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Neurological complications of Gluten Fibromyalgia

Dmitriy Labunskiy
University of Northern California, USA


Fibromyalgia (FM) is a complex chronic pain syndrome that affects about 2% of the population, mainly women, from all over the world, and is characterized by widespread pain in soft tissues, generalized sensory points, pathological fatigue and sleep disturbances. Celiac disease is a multisystem autoimmune disease that occurs as a result of gluten intolerance and affects 1-2% of the population, mostly women. The relationship of individual parameters with the presence of FM in patients of the main group and the comparison group was characterized by the presence of similar traits and differences. In particular, there was a coincidence of the fact and direction of the relationship of FM and parameters such as RLS, depression, anxiety. The relationship of FM with polyneuropathy of thin and thick fibers was noted only in patients with celiac disease, and the relationship of FM with migraine only in the comparison group. The study showed that the prevalence of FM in patients with celiac disease is three times higher than in the population. The typical form of celiac disease and the age of patients 40-59 years are prognostic unfavorable signs of the development of FM in patients with celiac disease. Qualitative signs of FM in patients with celiac disease did not have any specific features: *statistically significant* differences in both groups by such features as the number of sensitive points, the duration of FM in months, the number of points on the FM questionnaire were absent ($p > 0.05$). Both FM and

celiac disease are often undiagnosed diseases, typical of any gender and age. FM is often combined with diseases of the gastrointestinal tract. In this study, the frequent occurrence of FM in patients with celiac disease was identified. It is necessary to exclude FM in patients with celiac disease. The dependence of FM on polyneuropathy of fine fibers, restless leg syndrome, depression, anxiety in the group of patients with celiac disease was revealed. One of the modern methods for diagnosing polyneuropathy of fine fibers in patients with FM is the immune-histochemical study of skin biopsy specimens on C-fibers by means of antibodies to the protein gene product 9.5.

Speaker Biography

Dmitriy Labunskiy graduated with M.D. from the Medical School of the Moscow State University in 2002. After his graduation he worked at the Research Center of Neurology in Moscow working upon project on Neuroimmunology in Neurodegenerative Diseases. He has got his Ph.D. upon defending his thesis of Immune State, Neurospecific Proteins and Antibodies in Hereditary Spino-Cerebellar Ataxias. From 2008 he works at the University of Northern California in Petaluma, CA on a number of research projects in Neuroimmunology.

e: dlabunskiy@hotmail.com

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