

# The Fibromyalgia Connection

The Fibromyalgia Association of Houston, Inc.

Spring 2002

Volume 9 Number 2

## Dr. I. Jon Russell Comes to Houston

FMAH is very pleased to announce that internationally renowned researcher I. Jon Russell, M.D., Ph.D., will be speaking to us at our regular meeting on Tuesday, July 23, 2002. Dr. Russell is an associate professor of medicine at The University of Texas Health Science Center at San Antonio, and is director of the University Clinical Research Center. He is editor of the *Journal of Musculoskeletal Pain*, is a board member of the International MYOPAIN Society, and was founding president of that organization.

Dr. Russell has been very active in fibromyalgia research. He has done groundbreaking work on substance P, which is in the cerebrospinal fluid (CSF) and regulates how pain is transmitted. Dr. Russell found that fibromyalgia patients have elevated levels of substance P in their CSF, compared to healthy normal controls.

Currently, Dr. Russell is researching possible genetic links in fibromyalgia. He is participating in a nationwide study which seeks to collect clinical, demographic, and laboratory data on FM patients from families with at least two FM-affected family members. DNA is also being collected, stored, and genotyped, so that genetic linkage studies may be performed.

Dr. Russell has been honored by listings in *The Best Doctors in America*, *The Best Doctors in America: Central Region*, *The Best Doctors in the South and Southwest*, and *The Best 2000 Doctors in America*. He

was given the Humanitarian of the Year Award [1994] by the South Central Texas Chapter of the Arthritis Foundation.

Dr. Russell has conducted research studies in the immunology, pathogenesis, and management of rheumatic diseases and fibromyalgia syndrome. He is an author of over 85 original publications and over 30 invited chapters in medical textbooks, and his research is reported in numerous lay articles.

He is an editorial board member for several medical publications in the United States, Canada, and France. He is a senior editor for the Haworth Press, is editor-in-chief of *The Journal of Musculoskeletal Pain*, and serves as a reviewer for several professional journals. He is co-author of *The Fibromyalgia Help Book*, and producer of the video documentary *Fibromyalgia and You*, two educational resources for people with fibromyalgia. He travels extensively in the United States and abroad, speaking to medical audiences and lay groups about soft-tissue pain conditions, rheumatic diseases, and medical education issues.

We anticipate that there will be a large crowd at St. Luke's United Methodist Church to hear Dr. Russell. Therefore, we'll be meeting in the Fellowship Hall, located across from our regular meeting room. Please come early for the best seats and get ready for an exciting evening!

# 2002 Meeting Calendar

Support group meetings will be held the fourth Tuesday of each month from January through October. Because of the Holidays, the November and December meetings will be combined and held on the first Tuesday of December. We meet at St. Luke's United Methodist Church and greatly appreciate the space they provide for our meetings; however, FMAH is not affiliated with any church.

Companions are always welcome. Please feel free to bring a chair cushion for your comfort. If you wish, you may bring a snack and something to drink. All meetings are free and open to the public. FMAH reserves the right to substitute alternative speakers if necessary. For the most current information, please call our Hotline at 713-664-0180.

**Location:** **St. Luke's United Methodist Church, Parlor B**  
3471 Westheimer, inside Loop 610

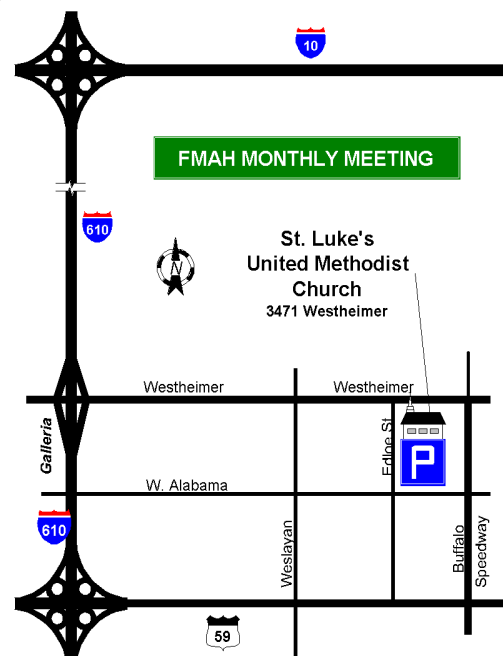
**Time:** **6:30 p.m.** New members, please arrive 15 minutes early to register.

