There are 50, having a sedentary job. Their sex, age, and profession. However, a clear All adults may develop fibromyalgia, irrespective of developing fibromyalgia? What is the population at risk of fibromyalgia:

In order to diagnose fibromyalgia, the patient must satisfy the following two criteria:

- At least 11 points that are painful to the touch out of 18 sensitive points of the body.
- The pain is chronic, lasts for extremely long periods with in all cases symptoms of at least 3 months’ duration.

Fibromyalgia can present itself in a large number of claims related to disability, invalidity or even long-term care.

What is fibromyalgia syndrome?

SCOR Vie and the fibromyalgia syndrome

SCOR Vie underwrites their internal acknowledged expertise in risk selection on their experience drawn from the established case of fibromyalgia may be accepted within a death insurance contract but recommends the greatest possible caution to other guarantees. Our customers, with access to Sarl, our selection tool for invalidity portfolios.

Fibromyalgia syndrome is characterized by two essential clinical symptoms: pain and fatigue. In addition to pain and fatigue, the lives of patients suffering from fibromyalgia can be impaired by a whole series of symptoms the most common being:

- Sleep disorder, Anxiety, Concentration difficulties,
- Memory impairment, Chronic headaches, Irritable bowel syndrome, various digestive disorders such as abdominal pain, constipation, abdominal gas, etc.
- Palpitations, Recurrent cystitis

More than 25% of the people suffering from fibromyalgia also display signs of depression. It is extremely difficult to know whether this is a reaction to the patient’s disorder or not.

Fibromyalgia syndrome, a disorder affecting an increasingly large number of patients, is a chronic disabling condition whose principal symptoms include widespread pain and acute fatigue. This brief description cannot but attract the attention of Life & Accident insurers because it sums up in just a few words all the potential consequences this condition is liable to have on invalidity, disability, and (probably) long-term care benefits.

This article, written by Dr Dominique Lannes, one of the medical directors in our risk assessment research unit, invites us to consider the impact of this new disorder on the loss experience of invalidity/disability benefits.

I would like to take advantage of the publication of this issue of our newsletter to invite you once again to contact your usual SCOR Vie correspondent should you require any further information. It only remains for me to hope that you will find this issue both informative and enjoyable to read.

I, avenue du Général de Gaulle 92074 Paris La Défense cedex France

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Fibromyalgia syndrome

The extent of the pain and fatigue stand in stark contrast to a good overall physical condition, notably an absence of weight loss and strictly normal results from a clinical examination with, for example, perfect mobility in the joints. The results of additional medical examinations (biological, radiological, electromyography) of a viral etiology, etc. are all perfectly normal. There are no signs of biological inflammation and radiological examination reveals no abnormality in the joints.

Several suffering from fibromyalgia generally undergo a whole battery of varied and extremely detailed medical examinations, which, to the patient, extremely frustrate, all produce normal results.

What is the incidence of fibromyalgia syndrome?

Statistics must be handled with care as far as fibromyalgia is concerned because it is a relatively new disorder that is currently impossible to objectify and exhibits relatively "vague" symptoms. Not all the patients suffering from this disorder are familiar with their diagnosis and it is probable that certain individuals have been incorrectly diagnosed as suffering from fibromyalgia owing to the absence of specific symptoms. Also, fibromyalgia is "spreading" at a speed and to an extent that reflects doctors' interest in this condition, the degree of media coverage and the involvement of patients' associations, all of which represent a number of factors liable to influence the number of cases identified.

Despite these caveats, however, we are obliged to mention that fibromyalgia could be one of the most common disorders in the western world affecting 2% of the adult population in North America, and 1.3% of the population in Europe.

Norway seems to hold the world record, with certain authorities advancing the figure of 10% ! In France, estimates put the number of people suffering from fibromyalgia at between 550,000 and 2 million, a figure three times more than the total population of people suffering from fibromyalgia syndrome has become the most frequent diagnosis in rheumatology examinations, representing between 3 and 30% of all patients. The wide range observed is due to each rheumatologist's individual interest or greed for the new specialization in this disorder. Fibromyalgia is also known in Asia, and patients' associations exist, such as in Japan. However, the disorder seems less frequent in this part of the world as to put it in another way, fibromyalgia is not having a century in countries enjoying a high level of socioeconomic development.

