

# Exploring fibromyalgia: insights from generative reprocessing therapy (TRG) for a comprehensive understanding of treatment and management

## Abstract

Fibromyalgia is a debilitating condition that significantly impacts the quality of life of many people worldwide. Little is known about its origins, but it is understood that the emotional component plays a crucial role. Treatments aim to improve patients' quality of life, but there is never talk of a definitive cure. However, Generative Reprocessing Therapy (TRG) has shown positive results in cases where the emotional component leads to unresolved conditions. The aim of this study is to report the case of a patient treated with TRG after conventional therapies failed to yield results. The patient signed a consent form to participate in the study and completed questionnaires about her quality of life before and after TRG, rating from 0 (poor) to 6 (excellent). The results covered various parameters: satisfaction with romantic relationships (0 to 5), sexual satisfaction (2 to 6), enjoyment of life (2 to 6), satisfaction with physical appearance (2 to 6), confidence in professional competence (3 to 6), feelings about the past (1 to 6), and optimism about the future (2 to 6). The results presented are promising and consistent with others found not only in cases of fibromyalgia but also in depression, anxiety, suicidal ideation, and panic disorder that used TRG as the primary therapy. Thus, TRG has proven to be an excellent alternative for patients who have not succeeded with conventional therapies.

**Keywords:** fibromyalgia, reprocessing, quality of life, therapy, emotional problems, depressive disorders, somatization

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**Abbreviations:** TRG, generative reprocessing therapy; SBR, Brazilian Society of Rheumatology; CBT, cognitive behavioral therapy; ICF, informed consent form

## Introduction

Fibromyalgia is a syndrome characterized by widespread chronic muscle pain without evidence of inflammation in the painful areas. It is a non-deforming rheumatic condition. Secondary symptoms include affected emotional senses, concentration and memory alterations, present in at least 50% of cases.<sup>1,2</sup> These symptoms appear to be caused by chronic pain and poor quality of life rather than the other way around. It affects about 2.5% of the world population, with no differences between nationalities or socio-economic conditions, and usually occurs more in women than men between the ages of 30 and 50. However, the most frequent psychiatric comorbidities associated with fibromyalgia are depression in 20 to 80% and anxiety in up to 60% of cases.<sup>4</sup>

Diagnosis is based on clinical criteria due to the absence of biological or imaging markers. The criteria include: widespread pain for at least 3 months and the presence of tender points in specific areas, being present in at least 11 of the 18 specified sensitive regions.<sup>5,6</sup> Current fibromyalgia treatment aims to reduce pain, physical disability, and emotional instability, involving a comprehensive approach combining medication, psychotherapy, and physical exercise. Pharmacotherapy typically involves medications acting on the central nervous system, such as antidepressants, benzodiazepines, analgesics, and selective serotonin reuptake inhibitors, to control sleep disorders and psychological symptoms. Non-pharmacological treatment often includes aerobic exercise and psychotherapy as key components.<sup>7,8</sup> Therefore, fibromyalgia treatment is palliative and adopts a multidisciplinary approach, integrating pharmacological

and non-pharmacological interventions. The combination of these strategies aims to address the complexity of symptoms, aiming to reduce pain and improve the patient's overall quality of life.<sup>2,9</sup> Investigations mainly focus on what should happen after diagnosis, rather than what led to this syndrome. This challenges us to produce knowledge in previously unexplored contexts. Our question is: What happened before the diagnosis?<sup>10,11</sup>

It is in this scenario that TRG has emerged as a therapeutic alternative for those who have not achieved satisfactory results with conventional therapies<sup>12-15</sup> and aims to treat the emotion behind the cause, not just the symptoms of fibromyalgia.<sup>16-18</sup> However, these results are still based on empirical observations, although they have been corroborated in hundreds of cases. This therapeutic approach is based on a reprocessing process conducted through five protocols: 1. Chronological; 2. Somatic; 3. Thematic; 4. Future; 5. Enhancement. Reprocessing is conceived as a method aimed at reanalyzing experienced events objectively to retrieve and neutralize feelings, considering that the initial processing was the direct experience of the event.<sup>14-18</sup> It is hypothesized that these events poorly processed by the human mind are the causes of somatic problems with undefined causes such as fibromyalgia.<sup>16</sup>