**May 28** **Mary Harper & Janet Gingell**  
Report on Orlando Conference

**June 25** **T. M. Hughes III, M.D.**  
Treatment of Irritable Bladder

**July 23** **I. Jon Russell, M.D., Ph.D.**  
Advances in FM Research

**August 27** **University of Houston**  
**College of Pharmacy**  
**Brown Bag Program**  
*\*\*Please Make Reservations.\*\**



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# Meeting Schedule

## May: Orlando Conference Report

During the first weekend of May, president Mary Harper and board member Janet Gingell attended the national patient conference, Fibromyalgia: Facing the Future. Presented by the National Fibromyalgia Partnership of Washington, D.C., the conference featured nationally known researchers and experts in the field. Mary and Janet took copious notes and will share with you information from the conference. Come to hear what's going on in the rest of the country. We'll meet at 6:30 p.m. in our usual room, Parlor B at St. Luke's United Methodist Church.

## June: Irritable Bladder Treatments

Besides coping with chronic pain and fatigue, many fibromyalgia patients suffer from an irritable bladder. We are pleased to have urologist T.M. Hughes III, M.D., speak to us about treatments for this frustrating and painful condition. Dr. Hughes is a diplomate in the American Board of Urology and treats a variety of conditions. Please join us for a very interesting evening at St. Luke's United Methodist Church, June 25 at 6:30 p.m.

## July: Dr. I. Jon Russell

As noted on the cover of this newsletter, Dr. Russell will speak to FMAH about his latest research. Because we expect to have a large crowd, we will be meeting in the Fellowship Hall at St. Luke's. The Fellowship Hall is across from our normal meeting room, Parlor B. Plan to come early for the best seats.

Dr. Russell has given us permission to make audiotapes of his presentation, and we will take advance orders at the meeting. This will be the third time that Dr. Russell has spoken to us. He is an excellent speaker and is willing to answer patient questions. Make plans now to attend this very special meeting on July 23 at 6:30 p.m.

## August: Brown Bag Program

No, please don't bring your dinner in a brown bag. Bring ALL of your medicines and supplements! This is a very special program from the University of Houston College of Pharmacy. Student volunteers will join us and meet with each person individually. They will discuss with you the possible side effects of your medicines, drug interactions, and correct ways to take each drug. They will even check your blood pressure! This service is free, but we do need reservations so that the University will know how many students to send. PLEASE make reservations by calling the Hotline (713-664-0180) or e-mailing us at [FMAHouston@yahoo.com](mailto:FMAHouston@yahoo.com). Just tell us your name and how many will be coming with you. The meeting will be at 6:30 p.m. on Tuesday, August 27. Call NOW to reserve your place! The deadline for reservations is Friday, August 16.

## Join Us For Dinner

At 4:45 p.m. before each meeting, volunteers meet for dinner at the **Cleburne Cafeteria**. Located five minutes from St. Luke's, the Cleburne is at the corner of Bissonnet and Edloe. We'll be wearing our FMAH t-shirts, so it will be easy to spot us. Come join us for an inexpensive, delicious meal (Dutch treat and please remember to bring cash – the Cleburne does not accept credit cards). So if you have some extra time before

the meeting, please come join us for some lively conversation and lots of laughs!

## Toby Still Talks

Toby Robbins, Executive VP, FMAH

Dear Friends:

It has been a year since my retirement as president of FMAH and a year from my last chat with you through this newsletter. I would like to take this opportunity to thank Mary Harper and all of the volunteers for their hard work during this period of adjustment. I bet that many of you do not know what a full-time job it is being president of the association. I know that Mary didn't. That did not stop her from trying to achieve new goals. Our new meeting location is beautiful as well as comfortable. The speakers for 2002 are excellent. Your newsletter is top quality and still free.

Do you remember how desperate you were before you got your diagnosis of FM and how that anxiety over a pain that you could not explain left you with a fear you could not resolve? That, my friends, is why we all work so hard for FMAH. We are here to take away the *fear*. We spend hours on the phones, writing the newsletter, and planning the monthly meeting. You, too, can help others and help yourself by coming to the monthly meeting. We cannot change the weather for you, but we can brighten your evening with a friendship that you cannot find on the Internet.

Come and join us and show the professionals who donate their time to us that you care. Together we can make a difference. I'll be there early on the fourth Tuesday of the month, and we can have our own live chat room.

See you soon.

Toby Robbins

## Irritable Bowel Syndrome

Margo Pantoja, Nutritionist, Institute of Eating Management

Studies have shown that show that up to 70 percent of people with fibromyalgia may experience irritable bowel syndrome. Although there is no known cure for irritable bowel syndrome, a change in eating habits and stress management can help to dramatically reduce the onset and frequency of symptoms.