Countries suffering from fibromyalgia syndrome include, in first place, the United States, followed by Canada then Switzerland, etc. Fibromyalgia syndrome is very unusual worldwide in the third world.

Fibromyalgia syndrome is certainly the disorder whose very existence is one of the most hotly debated subjects in the medical world, and whose exact cause remains uncertain or unknown. Several hypotheses have been put forward that can be boiled down to a "psychosomatic" theory and an "organ" theory to explain the origin of the disease. In general, doctors observe a whole battery of "vague" symptoms, and then conclude that fibromyalgia syndrome is an entirely "psychosomatic" disorder or, in contrast, that is an "organ" condition whose cause has yet to be discovered.

Different doctors have their own pet theories and discussions about this disorder can rapidly get heated too. As a result, there are two medical views of this condition; two schools of thought... and... two contradictory approaches to drafting an expert medical opinion of a patient suffering from fibromyalgia. This duality is sufficiently rare in the medical world to be emphasized here, in order to show the reader a few facts and to favor the organic explanation when they mention this problem.

The psychological explanation

A psychological cause is the first explanation for these individuals frequently labeled by doctors as suffering from a "functional" disorder. It is a whole battery of factors liable to influence the number of cases identified. Fibromyalgia syndrome draws attention to the painful nature of the condition "false friends"

Why does fibromyalgia syndrome pose a problem for insurance companies?

Recent, frequent and impossible to objectify fibromyalgia syndrome is a relatively new condition, described by the World Health Organization (WHO) for the first time in 1992. As for all recently identified disorders, insurance companies lack the perspective they need and find it difficult to clearly determine, appraise and quantify potential risks and the incidence of possible losses. It does not lead to a higher death rate, except for deaths related to the complications which fibromyalgia patients frequently suffer. Death cover (all causes) is therefore relatively easy to analyze and to price. In contrast, fibromyalgia is a major cause of sick leave, disability and, perhaps, long-term care.

What it is, it is a frequent condition that predominantly affects young women, mainly employed in rather sedentary jobs in countries enjoying a high level of socio-economic development. This profile clearly suggests that the population most affected by fibromyalgia syndrome is also a target population for life & accident insurance companies. Fibromyalgia is a condition with no objective basis. A rather uncertain doctor could wonder whether anything is absolutely normal or whether he is overestimating an organic disease, a nervous breakdown, malfunctioning... or... a cause of fibromyalgia.

An American study recently demonstrated that a doctor familiar with fibromyalgia could... continue

What is fibromyalgia syndrome?

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Different doctors have their own pet theories and discussions about this disorder can rapidly get heated too. As a result, there are two medical views of this condition; two schools of thought... and... two contradictory approaches to drafting an expert medical opinion of a patient suffering from fibromyalgia. This duality is sufficiently rare in the medical world to be emphasized here, in order to show the reader a few facts and to favor the organic explanation when they mention this problem.

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The extent of the pain and fatigue stand in stark contrast to a good overall physical condition, notably an absence of weight loss and strictly normal results from a clinical examination with, for example, perfect mobility in the joints. The results of additional medical examinations (biological, radiological, electromyographic, etc.) are all perfectly normal. There are no signs of fibromyalgia. This hypothesis seems to explain the absence of objective signs and the relative efficiency of antidepressants.

But the psychological explanation can also be countered by its opponents, as follows: when you suffer from intense pain and fatigue for months on end, it is not normal to feel dependable and full of energy. Organic origins Several hypotheses have been put forward to justify an organic cause for fibromyalgia. The principal explanations are listed below, but it is important to bear in mind that none have really been clearly established so far:

A central dysregulation could explain a low threshold for the perception of pain. It seems that functional MRI, a state-of-the-art brain imaging technique, reveals abnormalities in the brains of fibromyalgia patients, a result not fully in line with this hypothesis. This explanation is currently impossible to use in everyday medical practice.

A genetic predisposition, a particular environment, etc. A wide range of varied hypotheses but none of them really stands out from the others within the scientific community studying this disorder.

What is incidence of fibromyalgia syndrome?

