what is happening inside the nervous system by testing two substances in the blood that may be caused by elevations in SP and CRH (both elevated in fibromyalgia). A simple diagram of how this new test might work is shown below. Basically, elevated SP and CRH causes an activation of mast cells that are located all over your body, leading to enhanced release into the blood of two immune system chemicals or chemokines: IL-8 and MCP-1

Exactly what IL-8 and MCP-1 do in the body is not nearly as important as just knowing that previous research has shown them to be elevated in the blood of fibromyalgia patients. If these two substances correspond to how well you are doing, then their concentration should decrease with improvements in pain ratings. On the other hand, if pain scores get worse, then their levels ought to increase. At least, this is how markers for measuring your disease severity should work.



One way to check if these two markers are able to pick up changes in fibro pain is to measure them before and after a treatment trial (i.e., the longitudinal measurement of treatment effects over time). Ang put a small group of fibro patients through a six-week course in pain and stress management while not changing any medications used. In fact, any medication changes could likely interfere with the measurement of the markers, so it was best to use a nondrug treatment approach.

Improvements in fibro pain corresponded to reductions in both IL-8 and MCP-1. The results are only preliminary, but offer hope that objective disease severity markers can be developed for fibromyalgia.

"While our study does not implicate a cause-and-effect relationship, the longitudinal associations of fibromyalgia pain severity with blood concentration of IL-8 and MCP-1 raise the question that these two chemokines may be involved in the pathogenesis of fibromyalgia," writes Ang. "If our findings are replicated in a larger group of patients, IL-8 and MCP-1 may facilitate the prediction of prognosis and monitoring of treatment response in the future."

# Keeping Your Body Aches Under Control

By Kristin Thorson, Editor, Fibromyalgia Network, Tucson Arizona

Posted: August 23, 2011

When you tense your upper body muscles to scrub the outdoor grill or work at the computer, it's understandable that your neck and shoulders will ache. But why would your leg muscles start to hurt if they didn't even get a workout? A new study by Hong-You Ge, M.D., Ph.D., of Denmark explains why a two-minute contraction of the shoulder muscles can increase pain in the legs for people with fibromyalgia.\*

Sustained muscle contractions are known to trigger the release of pain-relievers into the spinal cord to reduce feelings of achiness in those muscles that are getting the workout. It's a natural process that soothes pain, at least in healthy subjects. Yet, this system that provides analgesia after exercise appears to be working the wrong way in fibromyalgia patients.

Study participants were asked to contract the large shoulder muscles in the upper back until the muscles gave away to fatigue. Twenty-two fibro patients were compared to the same number of healthy control subjects. Everyone in the study was middle-aged.

Sensitivity to pressure pain in the upper shoulder muscle was measured before and immediately after contracting it, as well as 20-minutes later. Pain sensitivity was also checked in a lower leg muscle that was relaxed the entire time. The research team predicted that the spinal cord was misinterpreting the messages from the contracting muscles and making pain worse throughout the body in people with fibromyalgia.

The brief muscle contraction in the healthy group led to less pain in the shoulder area right after the exercise and 20 minutes later. This is what should happen when taxing one's muscles so that waste products like lactic acid don't leave people hurting. After all, if this did not happen, people would learn to avoid exercise whenever possible and that wouldn't be healthy. Pain sensitivity in the lower leg was unaffected, but the results were quite the opposite for those with fibro.

Pain levels started out much higher in the group of fibromyalgia patients (as expected). In addition, the spinal cord did not kick in to relieve post-exercise soreness in the shoulders. Worse yet, pain sensitivity increased significantly in the leg muscles that were relaxed throughout the study.

What does this mean? The system in the spinal cord that people rely upon to ease post-exercise discomfort seems to be responding to workouts by increasing the pain in fibro. So if you are on your feet all day long, this activity may not only make them sore, but it will also cause other muscles to hurt, such as those in your arms.

Exercise is an essential part of staying fit and healthy, but it is hard to do if it increases your pain. The trick is to not overwork any of your muscles. This explains why fibromyalgia patients state that keeping their pain under some control requires frequent rest breaks and changing positions so as to avoid straining any muscle group.

Increasing physical function has to be done extraordinarily slowly in fibromyalgia patients just to keep the pain levels stable. As your muscles get bigger and stronger, the fibro body will be able to sustain more activity before the spinal cord decides to amplify your pain. Improving fitness has to be done very carefully and gradually, or increased muscle aches will constantly trip you up (unlike those healthy folks who feel great after a heavy workout).

## Repetitive Activity & Fibro

By Kristin Thorson, Editor, Fibromyalgia Network

Posted: April 29, 2011

You know that using the same muscle groups over and over causes pain to build up rapidly in these areas. Ideally, you need to take lots of rest breaks, although this is seldom a feasible option. Once you have experienced this, it's just a reality of living with fibromyalgia, and you learn to adapt. You are not lazy, nor are you exaggerating your pain response to repetitive activity. But how do you get others to understand what it feels like to live in your fibro body?

A new study by a Canadian team helps substantiate this escalating pain experience.\* It also documents that movement-related pain is more severe for people with fibromyalgia compared to patients with chronic low back pain. And better yet, these differences between fibro and low back pain are not related to depression or fear of movement.

