

CLINICAL COMMENTARY

The evidence presented is consistent with my practice of treating patients with bacterial vaginosis. I treat the vast majority of patients with metronidazole 500 mg orally twice daily for a week. Sometimes I prescribe clindamycin cream or metronidazole gel, but patients seem to prefer oral therapy, despite the higher likelihood of side effects. I usually reserve oral clindamycin for treatment of bacterial vaginosis in pregnant women. I have avoided the use of single 2-g dose of metronidazole, believing it to be less effective than alternatives. I will reconsider this practice given the favorable comparisons presented here.

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How effective are complementary/alternative medicine (CAM) therapies for fibromyalgia?

EVIDENCE-BASED ANSWER

Acupuncture, biofeedback, and S-adenosyl methionine (SAME) have been shown to have some efficacy in the treatment of fibromyalgia in randomized controlled trials. Spa treatments, hypnotherapy, massage, and meditation may be effective, but they have been evaluated on the basis of less well-designed studies. Bright light treatment, lasers, selenium, chiropractic, musical tones, and malic acid/magnesium are not effective.

EVIDENCE SUMMARY

For this question I excluded conventional medical therapy for fibromyalgia (prescription antidepressants, muscle relaxants, cognitive-behavioral therapy, and exercise). In general, the literature on CAM therapy for fibromyalgia is characterized by small poor-quality studies that use many different outcome measures. A recent systematic review of fibromyalgia therapy found that nonpharmacologic interventions were at least as effective as pharmacologic interventions.¹ The Table shows a summary, based on this article and my review of the literature, of the strength of evidence and benefit of the more common CAM therapies.

A nonsystematic review article identified 7 studies of acupuncture for fibromyalgia.² All but one of these studies were small and poorly designed. The exception was a study of 70 fibromyalgia patients

who were randomly assigned to electroacupuncture using the tai chi meridians or sham electroacupuncture.³ The patients and evaluating physicians were blinded to the treatment assignment, although the acupuncturist was not. Patients in the treatment group improved significantly more than the control group in 5 of 8 outcome measures.

Biofeedback was found to be effective in a randomized controlled trial of 24 patients with questionable blinding.⁴ Another study randomized 119 patients to biofeedback/relaxation training, exercise, a combination of the 2, or an education-only control group. All 3 of the active treatment groups had better outcomes than the control group, but this was primarily because of worsening outcomes in the control group.⁵

SAME has been evaluated in several double-blind randomized controlled trials.⁶⁻⁸ Although fairly well designed, all were small and had mixed results. Only one used the oral form of the drug. While the drug appears to be relatively safe, it is expensive, and interactions with antidepressants and other drugs have been reported.

Although not studied in well-designed clinical trials, fibromyalgia patients may wish to try spa treatments,⁹ massage,¹⁰ hypnotherapy,¹¹ and meditation.¹² These are generally safe and relatively inexpensive interventions, and the limited studies to date suggest a benefit. It is important that conventional therapies for fibromyalgia be given an opportunity to help the patient. Where evidence is lacking, the cost and potential harm of an alternative therapy must be balanced against uncertain efficacy.*

*For a full bibliography, see the expanded version of this article on the JFP Web site at www.jfponline.com.

TABLE

**SUMMARY OF COMPLEMENTARY/ALTERNATIVE
THERAPIES FOR FIBROMYALGIA**

Therapy	Level of Evidence*	Benefit†
Acupuncture	1b	++
Biofeedback	1b	+
S-adenosyl methionine (SAME)	1b	+
Balneotherapy (spa treatment)	4	+
Hypnotherapy	4	+
Massage	4	+
Meditation	4	+
Bright light treatment	1b	0
Low-output helium-neon laser	1b	0
Malic acid 200 mg and magnesium 50 mg orally 3 times daily	1b	0
Rheumajecta and Vasolastine injections	1b	0
Selenium 100 lg orally daily in low soil selenium area	1b	0
60 to 300 hz musical vibrations	2b	0
Chiropractic management	4	0

*Centre for Evidence-Based Medicine (cebm.jr2.ox.ac.uk/docs/levels.htm) where 1a is best and 5 is worst.
†0=no benefit; + = variable benefit; ++ = clear benefit.

RECOMMENDATIONS FROM OTHERS

Conn's *Current Therapy, 52nd edition* states: "Nonpharmacologic modalities, including meditation, relaxation techniques, and biofeedback, may be useful in lessening tension." Koopman's *Arthritis and Allied Conditions* recommends SAME, biofeedback, and hypnotherapy as possibly helpful but requiring further study.

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CLINICAL COMMENTARY

Fibromyalgia is a difficult problem for many people, and as clinicians we often feel frustrated in our capacity to help. Dr Ebell's article points to the potential efficacy of some alternative medicine approaches,

especially electroacupuncture. Limited evidence exists for other techniques, but there is none for magnesium and other compounds often touted for the treatment of fibromyalgia. Different approaches work for different people. In my practice, I emphasize the importance of stress management, which can give the patient a sense of control over the pain. It also helps for the patient to have a sense of the early signs and triggers of exacerbation. Clearly, there is a need for more research in this area.

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