

Efficacy of Fibromyalgia Treatment Using Bach Flower Therapy: Preliminary Results

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Abstract

Introduction: Fibromyalgia (FM) is a prevalent disease and often presents symptoms of anxiety and depression. Bach florals (BF) are widely used to treat such manifestations. No studies on the use of BF in FM were found.

Objective: To evaluate the effects of BF (Rescue) in FM patients.

Patients and methods: 6 patients and 6 healthy controls were included. They were evaluated at pre-intervention and after 60 days of BF using. Demographic data, anxiety and depression were evaluated by Beck inventories; sleep quality by the Pittsburgh scale and symptoms of dysbiosis by symptoms form.

Results: The median age was 60 years old (22-77) in patients and 41 (40-43) years old in controls. The disease duration was 3 years (4 months -10 years old). Caucasian race was 33% in the patient group and 66% in the controls. There was a statistically significant reduction between the Beck Anxiety Questionnaire before and after 60 days [16 (6-42) vs. 10 (2-27), $p=0.05$], Beck Depression Questionnaire before and after 60 days [16 (8-52) vs. 10 (6-35), $p=0.02$] and dysbiosis questionnaire before and after 60 days [18 (10-27) vs. 15 (7-27), $p=0.03$]. Regarding the sleep form, no significant differences were observed before and after BF.

Conclusion: Treatment with Bach flower in patients with fibromyalgia seems promising, as it reduces tender points, symptoms of depression and anxiety, as well as improvement of symptoms of dysbiosis.

Keywords: Bach Flowers • Fibromyalgia • Therapy • Pain

Introduction

Fibromyalgia (FM) is a disease characterized by widespread musculoskeletal pain, body stiffness, paraesthesias, non-restful sleep and fatigue and symmetrically distributed tender points [1]. The diagnosis of fibromyalgia is clinical, with an increase in pain sensitivity in 11 of the 18 points standardized by the American College of Rheumatology (ACR) that are searched by digital pressure on the tender points [2]. The disease does not have any laboratory or characteristic image changes. These tests are performed to exclude other diseases. The literature points to the prevalence of fibromyalgia in the population with values between 0.2 and 6.6%, being more prevalent in women than in men, especially in the age group between 35 and 60 years [3]. Often 30-70% of patients have other symptoms such as peripheral edema, dry eye and mouth, headache, irritable bowel syndrome, and various other digestive symptoms, all of them are known as dysbiosis. In addition, psychological conditions such as anxiety, irritability, insomnia and depression are extremely common in patients with FM.

The treatment of fibromyalgia involves the use of analgesics and antidepressants. Physical therapy, water aerobics, psychotherapy are complementary and very relevant treatments in this disease. Drug treatment fails in 30 to 40% of cases and many patients still experience several adverse

drug effects [4]. In this sense, it is logical to think about new treatment modalities. Bach florals (BF) are an alternative and complementary therapeutic system, created by Dr. Edward Bach in 1929, and consists of the use of solutions in which flowers are put in contact with water and it acquires healing properties [5]. No adverse effects with BF were described [6]. The aim of BF is to re-establish the emotional balance, allowing that the individuals become aware of the difficulties that bother them and work on the situations which concern them [6].

Studies with BF in various clinical conditions such as depression and anxiety, which are manifestations quite common in patients with FM, have been performed and demonstrated the effectiveness of BF in these psychiatric disorders [7,8]. We did not find any data in the literature on the use of BF in patients with FM.

The aim of the present study therefore was to evaluate the effects of Bach flower remedy, specifically Rescue, on fibromyalgia patients, specifically on symptoms of depression, anxiety, sleep disorders and dysbiosis.

Methods

This is an open prospective interventional study which included 6 female patients over 18 years old with Fibromyalgia, diagnosed according to the criteria of the American College of Rheumatology (ACR) [2] and 6 healthy women as a control group. Patients using antidepressants in the last three months were excluded.

To evaluate the presence of standardized ACR tender points that were tested by digital pressure and positivity was defined as 11 of the 18 pre-established points [2].

Depressive status was assessed using the Beck Depression Inventory and normal values are those below 10. Anxiety was evaluated by the Beck Anxiety Inventory and normal values were those below [8,9]. The Visual

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Analog Scale (VAS) for pain quantification [10]. Sleep quality was assessed by the Pittsburgh International Scale, normal value are those below 7 [11,12].