The repetitive task required patients to lift 18 canisters off a table in front of them (just hold it for a second, and then place it back down). The canisters were waist high and arranged in three rows. Those in the front row could be lifted without reaching or bending forward. Lifting the canisters in the second and third rows required additional stretching and strain on the arms and back when reaching for them. With each successive canister lift, the subjects rated their pain level and how heavy they perceived the canister to be (some were filled with more sand than others but they all looked identical).

Fibromyalgia patients reported more intense pain than the back pain patients after lifting the sixth through 18th canister. As the number of canisters lifted increased, so did the pain caused by the repetitive activity, and more so for the fibro group of patients. These differences were not due to lifting the canisters longer or faster, as both patient groups performed the lifting task with the same speed.

The study found that 28 per cent of the 50 fibromyalgia patients experienced at least a one-third increase in pain levels going from the first to the 18th canister. Only 6 per cent of the 50 back pain patients experienced a similar increase in pain with the repetitive lifting task.

"There were no indications that the fear of movement accounted for diagnosis-related differences in repetition-induced pain," state the authors. Indeed, fear of movement was the same for both the fibro and back pain patients, so the greater pain in the fibromyalgia group could not be attributed to fear. However, the escalation of pain with repeat movement could offer an explanation for why fibro patients struggle during the early phases of a fitness program that necessitates using the same muscles over and over again.

"The results of the present study show that individuals with fibromyalgia are more susceptible to repetitive-induced activity related pain than individuals with chronic low back pain," conclude the study authors. "The findings are consistent with anecdotal accounts of the difficulties that individuals with fibromyalgia experience in the context of repeated physical activity."

\* Lambin DL, et al. Pain [Epub ahead of print] March 23, 2011.

# **Five foods to beat the blues**

## **Five feel-good foods to boost your mood**

We all go through periods of feeling anxious, irritable or depressed. However, there are many things you can do to help boost your mood. The foods you eat can directly influence the way you feel, so check out these top five foods to beat the blues.

### **Marmite**

If you're feeling anxious, stressed or depressed, a dose of B vitamins could help to lift your mood. B vitamins are important for normal brain function and producing mood-boosting serotonin, with vitamins B12 and B6 being particularly beneficial for regulating your mood.

To up your intake of B vitamins, try snacking on Marmite on wholegrain toast. As Marmite is fortified with vitamin B12, this is a particularly good choice of food for vegans and vegetarians who may struggle to get their recommended intake.

### **Oily fish**

Omega-3 fatty acids found in oily fish are well known for being good for the heart. However, they are equally beneficial for our brain health and mood. A study by researchers from the University of Pittsburgh School of Medicine found that participants who had lower levels of omega-3 fatty acids in their blood were more likely to be moderately depressed and have a negative outlook.

Furthermore, a study has found surprisingly low rates of seasonal affective disorder in Icelanders, where the diet is high in omega-3 rich fish. To follow in their footsteps and help ward off the blues, try eating two portions of oily fish a week, or up to four for men.

### **Chocolate**

Many people find themselves reaching for chocolate to ease a bad mood, and this could in fact be no bad thing. Research has shown that chocolate contains many chemicals which can help beat the blues, including relaxing magnesium, calming anandamide and pleasure-inducing phenylethylamine.

To up the mood-boosting benefits further, try snacking on chocolate-dipped strawberries for a healthy treat. Strawberries are not only a good source of vitamin C, which helps in the production of endorphins, but they are high in mood-enhancing flavonoids too.

### **Bananas**

Bananas are high in natural sugars, making them a great remedy for low energy levels which can leave you feeling down. On top of this they are packed with mood-lifting nutrients to help put a smile on your face.

Bananas are a great source of tryptophan, an essential amino acid which boosts serotonin levels, helping to regulate your mood. Furthermore, they are rich in magnesium, which can help you to relax and vitamin B6, which can help to relieve depression.

### **Nuts**

Walnuts are the perfect good-mood food, offering the combined mood-boosting properties of omega-3 fatty acids, vitamin B6 and tryptophan. The nuts are also a good source of folate (vitamin B9); the deficiency of which has been linked to depression.

As well as snacking on walnuts, another good nut to add into your diet is the Brazil. Brazil nuts are an extremely rich source of the mineral selenium, with research suggesting that just one Brazil nut a day can provide you with your recommended daily intake. As low levels of selenium can lead to depression, irritability and anxiety, snacking on Brazils could be the perfect healthy way to boost your mood.

# Puzzle page

## 70'S ROCK BANDS WORD SEARCH PUZZLE



ALLMAN BROTHERS  
BAD COMPANY  
BLACK SABBATH  
BOSTON  
CHICAGO

DEEP PURPLE  
DOOBIE BROTHERS  
FLEETWOOD MAC  
GRATEFUL DEAD  
JOURNEY

KANSAS  
LED ZEPPELIN  
LYNYRD SKYNYRD  
PINK FLOYD  
QUEEN

ROLLING STONES  
SUPERTRAMP  
THE EAGLES  
THE KINKS  
THE WHO

[www.WordSearchAddict.com](http://www.WordSearchAddict.com)

### November's Answers

Pos	Sport	Date
1	Football	1994
2	Rugby	1992
3	Cricket	1986
4	Swimming	1995
5	Tennis	1987
6	Hockey	1999
7	Athletics	1996
8	Gymnastics	1982
9	Rowing	1984