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Some people live in constant pain. They don't sleep well, and they're often depressed. Their doctors say they have an incapacitating disorder called fibromyalgia. Most researchers speculate about the cause and treatments vary. There is a New Hampshire doctor, however, who believes he's targeted the cause and his patients say his treatment has changed their lives.

Three of his patients, two women and a man who have asked to be called by their first names only, suffered from some or all of the symptoms. Diana and Fran were in pain and felt tired all of the time. Tom especially had problems with sleep and depression, while Fran and Diana had to deal, on top of everything else, with irritable bowel syndrome, another disconcerting disorder primarily affecting the large intestine.

Diana was in constant pain and slept poorly. Her back and shoulders hurt all of the time, and after several batteries of tests she was diagnosed with fibromyalgia, commonly described as a chronic disorder marked by pervasive pain and tenderness in the muscles and body's soft tissues.

Because the pain interrupted her sleep, her doctor prescribed sleep medications; she still woke up exhausted. "My husband could never understand how I could go to bed and sleep for eight hours and wake up tired," Diana said.

Fran felt as if her entire body was burning up with pain. It had become so bad that after 30 years of administering to others' discomforts as a nurse she had to quit working.

At night in bed, her legs twitched constantly. "One time I counted, and there were 300 times when my body twitched somewhere," she said. "My husband knew it. He could feel me twitching, and it woke him up, but he never complained."

Tom, Fran and Diana saw various doctors for their symptoms and for years had tried one type of treatment or another and took regimens of medications.

Yet, none of the three found relief until they sought help from an Amherst neuropsychiatrist, Dr. Jory Goodman.

Treating patients from all over the Monadnock region,

from the White Mountains area and over the border in Massachusetts, Goodman says the root of his patients' problems lies within a small area of the brain called the hypothalamus.

It functions as a clearinghouse, monitoring the body's myriad systems, Goodman says. After tracking his patients and comparing their symptoms, he ultimately compiled his findings in a book entitled "It Is All in Your Head: A Monograph on Wellness in the new Millenium."

In an interview with the Ledger, he explained that the hypothalamus supervises and adjusts the vast preponderance of the body's activities, such as body temperature, appetite, heart rhythm, digestive functions, muscle tension and sleep. It is made up of two types of cell parts — nuclei — one that is supposed to put us to sleep and the other that is supposed to wake us up, he said.

With fibromyalgia patients and people with a score of other health problems these nuclei aren't working properly, and so the afflicted person doesn't get a good night's sleep.

Though some researchers theorize that fibromyalgia results from an overly excited nerve center in the brain, perhaps caused by some malfunction in the body or brain, Goodman says fibromyalgia is a sleep disorder.

What he found in his patients, some of whom, like Tom, underwent sleep studies, was that they weren't getting the kind of restorative sleep so essential for the body to be healed and re-energized. Fibromyalgia and a vast range of other conditions, including mood disorders, peptic ulcers, colitis, eating disorders, high blood pressure, hyperactivity, migraine headaches, and stress, are caused by this anomaly in the hypothalamus.

He's lumped together his patients' collection of ailments and afflictions into a diagnosis he terms the neurosomatic syndrome, saying that all of these troublesome problems cause terrible pain and suffering and cost a huge amount in healthcare dollars.

He adds that few are raised to the level of an illness and are usually considered to a sign of a weak character.

"This is a brain/body disease. It is not a mind/body disease," Goodman writes in "It Is All in Your Head," and he adds, "Somewhere in the brain's universe something is a bit out of whack."

Tom was almost 50 when his primary care physician referred him to Dartmouth's mental health clinic to be treated for depression. "For about nine or 10 years, I was on Zoloft," he said.

He was also diagnosed with sleep apnea after going through a series of sleep studies at Elliott Hospital and Southern New Hampshire Regional Medical Center. Since with sleep apnea a person stops breathing, Tom's doctor had him wear a special mask attached to a machine that helped to keep his air passage open. "I still had a problem with my legs. They kept jerking," he said. "I wasn't getting restful sleep." With a general lack of interest in life and a downward spiraling business, Tom's doctor recommended that he see Goodman. "I didn't have the stamina or energy to really turn things around, but I told Dr. Goodman that I didn't want to be like that anymore and I asked him if he could help."