Statistics must be handled with care as far as fibromyalgia is concerned because it is a relatively new disease. A broad range of other disorders associated with fibromyalgia express their psychological thought, certain individuals suffering from fibromyalgia syndrome is virtually unheard of in the medical world to be emphasized as a disorder. It is true that patients often exhibit fibromyalgia is a major cause of sick leave, which fibromyalgia patients frequently suffer. It does not lead to a higher death rate, except for deaths related to the depression from fibromyalgia. This hypothesis seems to explain the absence of objective signs and the relative efficiency of antidepressants.

As for the cause of fibromyalgia is mysterious, the disorder can only be treated on an empirical basis. The treatments provided are often ineffective or only partially effective, or effective for a limited period of time. This frequently puts the doctor in a hopeless situation, and invalidates the patient's seeking diagnosis. Usually therapy is based on a combination of drugs and non-medical treatment. The use of non-stressful anti-inflammatory drugs and corticoids is disappointing. Analgesics, even those containing morphine, more often than not only provide partial relief. Ultimately, treatment based on antidepressants is the only approach that gives certain positive results. Non-medical treatments—neither mild therapy, kinesitherapy, psychological support, relaxation therapy, acupuncture, nor exercise, nor any other forms of physical medicine and rehabilitation—are frequently offered but, once again, the effectiveness of these solutions is more than uncertain.

What is fibromyalgia syndrome?

Fibromyalgia is certainly the disorder whose very existence is one of the most hotly debated subjects in the medical world, and whose exact cause remains unknown. Several hypotheses have been put forward that can be boiled down to a “psychosomatic” theory and an “organic” theory to explain the origin of the disease. In general, doctors base their diagnosis on their observation, and it is certain that the diagnosis of fibromyalgia is an entirely “psychosomatic” disorder or, in contrast, that it is an “organic” condition whose cause has yet to be discovered. Different doctors have their own pet theories and discussions about this disorder can rapidly get heated! As a result, there are two medical views of this condition, two schools of thought... two contradictory approaches to drafting an expert medical opinion of a patient suffering from fibromyalgia. This duty is sufficiently rare in the medical world to be emphasized. As a doctor, it is absolutely essential to eliminate all the other causes of widespread pain and chronic tiredness that have been eliminated. Before referring to fibromyalgia, it is absolutely essential to eliminate the following conditions:

- Different forms of chronic inflammatory rheumatism,
- The most important being rheumatoid arthritis.
- Infections: myalgia: the role played by staphylococci (to reduce “false friends”)
- Certain endocrine disorders such as thyroiditis or hyperparathyroidism.
- Certain metabolic conditions: osteomalacia, hypokalemia.
- Viral infections: chronic hepatitis B or C, HIV infection, Coxsackie B virus, etc., during which, in certain cases, asthenia is the principal symptom.
- Parasitic or bacterial infections such as borreliosis, tick-borne diseases, and drug reactions.
- Muscular dystrophy: polymyositis, granulomatosis and angitis, metabolic myopathies.

It is easy to understand why a patient suspected to be suffering from fibromyalgia is subjected to a whole barrage of medical tests, prescribed for a single reason: systematically eliminate all the other causes of widespread pain and chronic fatigue.
There are preponderance is observed among women aged 30 to develop fibromyalgia? What is the population at risk of fibromyalgia: In order to diagnose fibromyalgia, the patient must satisfy the following two criteria:

1. Widespread pain in the 4 quadrants of the body (including the spinal column and thorax), for more than 3 months.
2. A least 11 points that are painful to the touch out of the 18 sensitive points of fibromyalgia.

What is the population at risk of developing fibromyalgia?

All adults may develop fibromyalgia, irrespective of their sex, age and profession. However, a clear prodromal period is observed among women aged 30 to 50, having a sedentary job. The number of claims affecting the disability-insurability portfolio is increasing rapidly, and the number of claims related to disability, invalidity or even long-term care is a major concern.

If the insurance company decides to treat fibromyalgia as a common psychiatric disease and apply an exclusion clause in its contracts, it must be aware of the difficulties in applying this policy. There also exists the risk of litigating owing to the contract's organic origin that it is impossible to discount entirely.

