

# CNS SPECTRUMS®

THE INTERNATIONAL JOURNAL OF NEUROPSYCHIATRIC MEDICINE

**ADVANCES IN THE DIAGNOSIS, PATHOGENESIS,  
AND MANAGEMENT OF FIBROMYALGIA SYNDROME**

**CME PSYCHCAST™**

## ***THE SIGNIFICANCE, ASSESSMENT, AND MANAGEMENT OF NONRESTORATIVE SLEEP IN FIBROMYALGIA SYNDROME***

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CME.5

### **ABSTRACT**

People with fibromyalgia syndrome (FMS) experience unrefreshing sleep, aches, hypersensitivity, and cognitive and emotional difficulties. Although no specific causative factor or biological agent is known to account for all of the features of FMS and these related diagnoses, the generalized hypersensitivity of the body is considered to be affected by disturbances in central nervous system (CNS) functions. Such CNS disturbances are intrinsic to the sleeping-waking brain, where the common symptom elements in all these illnesses are poor quality of sleep, nonspecific pain, fatigue, and psychological distress in the absence of known disease pathology.



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## Acknowledgment of Commercial Support

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## Faculty Affiliation and Disclosures

Dr. Moldofsky is professor emeritus of the Faculty of Medicine at the University of Toronto and president of the Sleep Disorders Clinic of the Centre for Sleep and Chronobiology in Toronto, Ontario, Canada.

Disclosures: Dr. Moldofsky is a consultant to, is on the advisory boards of, and receives research support from Eli Lilly, Jazz, Pfizer, and Pierre Fabre.

This article references unlabeled or unapproved uses of duloxetine, milnacipran, pregabalin, and sodium oxybate.

## Peer Reviewer

Eric Hollander, MD, reports no affiliation with or financial interest in any organization that may pose a conflict of interest.

This activity has been peer reviewed and approved by Eric Hollander, MD, Professor of Psychiatry and Chair at Mount Sinai School of Medicine. Review Date: February 15, 2008.

## Learning Objectives

At the end of this activity, the participant should be able to:

- Explain the relationship between nonrestorative sleep and the often perplexing features of fibromyalgia syndrome (FMS), such as myalgia and tender points.
- Identify some methods of assessing nonrestorative sleep in FMS.

## Needs Assessment

More than 90% of patients with fibromyalgia syndrome (FMS) describe poor quality of sleep in which sleep is perceived to be light and unrefreshing. Patients with FMS often experience restlessness with kicking and involuntary leg movements, or have a sleep-related breathing disorder such as loud snoring and interruptions to breathing. It is important for clinicians to recognize the relationship between nonrestorative sleep and the pain, fatigue, and cognitive and emotional symptoms experienced by patients with FMS.

## Target Audience

This activity is designed to meet the educational needs of psychiatrists.

## Accreditation Statement

This activity has been planned and implemented in accordance with the Essentials and Standards of the Accreditation



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## Credit Designation

The Mount Sinai School of Medicine designates this educational activity for a maximum of 0.5 *AMA PRA Category 1 Credit(s)*™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

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## To Receive Credit for this Activity

Listen to the Psychcast™, reflect on the information presented, and complete the CME posttest and evaluation form. To obtain credit, you should score 70% or better. Early submission of this posttest is encouraged to measure outcomes for this CME activity. Please submit this posttest by May 1, 2010 to be eligible for credit.

The estimated time to complete this activity is .5 hour.

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## ADVANCES IN THE DIAGNOSIS, PATHOGENESIS, AND MANAGEMENT OF FIBROMYALGIA SYNDROME

### *THE SIGNIFICANCE, ASSESSMENT, AND MANAGEMENT OF NONRESTORATIVE SLEEP IN FIBROMYALGIA SYNDROME*

#### CME QUESTIONS

1. **Nonrestorative sleep is a common feature of:**

- A. Fibromyalgia syndrome
- B. Chronic fatigue syndrome
- C. Temporomandibular joint disorder
- D. All of the above

2. **Experimental disruption of sleep physiology in normal subjects results in:**

- A. Musculoskeletal pain symptoms
- B. Increase in rapid eye movement (REM) sleep
- C. Obstructive sleep apneas
- D. Restless legs syndrome

3. **Patients with fibromyalgia syndrome (FMS) show polysomnographic evidence for:**

- A. No REM sleep
- B. Increased slow wave (deep) sleep
- C. High frequency of cyclical alternating pattern (CAP) in their sleep EEG
- D. Parasomnia disorder

4. **Nonrestorative sleep benefits from the following methods at bedtime:**

- A. Flurazepam 30 mg
- B. Strenuous physical exercise
- C. Diphenhydramine 50 mg
- D. None of the above

5. **The restorative quality of sleep is not dependent upon the duration of sleep and the time of day the sleep takes place.**

- A. True
- B. False

6. **Pharmacologic treatments such as tricyclic antidepressants are demonstrating long-lasting remedial effects for the non-restorative sleep issues experienced by patients with FMS.**

- A. True
- B. False



# REGISTRATION

## MAY 2008 CME QUIZ

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### ANSWER FORM

CME PsychCast™ – The Significance, Assessment, and Management of Nonrestorative Sleep in Fibromyalgia Syndrome

**TERMINATION DATE:** May 31, 2010

To receive credit, you should score 70% or better (participants will receive certification for their records in approximately 4–6 weeks). Early submission of this posttest is encouraged. Please submit this test by May 1, 2010, to be eligible for credit. If you have any questions about this, or any of our other CME materials, please e-mail CME@mblcommunications.com.

*Please circle your answers*

1. A B C D   2. A B C D   3. A B C D   4. A B C D   5. A B   6. A B

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- 1. Was this activity relevant to your practice? Yes  No
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