LETTER TO THE EDITOR

DOI 10.1002/acr2.11476

Reply

To the Editor:

We thank the American College of Rheumatology (ACR) Open Rheumatology journal for the opportunity to respond to the letter by Wolfe et al (1) about our recently published original article. In this study, we developed and validated a new tool for the diagnosis of fibromyalgia (FM), Nociplastic-Based Fibromyalgia Features (NFF). We would like to mention some important points in response to the authors.

Wolfe et al (1) were concerned with the method of our diagnosis used in the NFF study. They mentioned that this method was probably biased and idiosyncratic and identified different patients with less severity than is usual among patients with rheumatology diagnoses (1). Because there is no gold standard for FM diagnosis, the definition of FM is always arguable and open to question (2). The reference standard in the NFF study, like in previous studies, was expert diagnosis, which seems to be the best strategy for the diagnosis of FM until now. Expert clinical judgment entails the time spent in physical examination, evaluation, and interpretation of each individual symptom and psychosocial factors, which cannot be assessed by any criteria (3). Therefore, on exploring biomarkers for FM diagnosis, the diagnostic gold standard will continue to be the rheumatologist’s expert opinion (as we used in our study), not classification criteria.

Although we agree that our patients had lower severity scores on the widespread pain index (WPI) and polysymptomatic distress (PSD) than those in other studies, the mean WPI and PSD scores in our population still fell within the FM diagnostic threshold of the ACR criteria (WPI: 6.9 and PSD: 13.2). According to the study by Wolfe et al (4), the major approximate diagnostic separation lines start at a WPI score of 7 and a PSD score of 12. It must be highlighted that separation of patients according to these scales is arbitrary and represents a logically false classification. FM is a dynamic condition with a nature and independency to pain and/or symptoms extent.

At the same time, NFF or any mechanistic-based approach still has a long way to go. As Dr. Wolfe pointed out, NFF must be examined in larger populations and different groups or geographic situations to confirm its validity and performance. We look forward to using and examining NFF in future research settings. However, acknowledgment of this new viewpoint not only does not seem to be a matter of concern but also can provide an opportunity for the nociplastic-based approach for FM diagnosis.

Author disclosures are available at https://onlinelibrary.wiley.com/action/downloadSupplement?doi=10.1002%2Facr2.11476&file=acr211476-sup-0001-Disclosureform.pdf.

Banafsheh Ghavidel-Parsa, MD Razi Hospital and School of Medicine Guilan University of Medical Sciences Rasht, Iran
Ali Bidari, MD Iran University of Medical Sciences Tehran, Iran

1. Wolfe F, Rasker JJ, Häuser W. Fibromyalgia criteria and anomalous results: comment on the article by Ghavidel-Parsa et al. ACR Open Rheumatol 2022. E-pub ahead of print.
2. Häuser W, Brähler E, Ablin J, Wolfe F. Modified 2016 American College of Rheumatology fibromyalgia criteria, the analgesic, anesthetic, and addiction clinical trial translations innovations opportunities and networks-American pain society pain taxonomy, and the prevalence of fibromyalgia. Arthritis Care Res (Hoboken) 2021;73:617–25.
3. Goldenberg DL. Diagnosing fibromyalgia as a disease, an illness, a state, or a trait? [editorial]. Arthritis Care Res (Hoboken) 2019;71:334–6.

4. Wolfe F, Brähler E, Hinz A, Häuser W. Fibromyalgia prevalence, somatic symptom reporting, and the dimensionality of polysymptomatic distress: results from a survey of the general population. Arthritis Care Res (Hoboken) 2013;65:777–85.

5. Bidari A, Ghavdel-Parsa B, Ghaelbagh B. Reliability of ACR criteria over time to differentiate classic fibromyalgia from nonspecific widespread pain syndrome: a 6-month prospective cohort study. Mod Rheumatol 2009;19:663–9.

6. Wolfe F, Rasker JJ. The evolution of fibromyalgia, its concepts, and criteria. Cureus 2021;13:e20010.