

Chronic Musculoskeletal Pain

- Chronic pain can affect multiple systems, including the musculoskeletal system, mimicking symptoms of rheumatic diseases such as arthritis or myositis.
- Chronic pain may arise from different mechanisms and comprise several different entities. Some common terminology that is used includes amplified musculoskeletal pain syndrome (AMPS), complex regional pain syndrome (CRPS), central or peripheral sensitization and fibromyalgia syndrome (FMS). Often symptoms are not directly correlated with tissue damage or other pathophysiology, and presenting symptoms may include widespread or regional pain, sensitivity to nonpainful touch and, commonly, degrees of physical disability. Additional associated symptoms may include fatigue, sleep difficulties, anxiety and depression.
- CRPS is considered a neuropathic pain syndrome. It has specific diagnostic criteria (Budapest criteria) and is distinct in its presentation (and treatment). It needs urgent referral to our Pain Medicine Clinic.
- Central sensitization is the set of mechanisms that underlie or contribute to a number of pain disorders, including headache, migraine, abdominal pain, pelvic pain and musculoskeletal pain. Widespread pain is usually associated with central sensitization; regional pain is often more related to peripheral sensitization.
- These patients are best managed by our Pain Medicine Clinic.
<https://www.seattlechildrens.org/clinics/pain-medicine>
- If there are abnormal labs or imaging studies, swollen joints or overall concerning for vasculitis, please contact rheumatology for an MD-to-MD consult.

	Pain Syndrome	Rheumatologic Disorders
Characteristics of pain	Widespread or localized, usually described as sharp/stabbing pain, constant, disabling. Pain is not only localized to joints.	Described as a dull, achy pain. Worse in the mornings. Joint pain associated with morning stiffness. Muscle pain in myositis associated with muscle weakness.
Pattern of pain	Usually constant, can be sensitive to light touch, worse with activity.	Pain usually worse in the morning or lack of activity and improves with movement throughout the day.

(Continued)	Pain Syndrome	Rheumatologic Disorders
Physical exam findings	Temperature and/or color change of affected area. Can present with limping, refusal to ambulate, look tired.	Joint swelling, restricted range of motion, limping, rashes or other systemic findings.
Response to NSAIDs	No or minimal response to NSAIDs.	Inflammatory joint pain usually shows some response to NSAIDs.
Lab findings	Usually unremarkable if no other concurrent illness or disorder.	May see elevated inflammatory markers, anemia, cytopenia, abnormal muscle enzymes, hematuria/proteinuria for systemic autoimmune conditions.
Other symptoms	Some frequently reported symptoms include headache, abdominal pain, extreme fatigue, nonrestorative sleep.	Fever, rash, photosensitivity, weight loss, hair loss, oral or nasal ulceration.
Functionality	Missing school, socially isolated, no self-motivation.	Depends on joints involved and is symptom dependent.