### WHAT IS I.B.S.?

Irritable bowel syndrome is caused by excessive muscle spasms in the bowel, which causes a great deal of pain, discomfort, and a disturbance of normal bowel function.

The symptoms range from severe abdominal pain to constipation, gas, heartburn, loss of appetite, nausea, and diarrhea. Many experience the most pain immediately following a large meal, especially if the meal was rich or high in fat. Once a meal has been consumed, the digestive enzymes from the stomach work upon the food. Following a period of approximately 40 to 70 minutes, the food is released into the small intestine. Once the semi-digested materials enter the small intestine, more digestive enzymes work upon the food to continue the breaking-down process. When the sequence is completed in the small intestine, the food is propelled into the large intestine, also referred to as the colon. It is here that the disturbance seems to develop. Under normal circumstances, there is a gentle contraction in the colon walls, which moves the fecal matter along the length of the colon for eventual excretion.

Irritable bowel syndrome produces irregular and poorly coordinated contractions. The inefficient contractions result in fecal matter that either stays in the colon too long, causing constipation, or is expelled too soon, causing diarrhea. The long duration of fecal matter in the digestive tract causes too much water to be absorbed, therefore resulting in stools that become dry and hard. Diarrhea, on the other hand, results from the fecal matter being pushed through the colon too quickly. Due to the excessive motility of the fecal matter, the colon does not have enough time to absorb the water, which produces soft, watery stools. The irregular spasms in the colon give rise to a great deal of nausea, gas, and abdominal pain.

## TREATMENT

The best treatment known for irritable bowel syndrome is a change of eating habits. The first step we take is to rule out lactose intolerance, an inability to digest dairy products that can mimic the symptoms of I.B.S. Eating foods that are high in fiber will absorb excess water to prevent diarrhea, and will aid in keeping the stool moist to prevent constipation. A low-fat diet (20% or less of your total caloric intake should be derived from fats) is recommended. Heavy use of fats and oils will result in diarrhea, since fats are water resistant and the fecal matter will separate from the water. Since fruit and fruit juices can act as a laxative in the digestive tract, they, too, must be limited in some cases. It would also be beneficial to remove carbonated beverages and caffeine to prevent episodes of belching and gas. Alcohol must be eliminated from your diet to prevent irritating the intestinal lining. People who suffer from this condition occasionally experience problems digesting harsh cellulose like lettuce and raw vegetables. Different people may encounter a multitude of problems from separate foods. Consequently, what may induce symptoms for one person may not for another. You must learn from

personal experience what foods are tolerated and which ones are not. It may be wise to keep a list of foods that bring about symptoms, and avoid them as much as possible.

Eating smaller, more frequent meals allows the body to tolerate and digest foods better. The meals should be spaced evenly apart, and eaten at approximately the same times each day. Likewise, an increase of water and bran fiber may reduce the likelihood of developing symptoms. Adding exercise will improve bowel movement, as well as reducing stress. Stress is considered to be a major cause in facilitating the onslaught of I.B.S. Stress management is considered a serious treatment to prevent and reduce the ill effects of irritable bowel syndrome.

*Margo Pantoja is the Chief of Nutrition at the Institute of Eating Management. She counsels patients in clinical nutrition and eating management. Margo may be reached at 713-621-9339.*

## Dr. Rubin's Q&A

**Question:** Do you consider FM to be an autoimmune disease?

**Answer:** There is no evidence that FM by itself is an autoimmune disease. Some people think so for a couple of reasons. First, since it is treated by doctors who usually treat autoimmune conditions, patients often assume that FM is one of those. Second, FM is often intensified by autoimmune conditions. For example, if a patient is hypothyroid because of Hashimoto's thyroiditis, their FM is undoubtedly worse. The same could be said for lupus, RA, etc. So it is not uncommon for patients to have both conditions, giving the impression that the autoimmune condition is responsible for the whole kit and caboodle.

*Richard Rubin, M.D.*  
*Houston Arthritis Associates*

# Changes in the Social Security Disability Process

Robert C. Hardy, Attorney at Law

*The following article is based upon notes made by Mr. Hardy from his talk to FMAH in January.*

## **Fiscal Year 2001**

Initial Applications = 1,988,425  
62% denied [1,232,823]

Reconsiderations = 585,540  
84% denied [491,013]  
47% denied at initial never appealed for Reconsideration.

