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Fibromyalgia Today: The Importance of Psychotherapy

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Editorial

Psychotherapy has acquired increasing importance in the last few years in the treatment of diseases that are closely related to the medical field. It is not unusual to meet professionals such as doctors and psychologists working together as a team to preserve and implement the patient's state of health by helping him in managing the psychological consequences of the disease (his own or of a family member). It is known that psychotherapy is capable of influencing the brain in different ways, increasing or regulating the individual cognitive functioning, helping in the management of emotions and improving the integration of the individual in his/her own social context. Psychotherapy, nowadays, is considered an effective therapeutic method, both for the negative consequences related to chronic diseases and the damage due to prolonged stress conditions. There is no doubt that the therapeutic relationship plays more than a fundamental role in the healing of many pathological situations, helping to manage sudden critical situations and increasing the development of coping strategies to face difficulties. Fibromyalgia (FM) is a rheumatic disease that suffocates the patient with constant pain throughout the body which presents a fluctuating trend in intensity and location. For professionals working in this area, FM patients can be frequently heard complaining about their symptoms which range from chronic headaches and morning tiredness to frequent nocturnal awakenings and mood oscillation according to the subjective perception of the pain intensity. FM (a disease prevalently affecting the female gender) reduces cognitive abilities such as memory in general, concentration, selective attention, and therefore also negatively affects the patient's work performance. Often, people also refer to problems concerning the sexual sphere. Undoubtedly, without listing all the possible and plausible consequences of chronic pain, one understands how such pathology can negatively influence the quality of life of those who find themselves dealing with a body that, at best, works less than before. In the worst case, however, during periods of crisis or symptomatic aggravation, there are also important limitations of mobility with associated impossibility to take care of oneself and limitation of autonomy in everyday life. It should not be forgotten that the fear of not being autonomous is closely linked to the fear of aging and dying and it is therefore possible to imagine how some obligatory stages of psychological development are anticipated in FM. This anticipation could lead patients to increase their alertness by

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inevitably worsening their condition of stress, anxiety and concern for the future. The FM patient often turns out to be resistant to therapies and drug and has to experiment different strategies and drug combinations before reaching an acceptable level of health. Furthermore, the occurrence in clinical practice of FM in comorbidity with other rheumatic diseases (for example, chronic fatigue syndrome) has often been observed, as well as with nonrheumatic? Diseases; moreover, and not less importantly, the same pathology represents a risk factor for the development of depressive episodes, anxiety disorders and eating dysregulation. In this complex situation, psychotherapy in general, and modern cognitive behavioral therapy in particular, may be considered as a valid tool for the management of chronic diseases because it teaches the patient effective strategies to help cope with the change and, more importantly, and accompanies him along the therapeutic path, often forming a bridge of communication with the medical staff. Psychotherapy can help the FM patient to listen to his body and its new needs through a healthier management of the thoughts and automatisms associated with the arrival of pain. In this regard, a recent study [1] has shown how patients recruited for an awareness meditation intervention (a founding element in third-generation cognitive behavioral psychotherapy), have shown significant improvements compared to the control group in terms of fibromyalgia symptoms. In addition, the researchers found significant improvements in pain perception, sleep quality and other variables related to psychological wellbeing (such as social engagement and attachment). Although this proof of efficacy is widely diffused nowadays, psychotherapy is still struggling to enter the recommended treatments for medical conditions, also for fibromyalgia. To further convince the scientific community, a review and meta-analysis on the effectiveness of cognitive behavioral treatments (CBT) for this

pathology have recently been published [2] the result of this study shows how the efficacy and tolerability of CBT therapies help to reduce the prevalent symptoms of fibromyalgia and to improve the social condition of the participants. The results are also significant in comparison to the control groups or those on the list waiting for treatment. This research shows that CBT is at least qualitatively comparable to pharmacological therapy for some parameters, such as pain management and tolerability of therapy. It is thus necessary to begin including psychotherapy and psychological counseling in general as mandatory treatment for certain diseases, such as FM, which are struggling to find an effective drug therapy that negatively characterizes the lives of patients.

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