Hypothyroid Chronic Pain & Fibromyalgia Transcript

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Introduction and guest background

Hello. Welcome back to the Heal Your Thyroid and Reversing Hashimoto's summit. It's Dr. Jen here. And today we have an expert in the field of fibromyalgia to talk to us about hypothyroid, chronic pain and fibromyalgia.

So Dr. Rodger Murphree, he is a renowned expert in fibromyalgia. He has helped so many people recover from fibromyalgia. He's a frequent guest on local and national radio and television programs.

And we're so delighted to have him here to share his expertize in the subject matter. So welcome, Dr. Murphree. Can you tell us a little bit about how you got into what you do?

Well, thanks for having me on here. This is my favorite topic. I wish we didn't have to talk about fibromyalgia at all, but it's a topic that has enticed me for the last 22 years.

I've just been succumbed by really the fact that with fibromyalgia, there's such a void in the medical world right now, with fibromyalgia, it's really a condition where they tell you just pretty much to live with it once you get the diagnosis.

As a board certified chiropractic physician, nutritionist, I never would have thought 22 years ago I would be a specialist in fibromyalgia. I mean, it's not something I never could imagine because early on I was happy just to do hands on chiropractic care and work with patients with migraines and low back pain and things of that nature.

But as my practice started to evolve to where I started incorporating more functional medicine, something that that you're an expert at. I found that patients started coming to me who were what I call medical misfits.

And these are the people that kind of been everywhere, tried everything, and just couldn't get any results, or they were just looking for a more natural approach to their health challenge.

And I had a patient 22 years ago, came to me with fibromyalgia.

Fibromyalgia symptoms and diagnosis

I'd never even heard the term. And when she shared her paperwork with me, you know, she she had like 30 different symptoms. And I'm looking at her thinking she's a hypochondriac.

There's no way somebody can have all the pain that she has all over her body. She can't even wear a blast, you know, type blast. Your fatigue was so bad you could barely get out of bed if she took a shower.

She was done for the day. The brain fog, the low moods, the irritable bowel in the list just went on and on. But as a set where Jennifer, listening to her, I realized, why would I make this up?

And so for Sheila, that was my first fibromyalgia patient. I was able to use functional medicine, the testing and diet and some of the supplements I've been using for some other cases.

And she got well in three months. Now, for those of you who have fibromyalgia and you hear that and you think, oh, that guy's a nut, it I learned pretty quickly that it doesn't happen that way very often.

In fact, I was very I was very much humbled as I started getting referrals from other practitioners here in Birmingham, Alabama, when they found out I was had some success.

And Farrah, I quickly learned that this was not going to be an easy fix every time. So for me, my practices evolved

to where all I do pretty much now is fibromyalgia with patients all over the world.

That's amazing. And those are the patients. They need you. They need someone with your expertize in that believes them. And I think that's a big problem with fibromyalgia is a lot of the times they're like you said, they're kind of just like it's a wastebasket, they're tossed aside, they're given all these drugs that actually don't make them feel better.

They don't help with the pain. So for those listening out there, because, you know, everyone's here to listen about hypothyroidism, but some of the people listening might have fibromyalgia.

But for those that don't have fibromyalgia. Could you explain exactly how you would get the diagnosis, what it means, what kind of symptoms that they would have?

Yes. So there's a there's a direct connection. You can see what we know with Hashimoto's thyroid, itis several people have obviously been talking to Hashimoto's on here.

Well 40 to 50% of the people who get diagnosed with Hashimoto's also have fibromyalgia. Fibromyalgia affects about 1 to 2%, although that number is debated, I think it's much higher than that.

But it's estimates are one or 2% of the population around the world, primarily females. About 95% of those who have fibromyalgia are females between the ages of 30 and 66.

It's a it's a syndrome. So a syndrome is an illness that's made up of a group of conditions or symptoms. And we give it a name. In the case of fibromyalgia syndrome, what we see are the common symptoms are diffuse, achy, sometimes disabling pain, brain fog or sleep fatigue, irritable bowel syndrome.

And then the list can get really rather lengthy because they can have chemical sensitivity issues, they can have migraine headaches. And what typically happens for these individuals is like somebody with Hashimoto's, oftentimes it takes years before they ever get the diagnosis because no one's really testing for.

And with fibro, there's really no specific, definitive test we can look at and say, oh, you have fibromyalgia. It's really a process of elimination and it can take anywhere for four or five years and dozens of doctors before someone finally gets the diagnosis that they do have fibromyalgia.

So do we know what exactly causes fibromyalgia? Well, so there's debate about that. So for me, the last 22 years, what's made the most sense is a disruption or dysfunction of the hypothalamus, pituitary, adrenals.

So these are us really regulate the hypothalamus regulates our different systems in the body.

Thyroid dysfunction and fibromyalgia overlap

And when it gets under too much stress, the different systems that are supposed to coordinate with, whether that's our digestive system or our sleep wake cycle or our immune system, our endocrine system, it becomes this becomes dysfunctional as well.

So we see that with someone has fibromyalgia, they start to develop numerous symptoms. But really, fibromyalgia is not unlike a lot of illnesses that we work with.

And functional medicine is just a name. That's all it is. And what we want to do is look at what are the underlying causes or triggers of fibromyalgia and that means different things for different people.

There are some common triggers like Hashimoto's or a lot of thyroid that we'll talk about, but it's, it's something that comes along for these individuals is typically the straw that breaks the camel's back.