ALJ (Judges) dispositions = 433,584  
12% dismissed, 29% denied [177,769]  
12% denied at Reconsideration never filed a Request for a Hearing.  
59% of initial applications drop out before ever reaching the ALJ Hearing level.

98% of appeals to Appeals Council were denied.  
99% of appeals to Districts Court were denied.  
Bear in mind that this is an average. Some attorneys have much better success on these appeals.

Remand to ALJ by the Appeals Council and Courts result in about 60% of cases.

## **Processing Times in 2001**

Office of Hearings and Appeals (OHA) = 308 days  
Appeals Councils = 447 days

## Office of Inspector General (OIG) / Continuing Disability Investigations (CDI)

A new process started by Social Security designed to uncover fraud, this has turned out to be very intimidating to new applicants. There are 12 test sites around the country, Houston being one of them. Allegedly, the teams investigate disability cases that have been identified as “high risk” for “fraud or similar fault.”

## Attorney Fees

In 1991 Congress approved a law which provided that attorney fees could be set at \$4000.00 or 25% of past-due benefits, whichever was the smaller. Payments to people receiving Disability Benefits or Old Age Benefits have an annual Cost of Living (COLA) provision, which increases the payments each year according to the rate of inflation. The attorney fee law did not provide for increases in attorney fees.

When Congress investigated attorney fees this past year, they discovered that had attorney fees been increased at the same pace that benefits were increased, the attorney fees would now be at \$5500.00. Therefore, Social Security has announced that effective 2-1-02, attorney fees would be increased to \$5300.00 or 25% of past-due benefits, whichever is smaller.

HR3332

HR3332 is a bill which has been submitted by the House Subcommittee on Social Security. The purpose of the bill is to ensure that people needing representation would have proper representation. The number of attorneys willing to accept Social Security cases has been falling off due to several factors:

1. Social Security is slow to send low fees to attorneys. In the period from February to July 2000, Social Security issued 127,227 attorney fee checks. In the same period in 2001, the Administration issued 88,360 checks.
2. Applicants for Supplemental Security Benefits (not SSDI) are paid due benefits. The attorney is expected to collect his fee from the applicant after benefits are awarded. Many of the SSI recipients fail to pay their attorneys. The result is that many attorneys refuse to take these cases.
3. In 2000, Social Security started charging a "service fee" for withholding attorney fees. This fee is 6.3% of the amount of the fee and cannot be passed on to the client. Social Security has failed to explain why the cost of writing a check varies with the size of the check. Many representatives believe this is a subtle attempt on the part of Social Security to discourage representation because the attorneys are costing the Administration too much money.

HR3332 now has bipartisan support and at this time has 39 co-sponsors. We are hoping that more of our representatives will support this bill. It provides for:

1. Raising the attorney fee schedule
2. Limiting the user fee to 6.3% or \$100, whichever is smaller
3. Authorizing withholding of fees on SSI cases according to the same schedule as is in effect on SSDI

## Subcommittee on Social Security

The Committee on Ways and Means, Subcommittee on Social Security, conducted hearings beginning June 28, 2001. Testimony revealed the following interesting facts.

- Over the next decade, the number of people receiving disability benefits will jump by almost 50%. SSI Recipients will increase by approximately 15%.
- Social Security Administration is expected to develop the capability to process 3 million applications annually.
- One in six disabled workers is under the age of 40. The typical SSI disabled worker is over age 50 and has fewer than 12 years of education.
- The average monthly benefit for disabled workers is \$1311. Nearly half of these families rely on Social Security for at least half of their monthly income.
- Without Social Security, 55% of the families would live in poverty.
- The Office of Hearings and Appeals (OHA) has implemented a Hearing Process Improvement (HPI) program in an attempt to speed up the processing of claims. It has proven to be a dismal failure not liked by anyone involved except the SSA management. There has been a significant slowdown in the processing of claims coming before the judges (ALJs). This process was implemented without consulting with the ALJs.
- In March 2000, OHA processing time was 260 days. In May 2001, the time had increased to 319 days. The longer HPI is in effect, the worse OHA performance becomes.

- The Appeals Council is working out a backlog that is taking as long as three years to get response to appeals.
- A Quality Assurance Review program has been activated which reviews only favorable ALJ decisions with more intense scrutiny than is given unfavorable decisions. This discourages the granting of benefits by ALJs.
- In the Ticket to Work and Work Incentives Improvements Act of 1999, SSDI benefits will be reduced by \$1.00 for every \$2.00 that a beneficiary earns over a certain level. Currently, beneficiaries lose their entire benefit for months they earn over \$740, the SGA level.
- There has not been a full-scale review of the disability process and policy in over 20 years.