Fibromyalgia syndrome is a chronic, disabling condition that is difficult to work with, as widespread pain that is more or less permanent, exacerbated by persistent fatigue. It is easy to see that fibromyalgia can result in a large number of claims related to disability, invalidity or even long-term care. The number of claims related to disability, invalidity or long-term care insurance.

In our edition of our newsletter, we wanted to draw your attention to fibromyalgia, a specific diagnosis that contains the potential for large claims related to disability, invalidity or long-term care insurance.

Fibromyalgia syndrome is characterised by two essential clinical symptoms: pain and fatigue. In addition to pain and fatigue, the life of patients suffering from fibromyalgia can be impaired by a whole series of symptoms the most common being:

- Sleep disorder,
- Anxiety,
- Concentration difficulties,
- Memory impairment,
- Chronic headaches,
- Irritable bowel syndrome: various digestive disorders such as abdominal pain, constipation, abdominal gas, etc.
- Palpitations,
- Recurrent cystitis.

The fatigue is permanent both when patients are at rest or exerting themselves and, combined with the pain, results in a significant reduction in everyday activities: walking, carrying loads, working, etc.

Fibromyalgia syndrome, a disorder affecting an increasingly large number of patients, is a chronic disabling condition whose principal symptoms include widespread pain and acute fatigue. This brief description cannot but attract the attention of Life & Accident insurers because it sums up in just a few words all the potential consequences this condition is liable to have on invalidity, disability and (probably) long-term care benefits.

This article, written by Dr Dominique Lannes, one of the medical directors in our risk assessment research unit, invites us to consider the impact of this new disorder on the loss experience of invalidity/disability benefits.

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Several hypotheses have been put forward that can be boiled down to a “psychosomatic” theory and an “organic” theory to explain the origin of the disease. In general, doctors choose their school of thought, i.e. they are convinced that fibromyalgia syndrome is an entirely “psychosomatic” disorder or, in contrast, that it is an “organic” condition whose cause has yet to be discovered.

Different doctors have their own pet theories and discussions about this disorder can rapidly get heated too.

As a result, there are two medical views of this condition, two schools of thought and... two contradictory approaches to drafting an expert medical opinion of a patient suffering from fibromyalgia. This duality is sufficiently rare in the medical world to be considered an exceptional case.

What is the extent of fibromyalgia syndrome?

The extent of the pain and fatigue stand in stark contrast to a good overall physical condition, notably an absence of weight loss and strictly normal results from a clinical examination with, for example, perfect mobility in the joints. The results of additional medical examinations (biological, radiological, electromyographical, etc.) are all perfectly normal. There are no signs of biological inflammation and radiological examination reveals no abnormality in the joints.

Fibromyalgia syndrome generally underlies a whole battery of varied and extremely detailed medical examinations, which, to the patient’s extreme frustration, all produce normal results.

What are its possible causes?

Fibromyalgia syndrome is a relatively new disorder that is currently impossible to objectivize and exhibits relatively “vague” symptoms.

Not all the patients suffering from this disorder are familiar with their diagnosis and it is probable that certain individuals have been incorrectly diagnosed as suffering from fibromyalgia owing to the absence of specific symptoms. Also, fibromyalgia is “spreading” at a speed and to an extent that reflects doctors’ interest in this condition, the degree of media coverage and the involvement of patients’ associations, all of which represent a number of factors liable to influence the number of cases identified.

Despite these caveats, however, we are obliged to consider fibromyalgia syndrome to be one of the most common disorders in the western world affecting 2% of the adult population in North America, and 1.3% of the population in Europe.

It seems to hold the world record, with certain authorities advancing the figure of 10% in France, estimates put the number of people suffering from fibromyalgia at between 550,000 and 1 million, in other words two to three times more than the total population of people suffering from osteoarthritis. In addition, fibromyalgia syndrome has become the most frequent disease in rheumatology examinations, representing between 3 and 30% of all patients. The wide range observed is due to each rheumatologist’s individual interest or greater or lesser specialization in this disorder.

Fibromyalgia is also known in Asia, and patients’ associations exist, such as in Japan. However, the disorder seems less frequent in this part of the world as it is put to another way. There are also cases in countries suffering from high levels of socio-economic inequality, notably in the interior of the United States, France or in Canada. Countries enjoying a high level of socio-economic inequality seem to be affected.

