EVALUATION THE EFFECT OF A HOME-EXERCISE PROGRAM BASED ON DISABILITY CAUSED BY BACK PAIN IN INDIVIDUALS WITH FIBROMYALGIA

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Background and Objectives Fibromyalgia (FM) is a rheumatic disease and the cause remains unknown, it's characterised by the presence of musculoskeletal widespread pain, and the lumbar region is one of the places frequently affected. Pain presented by FM patients is usually described as the forum muscular, and one of the most referred to is the back. These painful situations can be associated to the function of the lumbar support of the upper body weight, so this region being subjected to compressive loads and lumbopelvic instability situations, which are frequently associated with low back pain, so it is important to consciousness of posture neutral in the lumbar spine, strengthening and stretching the muscles responsible for the stability of this region. The objective of this study is to evaluate the effect of an exercise program performed at home in the level of disability caused by low back pain in patients with FM.

Materials and Methods Randomised controlled study, with 18 volunteers randomly divided into 2 groups. An exercise program was applied in individuals with fibromyalgia diagnosis, for a 12 weeks period and 3 times per week. This includes stretching exercises, neck and lumbar-pelvic mobility, lumbar-pelvic stabilization and relaxation. The evaluation was conducted in two stages, and for that we used the Portuguese versions of the Fibromyalgia Impact Questionnaire (FIQ) and the Oswestry Disability Index (ODI).

Results In the experimental group there was an increase in the values of the ODI score from baseline (28.67 ± 13.784) to the end (26.44 ± 9.632), indicating a decrease in disability caused by lower back pain, but these results did not show statistically significant differences ($p > 0.05$). As regards the results of the FIQ, individuals in the intervention group improved their scores, as well as their functional capacity and health status, however the differences were not significant.

Conclusions At the end of the 12 week intervention of a home-based program, there were no improvements in individuals with FM, however they have improved their health status and decreased their disability at lumbar.