## PATIENT INFORMATION

# Managing Myofascial Pain Syndrome

yofascial (my-oh-fash-ih-uhl) pain syndrome (MFS) is a chronic condition that affects the fascia (fay-shee-uh) (connective tissue that covers the muscles) and may involve either a single muscle or a muscle group. About 9 million Americans have been diagnosed with MFS. Some people with this condition may experience pain in a different location than where the injury or strain occurred. Experts believe the site of the injury or strain prompts the development of a trigger point, which causes pain in other areas, a situation known as referred pain.

#### How do I know if I'm at risk?

Experts aren't sure what causes MFS. This condition may develop from a muscle injury or from excessive strain on a specific muscle or muscle group, ligament, or tendon.

Other possible causes of MFS include:

- Injury to spinal disc
- General fatique
- Repetitive motions
- Medical conditions (eg, heart attack, stomach irritation)
- Lack of activity (possibly from an injured limb in a cast)

# What are the warning signs?

Usually, MFS symptoms involve muscle pain with specific trigger or tender points. Trigger points are identified by the resulting pain from applying pressure to an area of a person's body. In an MFS diagnosis, there are 4 types of trigger points:

- Active trigger point. An area of extreme tenderness that usually lies within the muscle and is associated with local or regional pain.
- Latent trigger point. A dormant (inactive) area that can potentially act like a trigger

point.

- Secondary trigger point. A highly irritable spot in a muscle that can become active because of a trigger point and muscular overload in a different muscle.
- Satellite myofascial point. A highly irritable spot that becomes inactive due to the muscle being in the region of another trigger pain. Activity or stress can worsen the pain associated with MFS. Other symptoms include depression, fatigue, and behavioral disturbances.

#### When do I need medical attention?

You may want to seek medical attention if:

- A muscle is sensitive or tender when touched
- Muscle pain happens with pressure on a trigger point
- You have pain that feels like aching, burning, stinging, or stabbing
- You have reduced range of motion in the affected area
- You have a feeling of weakness in the affected muscle

# How can I avoid the problem?

Since experts are not sure of the causes, MFS may be hard to avoid. Your doctor will ask you whether you have had a recent injury when there is a suspicion of MFS. Your doctor will also press on different areas to see whether the pressure causes pain. Tests may be ordered to see whether another condition is causing your pain.

## How is it treated?

There is no conclusive evidence supporting one therapy over another. You may need to try more than 1 therapy to find pain relief. Your doctor will work with you to find the best option. In some cases, drugs are used to treat

This page may be reproduced noncommercially by federal practitioners for their patients.

## PATIENT INFORMATION

other conditions that often occur with MFS, such as insomnia and depression.

Therapies to treat MFS include:

- Stretching. With the help of a physical therapist, gentle stretching exercises may help ease the pain in your affected muscle. If you experience trigger point pain, a numbing solution may be sprayed on your skin.
- Massage. A physical therapist may massage your affected muscle by using long hand strokes along your muscle or placing pressure on specific areas of your muscle to release tension.
- Heat. Using a hot pack or a hot shower can help relieve muscle tension and reduce pain.
- Ultrasound. Using sound waves to increase blood circulation and warmth may promote healing in muscles affected by MFS.
- Needle procedures. You may benefit from having a numbing agent or a steroid injected into a trigger point. Just inserting the needle into the trigger point helps break up muscle tension for some people. Acupuncture also seems to help with MFS. Injections of onabotulinumtoxinA, a neuromuscular blocker, are associated with a significant improvement in MFS.
- Cognitive-Behavioral Therapy. This type of treatment focuses on teaching you to change your negative thoughts about pain and can help you be more active.
- Cooling spray. A cooling spray is applied directly on your skin from the trigger point to
  the painful area and then the muscle is gently stretched.

There are a number of drugs that can be helpful in alleviating pain to some extent. However, each of these medications can have serious side effects, so you should aim to use the smallest possible dose for the shortest period of time possible.

 Over-the-counter (OTC) drugs. Ibuprofen and naproxen are among the OTC pain relievers that may help treat pain associated with MFS.

- Nonsteroidal (nuhn-stehr-oy-duhl) antiinflammatory (ann-ty-ihn-flahm-uh-tawree) drugs (NSAIDS). Drugs in this class may help address the pain associated with MFS.
- Antidepressants. In addition to helping to relieve pain, these drugs also can improve sleep.
- Opioids. These prescription drugs are recommended only for short periods of intense pain associated with MFS.
- Benzodiazepine. Low doses of this drug can help provide temporary relief of symptoms at bedtime.
- Alpha-2 adrenergic agonists. Tizanidine can help treat the pain associated with MFS.

Certain chronic cases of MFS require combinations of physical therapy, trigger point injections, and massage. For more information, log on to the Myofascial Pain Syndrome website, http://myofascial-pain-syndrome.org.

Notes:			