Testimony of Sanford G. Ross, Chairman of SS Advisory Board

1. The high volume of work demanded by the expanding number of appeals has prompted SSA to press for higher ALJ productivity, which many ALJs believe has not been balanced by an equal concern for fairness. Judges have now formed a union to resist the pressures.
2. There is a suggestion to establish a system of certification for claimant representatives.
3. Recommend the creation of a Social Security Court of Appeals.

As a Final Thought

If you needed brain surgery, would you go to a general practitioner or to a specialist?

We would like to thank Robert Hardy for contributing this article to the newsletter and speaking at our January meeting.

Robert C. Hardy, Attorney at Law, 1900 North Loop West, Houston, TX 77018, 713-529-8888.

## Success Story

Aaron Hamilton,  
VP-Patient Education, FMAH

The negatives of fibromyalgia often weigh us down. We hear the statistics and symptoms over and over again, and sometimes it becomes difficult to find the light at the end of the tunnel. We wonder if there is hope in our world of chronic pain and sleepless nights. That is why I am starting this column that I am hoping to fill with stories about real fibromyalgia patients who have overcome an obstacle, improved their lifestyle, and can show others that there is hope even when you have FM.

I will start with my own story. I have had FM for eight years. For the first five years, I managed to live a fairly normal and active life with regular exercise and medication. I went to Texas A&M, graduated in December 1997, and began working at Compaq as a Systems Analyst, but three years ago the real nightmare began when I got mononucleosis. I could never get over it. The medication I was on was no longer enough, and I started the battle of trying to find a doctor who wouldn't give up on me. They all said that I just had to deal with the symptoms, but I wasn't willing to give up. Eventually I had to leave my job, and my physical condition had gotten so bad that I had to use a cane to walk and my mother became my caretaker. I was only getting worse, and my prescription list was getting longer, but I finally found a doctor willing to step in and say "ENOUGH!" He got me off the majority of my medications, and I spent six months in physical therapy utilizing water therapy in a





# Opportunities to Help FMAH

As you know, The Fibromyalgia Association of Houston relies completely on donations to keep our organization rolling. We have a few ways that you can give back to FMAH without even opening your checkbook. We greatly appreciate your support!

## iGive.com

Want to shop from home in your pajamas and help FMAH at the same time? More than 323 top merchants at the Mall offer spectacular prices and exclusive member deals on everything from music to pet supplies. Here are just a few iGive.com stores that you may have heard of: Amazon, JCPenney, Eddie Bauer, Barnes & Noble, the Gap, Wal-Mart. When you purchase an item from one of the stores, FMAH receives a percentage of your purchase. Join iGive.com by logging on to our Web site at [www.FMAH.org](http://www.FMAH.org) and clicking on the "Favorite Sites" section. Click on the iGive icon, and you're on the way to fabulous deals and helping FMAH! It's free to join, and you're under no obligation.

## Randall's Card

You can use your Randall's Remarkable Card to donate to FMAH. They have generously donated \$382.84 so far this year. The first time you give your card to the checker, remember to register for Charity Number 1094. This number is encoded in your card, so you need to know only one time.

## Gerland's Advantage Card

Just give your card to the cashier when checking out, and enter the following ID number: 105500. FMAH will receive 1% of your purchase total.

## Kroger Share Card

Kroger will also make a donation to FMAH just for using their card. Kroger has donated \$1408.39 this year. For those of you new to the Share Card Program, you can pick up a card at a meeting, or call us and we will be happy to mail you one. Give the card to the checker before he or she rings up your order.

## EmailHELPS

Earn money for FMAH just by clicking an e-mail. **EmailHELPS** is a company that sends out e-mails. All you do is click on a link, and one to four cents is donated to FMAH. It may seem like a small amount, but if we all started clicking, it could certainly add up fast. You are under no obligation to buy anything, and your name will never be sold. If you would like to participate, please go to the Web site designed just for us: [www.fmahouston.emailhelps.com](http://www.fmahouston.emailhelps.com).

## Book/CD Drive

Clean off those bookshelves and your CD racks and help FMAH at the same time. FMAH has the opportunity to sell used books and CDs (even software) to raise money for the organization, but we need your help. Please bring your books and CDs to the meetings, and we will take care of the

rest. Think of the extra space you will have when you get those shelves cleaned off!