Usually therapy is based on a combination of drugs and non-medical treatments. The use of non-stress-related anti-inflammatory drugs and corticoids is disappointing. Analgesics, even those containing morphine, more often than not only provide partial relief. Ultimately, treatment based on anti-depressants is the only approach that gives certain positive results.

Non-medicinal treatments—notably mild therapeutic exercises, kinesitherapy, psychological support, relaxation therapy, acupuncture, to access to a wide range of varied biological and other forms of physical medicine and rehabilitation—are frequently offered but, as a matter of fact, the effectiveness of these solutions is more than uncertain.

Why does fibromyalgia syndrome pose a problem for insurance companies?

Recent, frequent and impossible to objectivize fibromyalgia syndrome is a relatively new condition, described by the World Health Organization (WHO) for the first time in 1992. As for all recently identified disorders, insurance companies lack the perspective to define it clearly difficult to determine, approve and quantify potential risks and the incidence of possible losses.

It does not lead to a higher death rate, except for deaths caused by suicide, which are rare. The risk of death related to fibromyalgia syndrome is virtually unheard of in the United States or elsewhere, in other words two to three times more than the total population of people suffering from fibromyalgia syndrome.

What it more, it is a frequent condition that predominantly affects young women. Women are more poorly employed in rather sedentary jobs in countries enjoying a high level of socio-economic development. The profile clearly suggests that the population most affected by fibromyalgia syndrome is also a target population for life & accident insurance companies.

Fibromyalgia is a condition with no objective basis. A rather uncertain doctor could wonder whether these patients were fibromyalgia patients while they are suffering from chronic fatigue or avoid insurance.

It is easy to understand why a patient suspected to be suffering from fibromyalgia syndrome was in a whole barrage of medical tests, prescribed for a single reason: systematically eliminate all the other causes of widespread pain and chronic fatigue.

Fibromyalgia syndrome is also a target population for life & accident insurance companies. In addition, fibromyalgia is the disease that is likely to immediately draw attention to the pain and distress of patients and to the fact that the cause of the syndrome is unknown.

Fibromyalgia is also referred to as fibromyalgia syndrome, fibrositis or fibromyalgia in English.

Related syndrome

Chronic fatigue syndrome is a condition characterized by fatigue, notably in the absence of any physical illness, lasting more than 6 months. It may be associated with widespread pain and other symptoms such as fibromyalgia but the primary symptom is debilitating fatigue in these patients.

Statistics must be handled with care as far as fibromyalgia is concerned because it is a relatively new disorder that is currently impossible to objectivize and exhibits relatively “vague” symptoms.

The diagnosis of fibromyalgia is exclusively based on clinical criteria and can only be established after other causes of widespread pain and chronic tiredness have been eliminated. Before referring to fibromyalgia, it is absolutely essential to eliminate the following conditions:

- Different forms of chronic inflammatory rheumatism, the most important being rheumatoid arthritis.
- Inflammatory myalgia: the role played by statins, for example (treatment to reduce cholesterol levels) has been emphasized in this type of condition,
- Certain endocrine disorders such as hypothyroidism or hyperparathyridism.
- Certain metabolic conditions: osteoalcalasia, hypokalemia.
- Viral infections: chronic hepatitis B or C, HIV infection, Coxsackie B virus, etc. during which, in certain cases, asthenia is the principal symptom.
- Parasitic or bacterial infections such as leishmaniasis, trichinosis and toxoplasmosis.
- Muscular dystrophy: polymyositis, granulomatosis and angiitis, metabolic myopathies.
- Neurological disorders: amyotrophic lateral sclerosis, multiple sclerosis, spinal cord injuries.
- Certain psychiatric disorders: anxiety, depression.
- A genetic predisposition, a particular lifestyle or exposure to a particular situation.
- A psychological cause is the first explanation to favor the organic explanation when they mention this problem.

The extent of the pain and fatigue stand in stark contrast to a good overall physical condition, notably an absence of weight loss and strictly normal results from a clinical examination with, for example, perfect mobility in the joints. The results of additional medical examinations (biological, radiological, electromyogasometry, etc.) are all perfectly normal. There are no signs of biological inflammation and radiological examination reveals no abnormality in the joints.

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