

Low gratitude observed among fibromyalgia patients

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Clinicians have been increasingly concerned with the low levels of gratitude and poor quality of life for fibromyalgia patients, particularly when compared with patients who have other chronic diseases. Gratitude has been associated with lower levels of depression and enhanced quality of life for patients with chronic illnesses such as heart failure and breast cancer, the authors explain. The same is true for patients with arthritis, chronic obstructive pulmonary disease, and diabetes. And for patients with inflammatory bowel disease and arthritis, gratitude is associated with better self-rated health.

Gratitude was low, the authors note, in fibromyalgia subjects. “Being an FMS [fibromyalgia syndrome] patient was associated with lower gratitude, quality of life and mental health-related quality of life, and higher anxiety and depression in comparison to a healthy control group,” [according to Toussaint and colleagues](#). [1] “These findings support our proposition that living with FMS presents a challenging context that can limit opportunities to express gratitude frequently, intensely, and easily.”

The authors note there has been a growing recognition in the literature as to the importance of gratitude and why it may be difficult to express for some patients. They cite several reasons:

1. “Pain, fatigue, functional losses, and psychosocial challenges are issues common to many chronic illnesses that can compromise quality of life, as well as potentially limit how often gratitude may be expressed.”
2. “Erosion of social support is common among people with chronic illness and could lead to less grateful responses to the support provided, especially if the amount of social support received is viewed as being relatively less than the support previously received.”
3. “The extra effort required to maintain a grateful orientation in the context of living with a chronic illness may be beyond the resources available to the individual.”
4. “Pain and poor executive functioning is exacerbated among individuals living with chronic pain who try to maintain a positive mood, suggesting that there may be limited cognitive resources to draw upon when trying to manage a painful chronic health condition. The cognitive deficits and ‘fibro fog’ common to FMS are additional reasons why maintaining a grateful disposition may be particularly difficult for this patient group.”

Finding an effective treatment for fibromyalgia can be challenging with some patients failing to respond to drugs approved in the United States. These include two serotonin-norepinephrine reuptake inhibitors (SNRIs), duloxetine and milnacipran, and the gabapentinoid pregabalin. [2]

Additional therapies, the authors propose, may involve methods to help improve a fibromyalgia patient’s feelings of gratitude, including “relatively simple interventions such as gratitude diaries and lists.” “A 6-week online gratitude intervention had significant reductions in death-related fear of recurrence

compared to a control group” in a breast cancer population. [1] Interventions to increase feelings of gratefulness have been successful in non-medical populations.

Fibromyalgia patients and those with Lyme disease or other tick-borne illnesses share similar physical, mental and social hurdles. In Dr. Cameron’s personal experience with patients, individuals who are treated successfully show high levels of gratitude. It would be reasonable to study whether successful treatment for a tick-borne illnesses improves patients’ gratitude and quality of life.

Related posts:

[Don't dismiss the poor quality of life for Lyme disease patients](#)

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References:

1. Toussaint L, Sirois F, Hirsch J, et al. Gratitude mediates quality of life differences between fibromyalgia patients and healthy controls. *Qual Life Res.* 2017.
2. Parkitny L, Younger J. Reduced Pro-Inflammatory Cytokines after Eight Weeks of Low-Dose Naltrexone for Fibromyalgia. *Biomedicines.* 2017;5(2).

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