THE OVERLAP BETWEEN FIBROMYALGIA POINTS AND ENTHESITIS SITES IN PATIENTS WITH INFLAMMATORY BACK PAIN AND WIDESPREAD BODY PAINS

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Objectives: To assess fibromyalgia tender points and enthesitis sites in patients with inflammatory back pain (IBP) and widespread body pains (WBP).

Methods: A mannequin with the sites of tender points seen in fibromyalgia and a mannequin with enthesitis sites has been used to record assessment of 60 patients consecutively presented with inflammatory back pain and widespread body pains in out - patients department. The same assessor (CC) performed all assessments. Final score of each assessment on each chart obtained. A questionnaire including Calin et al 1977 criteria and Rudwaleit et al 2004 criteria for inflammatory back pain as well as questions related to fibromyalgia (eating disorder, pain accentuated by pressure, stress related to pain, headache, diffuse abdominal pain, poor concentration and alteration of bowel habits related to pain) was administered to patients.

Results: From patients (n=60) assessed [(Male: females = 17:43 (28.3%:71.7%); mean age 47.9 + 11.5), 76.6% had age of symptom onset below age 40 (mean age of back pain onset 33.5+ 12.5), 87.2% had back pain of more than 3 months duration, 91.5% had morning stiffness (70’ + 66’) and 60% improvement of pain with exercise. Buttock pain was present to 80.9% while alternating buttock pain was present to 40%. Eating disorder reported by 21.3%, trigger points upon lying on by 51.1%, stress as onset by 40.4%. Other symptoms related to fibromyalgia reported by 68.1%. A total of 18 patients fulfilled ≥11/21 points for fibromyalgia, while 25 patients had ≤10. Thirty two patients had at least 1 enthesitis point. There was an 80.9% concordance between Calin and Rudwaleit criteria, while 17% fulfilled either of the two.

Conclusion: Nearly 50% of patients with inflammatory back pain fulfill criteria for fibromyalgia, while only 1 in 4 of the patients do not exhibit any fibromyalgia tender points. There seems to be a significant degree of overlap between fibromyalgia points and enthesitis sites.

Disclosure of Interest: None declared