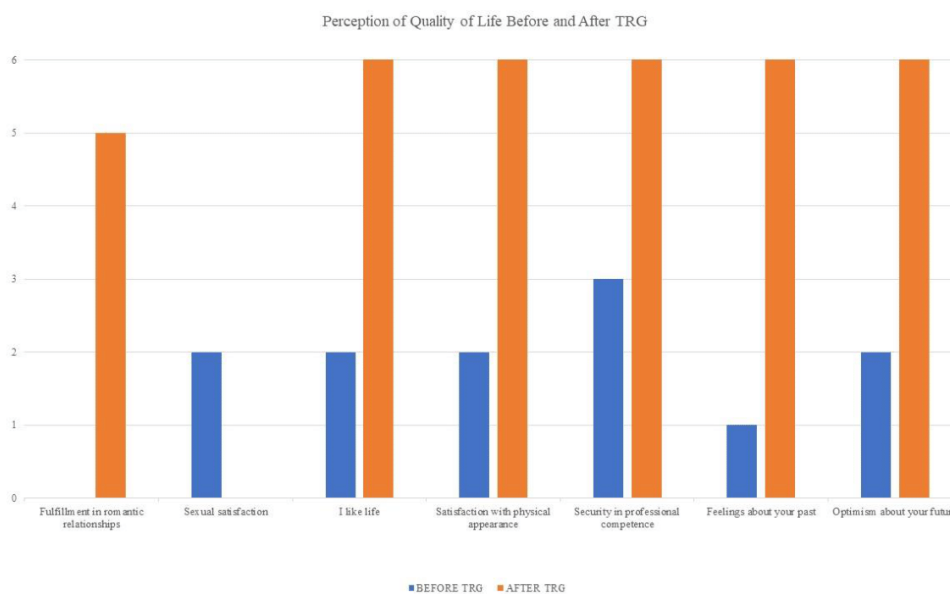
This study aims to present a case report of fibromyalgia in a woman previously unsuccessfully treated with conventional therapies and subsequently undergoing TRG, discussing the benefits obtained through the successful reprocessing of these experiences.

## Case report

A 53-year-old woman was diagnosed with fibromyalgia and previously treated conventionally with Cognitive Behavioral Therapy (CBT) and pharmacotherapy, with no success in symptom remission and quality of life improvement. This patient agreed to participate in the

study, signed an Informed Consent Form (ICF), underwent anamnesis, and responded to a qualitative questionnaire about her perceptions in various aspects of her life. The same questionnaire was administered after the completion of TRG treatment, allowing comparisons between the pre- and post-treatment states. The parameters addressed included satisfaction with romantic relationships, sexual satisfaction, enjoyment of life, satisfaction with physical appearance, confidence in professional competence, feelings about the past, and optimism about the future, each evaluated on a scale from 0 (poor) to 6 (excellent). She underwent the reprocessing protocols as described earlier.<sup>15</sup> At the start of treatment, she was no longer receiving CBT but she was using medications for fibromyalgia, depression, and anxiety. At no time was she asked to discontinue medication treatment, which was discontinued at the end of TRG, at her own discretion, under medical

supervision. The patient reported fear of rejection by her partner, a sense of familial alienation, and fibromyalgia crises at least once a month. In addition to fibromyalgia, depression, and anxiety, she reported suicidal ideation, sleep disturbances, and a suicide attempt without success. TRG sessions were conducted online on a weekly basis, totaling approximately 4 months of treatment. After completing treatment in 2021, she continues to be monitored semi-annually until mid-2026, using the same questionnaire administered at the end of TRG treatment. The participant underwent 12 treatment sessions with TRG. The protocols were carried out in the recommended order (chronological, somatic, thematic, future, and enhancement).<sup>12,13,15</sup> Graph 1 depicts the participant's results before and after TRG treatment regarding her perception of quality of life in various studied contexts.



**Graph 1** Perception of quality of life before and after TRG.

The results presented here demonstrate a positive evolution in the patient's quality of life across all assessed aspects. After TRG treatment, the patient no longer exhibited suicidal ideation, had no fear of rejection from her partner, and no longer felt a sense of family detachment. Medication was tapered off under medical supervision. Additionally, fibromyalgia flare-ups became increasingly infrequent until, by the end of treatment, the pain was completely alleviated. These results have persisted for over two years since discharge from TRG, and she continues to be monitored every six months until the end of 2026. A literature review will be conducted on each topic studied regarding the quality of life of the patient with the aim of comparing what the literature mentions about conventional treatments.

