## Royal Adelaide Hospital
### Rheumatology Clinical Information Sheet

<table>
<thead>
<tr>
<th>Clinical Condition</th>
<th>Chronic Pain Syndromes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligibility</td>
<td>Chronic generalised or regional pain</td>
</tr>
<tr>
<td>Priority</td>
<td>Low priority. May not need to see a rheumatologist unless there are atypical features. Referrals should be faxed to 08 8222 5895</td>
</tr>
</tbody>
</table>
| Differential Diagnoses | Fibromyalgia (FMS)  
Complex regional pain syndromes (reflex sympathetic dystrophy, causalgia)  
Chronic low back pain |
| Information required with referral | Consider medical causes of fatigue, myalgia, eg hypothyroid, depression  
History:  
- trauma  
- sleep disturbance  
- psychosocial evaluation important  
Exam:  
- allodynia  
- tender points  
- pain behaviours  
- no clinical weakness  
NB: FMS can exist with other conditions.  
Other medical and allied health practitioners the patient has seen concerning this problem |
| Investigations required with referral | FBC, U&E, LFTs, ESR, CRP, Ca\(^{2+}\), PO\(_4^{3-}\), CK protein electrophoresis |
| Pre-Referral management strategies (information required with referral) | Education (Arthritis Australia – Moving Towards Wellness course).  
Explore psychosocial issues.  
Lifestyle counselling.  
Emphasis on self-management.  
Involve multidisciplinary approach.  
Downplay medical model.  
Low dose tricyclic antidepressants/simple analgesia - Trial of amitriptyline 10-50mg nocte for sleep deprivation associated with fibromyalgia |
| Discharge Criteria/information | Once condition stabilised |
| Fact sheets | Arthritis Australia – Moving Towards Wellness course  
Refer to [www.rheumatology.org.au/community/PatientMedicineInformation.asp](http://www.rheumatology.org.au/community/PatientMedicineInformation.asp) |