

## REMARKABLE RECOVERIES

# My Journey Toward Wholeness: A Comprehensive Approach to Fibromyalgia Treatment from a Therapist-Patient Perspective

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## ABSTRACT

*This article is a revealing personal case study of Jane Meyers, an occupational therapist who experienced symptoms of fibromyalgia during an extremely stressful period of her life. Through careful history, self-assessment and treatment from other medical professionals, she began a journey of healing from the pain and mental fog which accompanied her diagnosis. Though there appears to be no single cause of fibromyalgia, Jane learned that lack of REM sleep, stress, ligament laxity, fascial restrictions, deficient testosterone levels, candida and improper diet all played roles in her fibromyalgia complex. She followed a natural medicine protocol guided by Dr. Ross Hauser which included natural hormone replacement therapy, Prolotherapy to affected lax ligaments, anti-candida supplements, and several diet modifications. She found added relief with use of a magnetic mattress pad and pillow, treatment using John F. Barnes Myofascial Release (MFR), relaxation techniques and avoiding toxic relationships. She recovered from her pain and now uses her MFR training and life experience to help other patients in a clinic setting using myofascial release.*

*Journal of Prolotherapy*. 2010;2(2):348-351.

**KEYWORDS:** fibromyalgia, fight or flight, John Barnes, ligament laxity, magnet mattress pad, myofascial release, NHRT, natural hormone replacement therapy, occupational therapy, Prolotherapy.

Depression was setting in. Now exercise made the pain worse. I attempted simple yard work and was laid up for two days. Every physical effort created more fatiguing pain.

A full night's sleep still left me listless and drowsy all day. I couldn't stay awake after dinner. The aching got so bad I could no longer sleep in my bed. I resorted to an overstuffed couch to avoid pressure on my hips. The entire lower half of my body felt as if it were beaten and bruised. I got temporary relief from taking a hot bath every night and wrapping up in layers to keep in the heat.

Even more distressing, trying to get through a day of work became the biggest challenge. I used many sick days and went home early when I could. I wondered if it was narcolepsy, chronic fatigue, or MS. A mental fog accompanied every waking moment, hampering my memory, attitude, mood and motivation.

I considered seeking disability or medical leave because my work performance was significantly affected. But

**T**hrough a long bout with fibromyalgia I have discovered both the fragility and resiliency of my body, mind and spirit. There were times I wondered during my recent trial by pain if I would ever see the light at the end of tunnel. It took diligent compliance and almost two years to regain my former status of vibrant good health.

My long and painful journey began eight years ago, late 2001. I had turned 42 a few months earlier but there seemed to be no ready explanation for why I was becoming so exhausted. What was going on? I exercised regularly and followed a careful diet, yet I was developing muscle pains. I began to hurt all over. I couldn't concentrate.



Jane Meyers, OT, performing myofascial release on a client.

neither recourse was possible because I had become the sole provider for my new family: a young adult stepson battling cancer, two minor stepchildren and a husband. He turned out to be too mentally ill and emotionally stressed for regular work, while also trying to care for his very ill son.

My new home environment was not a nurturing, loving place. A single career woman until age 41, I had no life preparation for this avalanche. I didn't know where to turn for help. All I knew was that my body and mind were failing me. My quality of life had taken a sharp downward turn to a place I had never known. Independent and self-reliant for nearly 20 years, in my wildest nightmares I could not have imagined being so helpless. I had only my strong faith and a suffocating, but resilient, spirit.

A chiropractor assured me it wasn't MS. She mentioned fibromyalgia, but I denied that. Let me explain... We had started a home business selling magnetic wellness products. Several months before my symptoms, a nurse asked us to take part in a fibromyalgia fair. I offered to speak on using magnetic sleep products to promote stage 4 and REM/restorative sleep. I believed I knew what fibromyalgia (FM) was because I had researched one of the causes of FM: lack of stage 4 sleep. When I could, I slept on the magnet pad and I relied on the magnet pillow to stave off migraines. This was why I continued to disregard an FM diagnosis- I WAS sleeping. Too much!

I tried another avenue. I saw a massage therapist over spring break 2002. She was concerned about my legs. "I can pick up your (muscle) tissue right off your legs! It's stuck, like glued together, frozen. No wonder you're in so much pain! You really need to see Kelly." Kelly was an occupational therapist, like myself, who had a display at the fibromyalgia fair for her clinic, Wisconsin Center for Myofascial Release. I called her and we discussed my symptoms and the need for a doctor's order for therapy.

After I explained Myofascial Release (MFR) to my doctor she agreed I should try it. I initiated myofascial release treatments in May 2002. The prescription was twice weekly for six weeks using the John Barnes method of myofascial release. She wrote "Myofascial Pain Syndrome" as my diagnosis.