## Discussion

The results obtained in this study positively corroborate with those obtained in a previous study, where TRG was used in a patient with fibromyalgia.<sup>16</sup> There are other cases with satisfactory resolution in patients with fibromyalgia who also used TRG after trying conventional therapies for many years.<sup>12,13</sup>

The term «quality of life» has been the subject of study by several authors, who explore the complexity and inherent human subjectivity of this concept. The conception of quality of life is subjective and

individual. It is crucial to understand, from each individual's perspective, their definition and, based on this view, identify and address the key points that can contribute to the person fully achieving their well-being. The notion of quality of life is intrinsically linked to the human experience and has been associated with the level of satisfaction in family, affective, social, and environmental areas, as well as existential aesthetics.<sup>19</sup>

Marital satisfaction is a complex concept that is interconnected with various other factors. It is not limited to the evaluation of the marital relationship by spouses at a specific moment but rather to the continuous process of perceiving and feeling over time. It seems more appropriate to understand marital satisfaction as an attitude toward the spouse and marital interaction, rather than a simple evaluation.<sup>20</sup> In terms of «liking for life», the findings are not supported by the literature using conventional means to treat fibromyalgia, causing treated women to not feel pleasure in living and no improvement in their quality of life, even after a long time of treatment.<sup>21-25</sup> The evaluation of body image in people with fibromyalgia predominantly reflects a negative valence, being subjectively influenced by internalized and unconscious unfavorable conceptions about themselves.<sup>26</sup> In many cases, the intensity of this negative perception far exceeds what would be expected if only the objective physical repercussions of fibromyalgia were considered. The self-discrepancy theory, which

states that the greater the discrepancy between the ideal image and the current image, the greater the affective disturbance presented, such as depression and anxiety.<sup>27</sup> These data are corroborated by findings from the literature regarding people with chronic pain, where the physical domain is more affected, leading to doubts about their work performance capabilities, a decline in interpersonal relationships with coworkers who expect tasks to be completed, and affected self-esteem.<sup>28–31</sup> People with fibromyalgia have a discourse laden with subjectivities. Day-to-day life is permeated with limitations, hopelessness, sadness, insecurities, fears, anxiety, and the perception that life is passing by and the pain has no end. The daily life of these individuals is full of afflictions because their focus is on pain.<sup>16,19</sup> The trajectory of a person living with fibromyalgia is closely linked to their own life story. This is because throughout the different phases of life, individuals encounter various challenges that instigate insecurities. These situations can limit opportunities and hinder the realization of aspirations. The unpredictability, facticity, and adversities throw the human being into an uncertain world, where the only certainty is death. Faced with this panorama, existence requires courage to be and to live.<sup>32</sup>

In this context of somatization of emotional problems without known etiology, we consider fibromyalgia to be within this spectrum of chronic diseases.<sup>16</sup> Instead of treating only the symptoms, aiming to improve patients' quality of life, the ideal is to address the cause so that the symptoms do not manifest. These individuals experience suffering stemming from increasing intensity of pain, along with oppression and a sense of powerlessness to break free from this suffering, manifested in the form of bodily pain. In this context, it is understood that chronic pain, without an apparent cause, results from the somatization of psychic suffering.<sup>33</sup>

According to studies conducted with TRG,<sup>12,13</sup> not only with fibromyalgia<sup>16</sup> but also with depression, anxiety, and suicidal ideation,<sup>15,17,18,34,35</sup> this therapy demonstrates its contribution as an alternative for those who have not obtained results with conventional methods. The intention is not to reframe suffering in pursuit of improving quality of life but rather to reprocess suffering so that it no longer somatizes.<sup>36</sup> Further studies are being conducted to enhance understanding of the effectiveness of this therapy in the human mind.

## Conclusion

The findings presented in this article regarding the treatment of fibromyalgia patient using Generative Reprocessing Therapy (TRG) are promising. The approach seems to have played a significant role in improving the quality of life for this patient, alleviating not only physical symptoms but also positively impacting psychological and emotional aspects. TRG has shown to be an effective alternative for patients who did not respond to conventional therapies, providing lasting advancements even after treatment completion, highlighting its potential as a valuable tool in fibromyalgia management and paving the way for future investigations in this area.

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## Conflicts of interest

The authors declare that there are no conflicts of interests.

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