The medications he now takes, including Gabitril, have made all of the difference in the way he sleeps, Tom said. His legs no longer twitch and he sleeps restfully. "I'm starting to see light at the end of tunnel," he said. "I feel he really knows what he's doing." Diana, diagnosed in 1992 with fibromyalgia, said, "Oh my gosh! My back and shoulders hurt all of the time. I went to a doctor, who sent me to a rheumatologist, but all the tests came back negative.

Her doctor tried several treatments but none worked. "For 10 years, I went from one treatment to another," she said.

She decided to see Goodman after talking with a relative he had treated. He took her off her pain and sleeping pills and prescribed a new type of sleep medication, Neurontin.

The stiffness and pain in her upper back and neck are gone, and her arms don't hurt anymore, she said.

"I have a granddaughter who's now two years old, and I can carry her around and hold her over my head," she said. "It's terrific."

Like Diana, Fran was in her 40s when she was diagnosed with fibromyalgia. "The pain spread all over my body," she said. "I believed I had to keep going so I endured it until I reached the point where I had to stop working."

Just as Tom had, she made an appointment with Goodman on the recommendation of her primary care doctor. At that time, Fran had been taking a powerful painkiller, Oxycontin.

"I didn't want to be on it anymore," the former nurse said. "My doctor told me that Dr. Goodman had

treated many of her patients for fibromyalgia, and she could see that they were getting well.”

At first she was reluctant to see a psychiatrist. “I felt a bit cynical, but at that point I was ready to do anything to get rid of the pain.”

The neuropsychiatrist weaned her off Oxycontin and prescribed a new medication, Neurontin, which has stopped her leg twitching and enabled her to sleep restfully, she said, adding, “The way Dr. Goodman explained it, the body is in a constant state of rigidity, and if you don’t get good sleep after awhile it causes pain. The burning is from nerve pain, and this affects the muscle, so that it, too, is in deep pain.”

The Internet is filled with sites describing the symptoms and possible causes of fibromyalgia, as well as various treatment options adhered to by physicians and physical and psychological therapists. One site, the Fibromyalgia Network, says fibromyalgia patients typically have chronic, debilitating pain, constant fatigue and sleep problems, none of which cause permanent damage to muscles, joints or internal organs. The network prescribes a number of self-help strategies, suggesting first that lifestyle changes may help to curtail the pain and save energy. The National Institutes of Health says that fibromyalgia is often regarded as an arthritis-related condition, but it isn’t. Unlike arthritis patients, those with fibromyalgia do not have swelling in their joints, muscles or other tissues. The institute recommends behavior therapy, medications and exercise.

The January issue of Harvard Woman’s Health Watch, a newsletter published by Harvard Medical School, says that fibromyalgia, once considered a muscle disease, is actually a disorder that overlaps with several other conditions and may be caused by a malfunction that agitates the brain’s pain centers.

They say behavior therapy, stress reduction and meditation help alleviate fibromyalgia symptoms.

In Mason, Dr. Richard Berke says he takes a “biopsychosocial” approach. A licensed psychotherapist, he has treated several fibromyalgia clients.

He said that he concentrates on helping them with their reports of stress and poor sleep, and he works with them on the interpersonal relationships that lead to stress.

More information may be found in Goodman’s

book, at www.fmnetnews.com, at www.health.harvard.edu/women, and at other websites on fibromyalgia.

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Understanding the role the brain plays in diagnosing and treating fibromyalgia is described in “It Is All in Your Head: A Monograph on Wellness for the New Millennium,” first published in 1998 by Amherst neuropsychiatrist Dr. Jory Goodman.

Fibromyalgia: Is the mystery solved?

One doctor says it’s a brain/body disease

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