

November 5, 2007

Dear Doctor:

Fibromyalgia is a chronic pain disorder with unknown etiology. It is estimated to affect approximately 2% of the general population, affecting women nine to ten times more often than men. It is characterized by widespread musculoskeletal pain and generalized tender points.¹⁻⁴ Additionally, fibromyalgia is often associated with comorbid conditions such as mood disorders, anxiety, cognitive difficulties, fatigue, headache, paresthesias and sleep disturbance.^{2,3,5} A recent study, supported by Pfizer, Inc., reported that mean total annual healthcare costs for fibromyalgia patients were three times higher than the comparison group.¹

Non-pharmacologic Treatment

Several non-pharmacologic approaches have strong evidence of efficacy in the treatment of fibromyalgia including cardiovascular exercise, cognitive behavioral therapy, and patient education. *Experts and professional organizations agree that either non-pharmacologic therapy alone or the addition of drugs to a well rounded program is more effective than pharmacologic treatment by itself.*

Pharmacologic Treatment

Pregabalin (Lyrica®, Pfizer, Inc.), an anticonvulsant structurally related to gabapentin, recently received FDA approval for the indication of fibromyalgia. Currently, no studies are available in the published literature. However, results from two studies were provided by the manufacturer in the Lyrica® product dossier. The first was a 14 week study which showed that pregabalin was efficacious in the treatment of pain. The onset of pain relief occurred within one week and was sustained throughout the course of therapy. The second study lasted 26 weeks and supported the durability of effect for treatment of pain. Pregabalin is the first drug to receive FDA approval for the indication of fibromyalgia. Other drugs are expected to pursue the indication in the near future.

While there is only one drug with the specific indication, many pharmacologic options have evidence supporting their use in fibromyalgia. A 2004 article published in JAMA³ characterized these treatments based on their strength of evidence for efficacy. Amitriptyline and cyclobenzaprine both had strong evidence. Tramadol, SSRIs, SNRIs and pregabalin had modest evidence. Treatments such as growth hormone, serotonin, and S-adenosyl-methionine all had weak evidence. Other commonly used medications include anticonvulsants (such as gabapentin), analgesics, anxiolytics, and sleep aids.⁵ More recently published treatment reviews support the JAMA classification^{2,4-6} and propose promising future therapies including dopamine receptor agonists such as ropinirole and pramipexole, new SNRIs such as duloxetine and milnacipran (not yet available in the US), NMDA receptor antagonists such as ketamine, and sodium oxybate.⁶

Education and Resources for Your Patients

Over the next few weeks, your Medicaid patient(s) may be receiving information about fibromyalgia in the mail from the Healthy Together! Health Management program. Enclosed with this letter you will find a copy of the information that is being provided to EqualityCare clients identified as having a diagnosis of fibromyalgia. This education is meant to supplement your treatment plan and not to replace any advice you have given your patient.

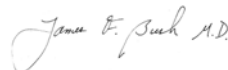
If you have any questions or comments regarding this educational initiative or would like to request copies of the references listed below, please contact the Wyoming Drug Utilization Review Program at (307) 766-6750 or alewis13@uwyo.edu.

Thank you for your care of Wyoming EqualityCare patients.

Sincerely,



William Harrison, M.D.
WY-DUR Chair



James Bush, M.D.
Staff Physician

References

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2. Chakrabarty S, Zoorob R. Fibromyalgia. Am Fam Physician 2007;76:247-54. (Available free of charge at www.aafp.org/afp)
3. Goldenberg D, Burckhardt C, Crofford L. Management of Fibromyalgia Syndrome. JAMA. 2004;292:2388-2395.
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5. Baker B, Barkhuizen A. Pharmacologic Treatment of Fibromyalgia. Current Pain and Headache Reports. 2005;9:301-306.
6. Staud R. Treatment of fibromyalgia and its symptoms. Expert Opin Pharmacother. 2007;8(11):1629-1642.