During most of the hour-long, hands-on treatments I remained passive, disconnected. From the massage table, I told of my intolerable home situation and the

#### **WHAT IS MYOFASCIAL RELEASE?**

*Myofascial Release (MFR) is a hands-on technique that provides sustained pressure into myofascial restrictions to eliminate pain and restore motion. Fascia is a specialized system of the body that has an appearance similar to a spider's web or a sweater. Fascia (connective tissue) is very densely woven, covering and interpenetrating every muscle, bone, nerve, artery and vein as well as all of our internal organs including the heart, lungs, brain and spinal cord. The fascial system is one structure that exists from head to foot without interruption. Each part of the entire body is connected to every other part by the fascia, like the yarn in a sweater. In the normal healthy state, the fascia is relaxed and wavy in configuration and has the ability to stretch and move without restriction. Physical trauma, scarring, or inflammation, however, can cause the fascia to lose its pliability. It becomes tight, restricted and a source of tension to the rest of the body. Physical injuries, whiplash, surgery, habitual poor posture over time, repetitive stress injuries or shock and emotional distress have cumulative effects. The changes they cause in the fascial system influence comfort and the functioning of our body. The fascia can exert excessive pressure producing pain or restriction of motion, affecting flexibility and stability, and are a determining factor in our ability to withstand stress and strain. As treatment, the therapist uses a multitude of MFR techniques and movement therapy. Pain relief and improvement in function is also made through education in proper body mechanics and movement, the enhancement of strength, flexibility, and postural and movement awareness.*

intractable stress. Kelly explained the fight/flight and "freeze" response to danger and stress, but in my state, I didn't connect the stress to my physical pain. I was in "survival mode." But I knew the home situation had to change. It was toxic and unsafe.

Later I read in John Barnes' book, *Healing Ancient Wounds*, that the "freeze" response is natural in all mammals who detect danger. "The preyed-upon animal will flee or attempt to fight, but if run to the ground it will enter a freeze response in which it assumes a state of immobility (think 'deer in headlights') while still manifesting high levels of activity of both the parasympathetic and sympathetic nervous systems. If the animal survives the attack, it will go through a dramatic period of discharge of this high-level autonomic arousal throughout the motor system. This discharge involves trembling, sweating, and deep breathing. This type of discharge is frequently seen in MFR patients after deep myofascial releases, followed by substantial improvement. As an example, in the case of a motor vehicle accident, a holding pattern or 'position in space' develops to protect the body against impact. As a result of the freeze response, this subconscious holding pattern is maintained indefinitely, manifesting sustained muscle contraction with resultant myofascial restriction,

leading to chronic myofascial pain and tightness.” The person may not be able to achieve a deep stage of sleep because the subconscious will be in a state of alert, ready to awaken at any moment to protect the self from danger.

Although I was aware of the fight/flight response from psychology courses, after reading John’s book it became clear how my earlier symptoms may have started. From mid-2000 until late 2002, I was living with psychological danger. The person I married created an environment in which I felt defensive, on edge, and crazy with a self-protection I just shouldn’t have, in what was supposed to be a honeymoon phase of marriage. Many days I felt bullied, though I stayed as long as I could for the sake of a sick stepson. One recourse our nervous system has is to retreat into ourselves, the “freeze” response to perceived dangers. And that freezing is what made my pain begin and be sustained. There was no “thawing” from the freeze. No trembling, sweating, or deep breathing out of it. My subconscious protective responses just continued daily and proved cumulative.

After six weeks of MFR treatment I enjoyed considerable pain relief because the therapist’s hands allowed the facial restrictions or “frozen” tissue to release. My total Activities of Daily Living Pain Scale decreased from 30 to 4, an 87% change! My tolerance for performing activities like walking, sitting and standing increased from 15 minutes to one hour, and sleeping without pain went from five hours to six. Some left knee pain remained and became pronounced as the body pain was reduced, so my chiropractor ordered an MRI which showed a shredded meniscus and 14 cysts in the posterior patellar region. An orthopedic surgeon trimmed the shredded connective tissue. After a few weeks of PT, the knee pain subsided. I was advised prior to surgery, though, that my chances of getting osteoarthritis in that knee will be much greater due to the thinner meniscus. *Great...*

A bit of history now... Since getting four teeth extractions, orthodontia in my teens, and oral surgery at age 20 to extract five wisdom teeth, my bite became aligned posteriorly and I had developed TMJ pain, greater on the left. The extractions in my teens, if done today, would be considered poor practice. But it was standard practice in the mid-70’s. The TMJ pain occasionally led me to resort to a liquid diet because chewing could cause facial muscle spasms. A few times the jaw locked open. At age 40, a tomogram showed a calcified, splintered ligament in my left cheek area, connected to the left TMJ. An oral surgeon

advised TMJ surgery and two years of orthodontia to correct the damage and my bite. I couldn’t begin to think of starting this complex course. As a therapist, I was able to step back and look at the bigger picture of my overall joint problems.

