

# Correlation of Fibromyalgia with Inflammatory Bowel Disease

Sir,

Fibromyalgia is a common, chronic rheumatic disorder that is characterised by body pain in specific musculoskeletal sites along with fatigue and disturbed sleep. Inflammatory bowel disease (IBD) is a chronic inflammatory gastrointestinal disorder with extraintestinal manifestations in around 40% of cases. Two clinical types of IBD, that is, ulcerative colitis (UC), and Crohn's disease (CD) are recognised.<sup>1</sup> Many studies have been conducted to show a correlation between the two diseases, which should be highlighted, in order to combat both diseases effectively.

In a recent Turkish study in 2021, the frequency of fibromyalgia was found to be 29.8% in IBD; 23.4% in CD, and 33.3% in UC. The frequency was also found to be higher in female IBD patients as compared to males.<sup>1</sup> Furthermore, a study conducted in 2019, highlighted the prevalence of fibromyalgia in patients with IBD as 24.3% of the participants enrolled in the study.<sup>2</sup> Additionally, another study conducted in 2020 by Martinis *et al.*, gauged the association of fibromyalgia with IBD. In this study, 12.3% of the IBD patients had associated fibromyalgia.<sup>3</sup> Moreover, another study conducted in Taiwan showed a strong correlation of IBD with fibromyalgia and revealed that 1,106 out of 4,510 patients with IBD developed fibromyalgia. This study also highlighted that IBD played a more important role in fibromyalgia development among younger patients than among older patients.<sup>4</sup> In another study, out of 3,465 patients with IBD, 26 developed fibromyalgia. This study concluded that IBD patients have a twofold higher risk of fibromyalgia development.<sup>5</sup>

These statistics highlight the strong association of fibromyalgia with IBD. Therefore, it is vital that physicians and gastroenterologists must understand the importance of early diagnosis of fibromyalgia in patients who have IBD.

Both fibromyalgia and IBD cause a disturbance in the physical, mental and social health of patients due to their chronic nature and lack of patient compliance to the medications prescribed. We highly recommend that proper diagnostic criteria should be designed to identify fibromyalgia coexisting in IBD patients. Furthermore, IBD patients should be counseled properly about the risk and symptoms of fibromyalgia and when they should follow up. To conclude, it is important to keep a high index of suspicion for the diagnosis of fibromyalgia in patients with IBD as their prompt treatment and management will be helpful in improving symptoms and the quality of life in these patients.

## COMPETING INTEREST:

The authors declared no conflict of interest.

## AUTHORS' CONTRIBUTIONS:

MAK: Conception, design of work, and critical revision for important intellectual content.

AR, BN: Acquisition of data and drafting of the manuscript.

MAK, AR, BN: Analysis and interpretation of data.

All authors had full access to the data, contributed to the study, approved for final version for publication, and take responsibility for its accuracy and integrity.

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