Exclusion criteria were use of antidepressants, ansiolytics, hypnotics or sleep inductors. Patients and controls were evaluated pre-intervention and then 60 days after treatment.

The following tests were performed on patients to exclude other diseases: blood count, erythrocyte sedimentation rate, C-reactive protein, protein electrophoresis, aspartate aminotransferase, alanine aminotransferase, gamma-glutamyl transpeptidase, creatinine, creatine kinase, thyrotropic hormone and free thyroxine. All patients had these tests within normal range.

Rescue's solution consists of a mixture of five different essences namely: Impatiens, Star of Bethlehem, Rock Rose, Cherry Plum and Clematis. This solution is used for several kinds of psychological crisis [5]. Rescue solution was used in order to maintain the uniformity of the same flower for all participants of this study, thus avoiding the variability of use of several different flowers.

After the initial data collection, Bach Rescue floral solution was prescribed at a dose of 2 sublingual drops every 3 hours. Sleep periods were not interrupted for substance use. The patients made continuous use for at least the entire study period.

During follow-up, the use of other treatments including antidepressants was not allowed, except the use of analgesics. The use of alternative and complementary treatments was also not allowed, in order to verify the exclusive effect of Bach flower. All patients signed the informed consent form.

Statistical Analysis

Results were presented as medians and variations (minimum and maximum values) and/or frequencies (percentages). Statistical analysis was performed using GraphPad InStat version 2.00 software and Mann-Whitney tests were used to compare means. Results were considered to have significant value when $P \leq 0.05$.

Results

From 40 subjects selected, 34 were excluded since they were under drugs such as antidepressants, ansiolytics, or sleep pills. Twelve women were included in the current study, 6 patients with fibromyalgia and 6 healthy controls. The median age of the patients was 60 years old (ranging from 22-77 years old) and for the healthy control group was 41 years old (ranging from 40-43 years old). The duration of the disease presented a median time of 3 years (ranging from 4 months to 10 years).

The Caucasian race was 33% in the patient group and 66% in the controls.

Regarding medical comorbidities, three (50%) patients had systemic arterial hypertension, 3 (50%) obesity, one (16.7%) stable hypothyroidism under with levothyroxine 100 mcg and one (16.7%) had treated gastritis.

At the first evaluation, patients with fibromyalgia had a median of tender points of 18 (ranging from 12-18), and 4 of 6 (66%) patients had 18 of 18 tender points. In addition, in relation to Beck's anxiety questionnaire, the median was 16 (ranging from 6-42) and Beck's interrogation related to symptoms of depression had a median of 16 (ranging from 8-52). The dysbiosis questionnaire revealed a median of 18 (ranging from 10-27) and the Pittsburgh sleep assessment showed a baseline median of 5 (ranging from 5-20).

Comparison of the parameters between fibromyalgia patients and healthy controls revealed that patients had a higher degree of anxiety and depression assessed by Beck's inventories, as well as a higher number of complaints of dysbiosis when compared to control subjects ($P < 0.05$). However, no differences were observed in the sleep index through the Pittsburgh questionnaire between FM patients and controls ($P > 0.05$) (Table 1).

Interestingly, for FM patients, there was a statistically significant reduction between the Beck Anxiety Questionnaire before and after 30 days of initiation of Rescue treatment {16 (range 6-42) versus 10 (range 2-27), $P = 0.05$ }. Improvement in tender point evaluation was also observed at baseline and end of study {18 (ranging from 12-18) versus 11 (ranging from 0-12), $P = 0.02$ }.

Similarly, the Beck Depression Questionnaire before and after 30 days also showed a significant decrease in its parameters {16 (ranging from 8-52) versus 10 (ranging from 6-35), $P = 0.02$ }.

Statistical evaluation of the dysbiosis questionnaire before and after 30 days showed surprising improvement: 18 (ranging from 10-27) versus 15.5 (ranging from 7-27), $P = 0.03$. Regarding the sleep questionnaire, there was no significant difference in the parameters before and after treatment ($p > 0.05$) (Table 2).

Interesting, one of the patients showed a 7 kg weight loss without changing diet or physical activity. After treatment, she said that felt well and her weight went down.

Comparison of all variables within the exclusive group of healthy controls before and after 30 days of BF use revealed no significant change in the assessed parameters ($P > 0.05$) (Table 3).

Discussion

The present study evaluated for the first time the use of Bach flower in

Table 1. Beck anxiety and depression, Pittsburg and dysbiosis questionnaires comparison between fibromyalgia patients and controls.

