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Review article

Prevalence of fibromyalgia: literature review update

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ABSTRACT

The present study aimed to update the literature review on the prevalence of fibromyalgia published in 2006. A bibliographical survey was carried out from 2005 to 2014 in the MEDLINE, Web of Science, Embase, LILACS and SciELO databases and 3274 records were identified. Five researchers selected the studies, following the inclusion criteria: studies that obtained the prevalence of fibromyalgia. Fibromyalgia studies in associated diseases were excluded. When screening by title and abstract, 2073 irrelevant articles were excluded. The full texts of 210 articles were evaluated for eligibility and this review included 39 studies, described in 41 articles. The selected studies were grouped into four categories: (A) prevalence of fibromyalgia in the general population; (B) prevalence of fibromyalgia in women; (C) prevalence of fibromyalgia in rural and urban areas; (D) prevalence of fibromyalgia in special populations. The literature shows values of fibromyalgia prevalence in the general population between 0.2 and 6.6%, in women between 2.4 and 6.8%, in urban areas between 0.7 and 11.4%, in rural areas between 0.1 and 5.2%, and in special populations values between 0.6 and 15%. This literature review update shows a significant increase in fibromyalgia prevalence studies in the world. The new 2010 American College of Rheumatology criteria have not been widely used yet and the COPCORD (Community-oriented program for control of Rheumatic Diseases) methodology has increased the quality of studies on the prevalence of rheumatic diseases in general.

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A prevalência de fibromialgia: atualização da revisão de literatura

R E S U M O

Palavras-chave:

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Prevalência
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O presente estudo teve como objetivo atualizar a revisão de literatura sobre a prevalência da fibromialgia publicada em 2006. Foi realizado levantamento bibliográfico do período de 2005 a 2014 nas bases de dados MEDLINE, Web of Science, Embase, LILACS e SciELO, identificando-se 3274 registros. Cinco pesquisadores selecionaram os estudos, de acordo com os critérios de inclusão: estudos que obtiveram a prevalência da fibromialgia. Foram excluídos estudos da fibromialgia em doenças. Na triagem pelo título e resumo, foram excluídos 2073 artigos irrelevantes. Foram avaliados quanto à elegibilidade os textos completos de 210 artigos, incluindo-se nesta revisão 39 estudos, descritos em 41 artigos. Os estudos selecionados foram agrupados em quatro categorias: a) prevalência da fibromialgia na população em geral; b) prevalência da fibromialgia em mulheres; c) prevalência da fibromialgia em áreas rurais e urbanas; d) prevalência da fibromialgia em populações especiais. A literatura aponta valores de prevalência da fibromialgia na população em geral entre 0,2 e 6,6%, em mulheres valores entre 2,4 e 6,8%, nas áreas urbanas entre 0,7 e 11,4%, nas rurais entre 0,1 e 5,2%, e em populações especiais valores entre 0,6 e 15%. Esta atualização de revisão de literatura mostra um aumento expressivo de estudos de prevalência da fibromialgia ao redor do mundo. Os novos critérios do Colégio Americano de Reumatologia de 2010 foram ainda pouco utilizados e a metodologia COPCORD (Programa Orientado para a Comunidade para Controle de Doenças Reumáticas) aumentou a qualidade dos estudos de prevalência de doenças reumáticas em geral.

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Introduction

Fibromyalgia (FM) is a chronic pain syndrome with a complex, multifactorial and not completely known etiopathogenesis that affects mainly women, being characterized by generalized musculoskeletal pain and palpation-specific tender points, often associated with sleep disorders, fatigue, somatic and cognitive symptoms, as well as psychic disorders.^{1,2}

We published our first literature review on FM prevalence in 2006, in the Brazilian Journal of Rheumatology.³ During the period of 1990–2005, the FM prevalence found in the population ranged between 0.7 and 4.4%, being more prevalent in women than in men. It was possible to construct five categories according to study similarity patterns: prevalence of FM in adult populations; prevalence of FM in women; prevalence of FM in children and adolescents; prevalence of FM in specific populations and; prevalence of chronic and diffuse pain in the population, according to the American College of Rheumatology (ACR) criteria of 1990.⁴ We observed that more prevalence studies were necessary.

After almost a decade, it is necessary to update the literature review on FM prevalence, aiming to know the new studies on this topic, especially after the publication in 2010 of the new ACR fibromyalgia diagnostic criteria.²

Methods

This literature review update was carried out with an electronic search in the MEDLINE, LILACS, Embase, Web of Science

and SciELO databases, from 2005 to 2014. The keywords used were “fibromyalgia” and “prevalence” and the corresponding words in Portuguese, “fibromialgia” and “prevalência”. A search was also carried out based on the list of publications available on the website of the Community-Oriented Program for Control of Rheumatic Diseases’ (COPCORD), an initiative of the International League of Rheumatology Associations.

A total of 3274 articles were found, and 992 were excluded, as they were duplicates. Five physical therapists with clinical and research experience in fibromyalgia selected the studies according to the inclusion criteria: cross-sectional studies that obtained the prevalence of fibromyalgia in the general population and in specific populations, for instance, women, children, adolescents and the elderly. The exclusion criterion was studies that obtained the prevalence of fibromyalgia associated with other diseases. When screening by title and abstract, 2073 articles were excluded from this review. The full texts of 210 articles were assessed for eligibility. At the end, 39 studies, described in 41 articles (Fig. 1), were included in this review.

Each researcher carried out the selection process of the studies individually and two meetings were held: one after the screening and another after applying the eligibility criteria to jointly define the articles to be included.

The following data were extracted from the included studies: Reference (title, authors and year); Population (country, city or region, age group, gender, FM diagnostic criteria, specialist who made the diagnosis, assessment of tender points, sample size, sample calculation and sampling process); Method (data collection and statistical analysis); Results

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