

Online Research @ Cardiff

This is an Open Access document downloaded from ORCA, Cardiff University's institutional repository: <https://orca.cardiff.ac.uk/id/eprint/123698/>

This is the author's version of a work that was submitted to / accepted for publication.

Citation for final published version:

Macfarlane, Gary J, Kronisch, Caroline, Atzeni, Fabiola, Häuser, Winfried, Choy, Ernest H ORCID: <https://orcid.org/0000-0003-4459-8609>, Amris, Kirstine, Branco, Jaime, Dincer, Fitnat, Leino-Arjas, Paivi, Longley, Kathy, McCarthy, Geraldine, Makri, Suzi, Perrot, Serge, Sarzi Puttini, Piercarlo, Taylor, Ann and Jones, Gareth T 2017. EULAR recommendations for management of fibromyalgia. *Annals of the Rheumatic Diseases* 76 (12) , -. 10.1136/annrheumdis-2017-211587 file

Publishers page: <http://dx.doi.org/10.1136/annrheumdis-2017-211587>
<<http://dx.doi.org/10.1136/annrheumdis-2017-211587>>

Please note:

Changes made as a result of publishing processes such as copy-editing, formatting and page numbers may not be reflected in this version. For the definitive version of this publication, please refer to the published source. You are advised to consult the publisher's version if you wish to cite this paper.

This version is being made available in accordance with publisher policies.

See

<http://orca.cf.ac.uk/policies.html> for usage policies. Copyright and moral rights for publications made available in ORCA are retained by the copyright holders.



EULAR recommendations for management of fibromyalgia

Gary J Macfarlane¹, Caroline Kronisch², Fabiola Atzeni³, Winfried Häuser^{4,5}, Ernest H Choy⁶, Kirstine Amris⁷, Jaime Branco⁸, Fitnat Dincer⁹, Paivi Leino-Arjas¹⁰, Kathy Longley¹¹, Geraldine McCarthy¹², Suzi Makri¹³, Serge Perrot¹⁴, Piercarlo Sarzi Puttini¹⁵, Ann Taylor⁶, Gareth T Jones¹

1. Epidemiology Group, School of Medicine, Medical Sciences and Nutrition, University of Aberdeen, Aberdeen, UK
2. Department of Rheumatology, Cantonal Hospital, Fribourg, Switzerland
3. ICRCSS Galeazzi Orthopaedic Institute, Milan, Italy
4. Department of Internal Medicine I, Klinikum Saarbrücken, Saarbrücken, Germany
5. Department of Psychosomatic Medicine, Technische Universität München, München, Germany
6. Institute of Infection and Immunity, Cardiff University School of Medicine, Cardiff, UK
7. Department of Rheumatology, The Parker Institute, Copenhagen University Hospital, Bispebjerg and Frederiksberg, Copenhagen, Denmark
8. Department of Rheumatology, CEDOC-NOVA Medical School, UNL, CHLO, Hospital Egas Moniz, Lisbon, Portugal
9. Department of Physical and Rehabilitation Medicine, Hacettepe University, Division of Internal Medicine, Ankara, Turkey
10. Finnish Institute of Occupational Health, Helsinki, Finland
11. Patient Representative, UK
12. Mater Misericordiae University Hospital, Dublin, Ireland
13. Patient Representative, Limassol, Cyprus
14. Centre de la Douleur, Hôpital Cochin-Hôtel Dieu, Université Paris Descartes, Paris, France
15. Rheumatology Unit, L. Sacco University Hospital, Milan, Italy

The EULAR recommendations for the management of fibromyalgia are based on more than 100 reviews and meta-analyses of individual therapies and medicines.¹ Thus, the quality of the evidence in making recommendations on effectiveness and efficacy is generally very high. In contrast, there is little published research evaluating models of care for patients with fibromyalgia, and thus this aspect of the recommendations is based on expert opinion of the working group, which was drawn from throughout Europe and across specialties.

Mercieca and Borg² provide an alternative model of care based on the practice within their own hospital. Their study and evaluation has not been published, and therefore there is not sufficient detail provided for us to evaluate it. However, there are features of the pathway outlined that are unappealing and directly contradict the EULAR recommendations. Their first-line approach is prescription of medication (stated as 'if required'), and this happens even before the patient is educated about the condition. Many clinicians and patients would find this unacceptable. Their local pathway and the EULAR recommendations do agree on the important role of stratified care including for psychological comorbidities.

Nevertheless, it does highlight the need for more research around models of care for fibromyalgia patients, so that we can identify which deliver better outcomes at an affordable cost and are acceptable to patients.

REFERENCES

1. Macfarlane GJ, Kronisch C, Dean LE, et al. EULAR revised recommendations for the management of Fibromyalgia. *Ann Rheum Dis* 2017;76:318–28.
2. Mercieca C, Borg A. EULAR guidelines underplay importance of severe anxiety and depression in Fibromyalgia treatment. *Ann Rheum Dis* 2017;76:e53.