Variables	Fibromyalgia N=6	Controls N=6	P-value
Beck anxiety	14 (6-42)	9 (0-25)	0.04
Beck depression	13.5 (8-52)	4.5 (1-12)	0.02
Sleep, Pittsburgh	7 (5-20)	5 (3-9)	0.09
Dysbiosis	15.5 (10-27)	8.5 (6-11)	0.02

Data are presented as median (minimum and maximum).

Table 2. Beck anxiety and depression, Pittsburg and dysbiosis questionnaires comparison between fibromyalgia patients pre and post-BF.

Variables	Fibromyalgia Pre-BF N=6	Fibromyalgia Post-BF N=6	P-value
Tender points count	18 (12-18)	11 (0-12)	0.02
Beck anxiety	16 (6-42)	10 (2-27)	0.05
Beck depression	16 (8-52)	10 (6-35)	0.02
Sleep, Pittsburgh	7.5 (5-20)	6 (5-15)	0.29
Dysbiosis	15.5 (10-27)	11 (5-27)	0.003

Data are presented as median (minimum and maximum). BF: Bach flower remedy.

Table 3. Beck anxiety and depression, Pittsburg and dysbiosis questionnaires comparison between control subjects patients pre and post-BF.

Variables	Controls Pre-BF N=6	Controls Post-BF N=6	P-value
Beck anxiety	9 (0-25)	10.5 (0-11)	0.06
Beck depression	4.5 (1-12)	10 (2-8)	0.41
Sleep, Pittsburgh	5 (3-9)	6 (3-8)	0.15
Dysbiosis	8.5 (6-11)	10 (0-12)	0.46

Data are presented as median (minimum and maximum). BF: Bach flower remedy.

patients with fibromyalgia and found preliminary a favourable result of this therapeutic instrument in a transpersonal approach.

The advantages of this study were the inclusion of fibromyalgia patients who met the international criteria for the disease [2]. Another standardization presented in this article was the inclusion of only women. In this sense, it is known that the disease affects a greater number of women than the opposite sex, thus validating the results in the target population of morbidity. Another benefit presented here was the use of only one type of Bach flower, the Rescue. Thus, the possibility of variations of effects of different therapeutic substances will be abolished. In addition, the use of Rescue is an advantage as it is indicated for more severe patients with many and multiple symptoms, as presented here by our patients. Another convenience is the easy sublingual application as well as the low price of treatment [5].

The BF system has been recognized by the World Health Organization since 1976 and it is classified as complementary health therapy. Its creator, Dr. Bach, aimed for a simple treatment that was accessible to all. Its purpose is to work personal aspects of the patient and not the disease, that is, to act in the cause of the ills and not in their effects [6]. Each floral acts in a specific negative emotional state and there are 38 floral available and catalogued. Such treatment aims to help the patient to achieve healing, will not replace conventional medical treatment, but works to help to be complementary to this healing process [6].

Rescue brings simplicity of application. It relieves stress, anxiety, and depression. It brings back energy and stamina, usually absent in fibromyalgia patients. Has the ability to promote calm and relaxation and sleep improvement. The Bach flowers show no evidence of toxicity nor induce dependence [5].

Interestingly, we were able to achieve satisfactory and important therapeutic results within a very short 30 days of starting treatment. Thus, the patients observed very significant improvement of symptoms and anxiety, depression and several complaints that include increased intestinal permeability (dysbiosis). In this study, through a relatively simple but powerful therapy, the use of Bach flower can help patients with fibromyalgia quite clearly. In this way, the efficacy and safety of Transpersonal Therapy for several patients, including those with such a complex condition as fibromyalgia, is further confirmed.

The limitations of this study are the small number of participants and also the short observation period, although it found very promising results. This is because this work is a pioneering and preliminary study of the use of this substance in a disease with such morbidity. In this regard, further studies including a large number of fibromyalgia patients and controls should be performed in the future to confirm the present results.

Conclusion

The present study has found for the first time that Bach flower therapy

(Rescue) seems to be efficient in patients with fibromyalgia. In those patients who received this therapy, there was a significant reduction in tender point count, symptoms depression and anxiety on the Beck scales, as well as improvement of symptoms of dysbiosis. More studies with a large number of participants are necessary to confirm the results of this preliminary work.

Disclosure of Interest

None of the authors has any conflicts of interest to declare.

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