The following generous donors are people who have given donations by check. We are unable to thank each of you who donated cash, but we are grateful for all donations. The \* indicates donations of \$50 or more. Thank you!

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 \*Houston Education for Massage Therapy  
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\*In Memory of Eleanor Wallace  
 Cathy and Lee Jolly

## Remembering a Special Occasion

FMAH gratefully accepts donations in memory or in honor of a loved one. Please remember us for birthdays, anniversaries, or other special occasions. We will send a card to the honoree advising him or her of your donation. Thank you for thinking of us.

Honoree's Name \_\_\_\_\_

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Please make checks payable to: FMAH  
 P.O. Box 2174  
 Bellaire, TX 77402

FMAH would like to ask your help in completing the following short survey. We will post the results in a future edition of the newsletter. When the survey is complete, fold it in thirds, tape it shut, and mail it in or bring it to a meeting. There is room on the back for additional comments. **All information will remain confidential!**

Tell us about yourself and your FM

Gender: Male Female

Age: under 20 20's 30's 40's  
50's 60's 70's over 79

Ethnic Group: African-American Asian  
Caucasian Hispanic Native American  
Other

I have FM Symptoms: Always Usually  
Sometimes Never Not Sure

My symptoms affect my lifestyle: None  
A little Some A lot Severely

I have been diagnosed with FM by a doctor:  
Yes No

I have other health problems: Yes No  
Please briefly describe:

List medications you take:

Nonmedication treatments that help me the most are (massage, exercise, etc.):

You and FMAH

I found out about FMAH from:

My Doctor Phone Book Friend  
Newspaper, name: \_\_\_\_\_  
Other: \_\_\_\_\_

I don't come to meetings because (check all that apply): Traffic Don't drive at night  
Too far Too tired Not interested in speakers/topics I forget Belong to Internet chat room Other: \_\_\_\_\_

I'd come to meetings if:

You and Your Doctor

Doctor's Name \_\_\_\_\_  
Specialty \_\_\_\_\_  
City \_\_\_\_\_

Are you currently seeing this doctor?  
Yes No

If yes, how long have you been seeing him/her? Less than 1 year  
More than 1 year

How would you rate your doctor's "bedside manner"? (1 is lousy and 5 is great)  
1 lousy 2 3 4 5 great

Does he/she take the time to explain tests, procedures, and treatment rationales?  
Yes No

Would you recommend this doctor to others  
with FM?

Yes

No

Additional Comments Here:

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Return Address Optional

FMAH  
P.O. Box 2174  
Bellaire, TX 77402

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## Books, Videos, and T-Shirts

Quantity   Price   Total  
(includes shipping and sales tax)

**Books:**

*Living with Fibromyalgia: A Practical Guide to Coping* \_\_\_\_\_ \$7.00 \$ \_\_\_\_\_  
- edited by **Thomas Romano, M.D.**, and **FMAH**

*Fibromyalgia and the Mind/Body/Spirit* \_\_\_\_\_ \$23.00 \$ \_\_\_\_\_  
- by **W.B. Salt II, M.D.**, and **E.H. Season, M.D.**

*IBS and the Mind-Body/Brain-Gut Connection* \_\_\_\_\_ \$23.00 \$ \_\_\_\_\_  
- by **W.B. Salt II, M.D.**

*The FM Help Book* \_\_\_\_\_ \$23.00 \$ \_\_\_\_\_  
- by **Jenny Franzen & I. Jon Russell, M.D., Ph.D.**

Out-of-State Subscription to *FM Connection* \_\_\_\_\_ \$10.00 \$ \_\_\_\_\_  
(Newsletter: 1 year – 3 issues)

**Videos:**

*September Patient Conference* \_\_\_\_\_ \$18.00 \$ \_\_\_\_\_  
- with **Katz, Rubin, and Patt**

*Chronic Fatigue and FM* \_\_\_\_\_ \$10.00 \$ \_\_\_\_\_  
- by **Patricia Salvato, M.D.**

*Hypnosis, Stress Management, and Pain* \_\_\_\_\_ \$10.00 \$ \_\_\_\_\_  
- by **Marty Lerman, Ph.D.**

**FMAH T-Shirts:**



**M - L - XL** \_\_\_\_\_ \$13.00 \$ \_\_\_\_\_

**2XL - 3XL** \_\_\_\_\_ \$14.50 \$ \_\_\_\_\_

**4XL** \_\_\_\_\_ \$15.50 \$ \_\_\_\_\_

**Donation:**     \$ \_\_\_\_\_

**Total:**             \$ \_\_\_\_\_

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