In childhood, I suffered many ankle sprains, had bilateral bunionectomies in my 20’s, chronic bilateral trochanteric bursitis, and exhibited hypermobility in my finger joints and hips. I was always told to “stand up straight, stomach in, head back,” but it was difficult to maintain. In time, I learned the connection between my joint flexibility, subluxations, TMJ pain, postural problems and an underlying hereditary ligament laxity problem. My forward head posture and jutting posterior were partly due to having **no** lordotic curve in my cervical spine. More surgery wasn’t the answer, as I gladly discovered, Prolotherapy was.

I first heard of Prolotherapy at Caring Medical clinic. We had taken my stepson for a consult with Dr. Ross Hauser in the late summer of 2002. I read his Prolotherapy pamphlets and set them aside. During the many months of caring for my stepson and supporting the family under stressful conditions, I put my own needs last and some myofascial pain returned. In the summer of 2003, after a much-needed divorce, and my stepson’s unexpected passing from a heart infection, I both grieved and rested. I felt I could focus on returning to my own sense of wholeness and I consulted with Dr. Hauser. I told him that an O.T., a chiropractor and a massage therapist all thought I may have FM. (FM is diagnosed by checking muscle trigger points. These often result from strain secondary to weak underlying ligaments around nearby joints.) After checking 18 trigger points and learning of my history of joint problems, Dr. Hauser agreed with the diagnosis. He ordered a number of tests including hormone panel, food allergies, blood pH and candida. I was treated with a “De-Yeast” supplement for candida and natural hormone replacement therapy (NHRT) for low testosterone, progesterone, estriol and DHEA. Proper testosterone levels in women are necessary to rebuild collagen, the connective tissue deficient in many FM patients.

Dr. Hauser advised me that it would likely take a full year to recover from FM *if* I followed this protocol. I was impressed with his demeanor and breadth of knowledge, and trusting my instincts I dedicated myself to getting well at whatever cost or inconvenience. This included

visiting Dr. Hauser's office monthly for Prolotherapy to affected joints, using hormone creams, avoiding allergenic foods which for me were egg whites and kidney beans, and following a prescribed diet. Prolotherapy treatment was concentrated to bilateral TMJ, cervical spine, knees, hips and lumbosacral regions. I took soft tissue support supplements and added more weight-bearing exercise to stimulate collagen growth. My diet excluded caffeine, artificial sweeteners and processed foods. Gluten tolerance is often in question with FM patients, so I decreased the amount of foods containing it. I avoided artificial stimulants, sleep aids and analgesics which would mask symptoms because I needed to feel myself getting better.

I often would count my "bad" days and "good" days. At first there were no good days, then gradually one or two days out of ten, and then more good days than bad after a year. I steered clear of toxic relationships and re-learned relaxation techniques. By the middle of 2005, I felt my FM symptoms had been resolved and the pain at Prolo treated areas was improved 85-100%. My energy level was up, mental fog had all but disappeared, sleep normalized and a positive attitude restored. The general quality of my life had gratefully blossomed, I was able to work without fatigue and I finally had time for a social life.

In the summer of 2006, I became interested in learning more about MFR. Because I was an O.T., I was qualified to take the courses, so I registered for the John Barnes MFR series. I wanted to help others recover from FM as I did. And, as fate would have it, Kelly asked me to join her practice. I have now added MFR as a part-time career and feel truly blessed that my life has come full circle. I am able to help others who are on their own journey toward wellness. When I meet a new patient, I share my story as an introduction to create a vision that they too can recover. I've discovered that most of my patients who have FM have suffered for five, 10, 20 years or more going undiagnosed and over-medicated. Although no single cause of FM has been determined and no standard "cookbook" approach to treatment, I believe if a patient is open to utilizing natural medicine, he/she can decrease recovery time. I can't help but feel that my relatively short period of suffering was God's grace to enable me to empathize, yet prepare me quickly for my work in helping them. With His guidance I charted my course, and pray others will allow themselves to be open to natural alternatives for healing.

Since my recovery, I have gone back for Prolo and MFR "tune-ups" once or twice a year to maintain function. I have also discovered Human Body Field analysis in the form of Nutri-Energetics Systems (N.E.S.) which uses infoceuticals to allow the body to heal itself using natural substances. N.E.S. has corrected my blood lipids, thyroid and spleen function, as well as reversed heavy metal concentrations. Following the Hausers' Diet Typing plan is an important aspect for health maintenance and is an emerging process for me. Eventually, I hope to be fully disciplined to that also. I now swim several times a week and am adding light weight training to my routine. While getting back into an exercise routine is a priority for me, I have to say I feel younger now than I did 12 years ago. My prayer is that my story will continue to help others become restored and feel vital again. ■

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