Some type of stress that can be from a surgery can be from an accident, it can be from a chronic illness, it can be

from a chronic toxic marriage or workplace.

But something comes along and they get under too much stress and that's it. And they just can't recover from it. Know and I think that's what makes it difficult is like you said, it's just a name.

It's basically a name for symptoms. And I have a problem with this and like things like pots, for example, and you have to look at the root cause because it's not helping the patient just treating their disease name.

You know, you have to dig a little bit deeper. And that includes actually talking to the patient. Right, for an extended period. So that's really important with fibromyalgia patients, you know, to make sure they're heard.

And what I've noticed in practice is if you just let the patient talk, they will give you the clues and the cues you need to figure out the root cause because they know their body the best.

Yeah, well, we look at the symptoms of fibromyalgia that I just share with you. Those are the very symptoms we see in fiber without low thyroid function.

Right? So the brain fog, low energy, diffuse, achy pain, tingling in the hands and feet, nerve pain, brain fog, anxiety, depression. And so when I'm hearing someone share these symptoms in me or I'm looking at their new patient questionnaire, my first thought always is, okay, well, they probably got something wrong with their thyroid.

And I found about 60% of the patients that I work with fibromyalgia have a problem with their thyroid. This ever, ever, it's it's either never been properly diagnosed or it's being treated in a way that's not effective for them.

They're on a synthetic medication that's not converting or they're on a dose. It's too low for them to really see the benefits of being on prescription medication.

But it's very common in the fibromyalgia community. And for those of you that are listening and thinking, well, I don't know if I have fibromyalgia or not.

What really separates from those who do or don't have fibromyalgia is for sleep. So if you're an individual in your struggle to fall asleep or to stay asleep, you're having to sleep, take sleep aids or prescription sleep medications.

There's a chance she might have fibromyalgia if you also have not only the poor sleep but diffuse achy pain that just will not go away. That typically moves around in different areas of your body and typically fibromyalgia.

If you get under stress, you see that those symptoms, the fatigue, the poor sleep and the pain actually becomes worse. Yeah, in fibromyalgia patients, they want to feel better and they they can't.

They're in too much pain. And it's it's just really hard to see them. They're tender all all around their neck and their shoulders. They have these certain points on their body used for diagnosis that if those tender points, if they have enough of these tender points, then they're given this diagnosis.

But but that's the thing. They're just offered, you know, pain medication. So I like that you brought up thyroid and fibromyalgia. They do have overlapping symptoms.

And if the thyroid is in optimal, it might just make the fibromyalgia worse. So how does hypothyroidism contribute to fibromyalgia? Well, the thing about a low thyroid function is it can contribute just about any symptom you can think of.

You know, you've talked about that I'm sure several people have on the summit. But in front of her manager, we can see that both our function again can trigger just about any symptom we would associate with fibromyalgia if that Dr.

John Lobe is deceased. Now, the late John Lobe Dr. Lobe now he wrote a book, The Metabolic Treatment for

Fibromyalgia. And it's a mental it's over here on my book shelf on the other side of our mental short.

But it's a you know, it's a tome. I mean, it's like, I don't know, it's a thousand, 1500 pages or something of all medical jargon, you know, very much goes down the rabbit hole.

All the research that's in there, it's printed in there. And it's all about the fact that he, he and other practitioners who bought into this were having incredible benefit.

We're seeing incredible success working with the fibromyalgia patients, doing nothing but treating thyroid, whether it showed up on the blood test or not.

Conventional treatment limits

And of course, you know, as a thyroid expert, we see a lot of times that the blood work may look normal, but the person has all the symptoms of low thyroid, what we call you thyroid syndrome.

And oftentimes, if you're willing to work with that patient, try to boost their thyroid, even though their tests look normal, a lot of times you'll see that there's symptoms.

Whether that's fatigue or brain fog or anxiety, depression or diffuse achy pain that we see and fibro will be benefited by just starting that process.

Yeah, and that can be really hard. If a patient has fibromyalgia, they want to get their thyroid checked and they're not getting a complete lab work. So if you are listening, you have fibromyalgia, ask for a complete thyroid panel, which you actually have to tell them what it is because they a lot of doctors think a complete maybe is just a test and a T for you want to get a free T for free t three you want to get antibodies.

It's nice to get a vitamin D level. Sometimes Epstein-Barr panel, you know, there there's a lot of different things that you want to investigate and not just get a t h I had a patient and she doesn't have fibromyalgia, but she just she was feeling really bad weight gain and hurt TSA each it was within normal range and she I did a full thyroid panel and she her TSA was actually out of range now and her t three and t four free were both normal, but she had thyroid antibodies, TPO, so she had a new diagnosis of Hashimoto's that was kind of brewing.

So when you have, whether it's fibromyalgia or any kind of symptoms, you constipation, fatigue, brain fog or body pain, you want to make sure you're really investigating your lab work because if you catch Hashimoto's really early, you're going to have less destruction of the thyroid.

And what we want is the thyroid to be optimal. We don't want it to be operating at less of a capacity because it had been damaged by Hashimoto's. So, you know, just advocate for yourself out there.

Definitely. Are there any are there any other labs that you would suggest to a fibromyalgia patient if they were going to their doctor with these overlap symptoms?

You know, for me, I look at the you know, the blood work. You just you share. As you know, I find that so many of our patients have the beginning of Hashimoto's.

That's probably classic. I say that their test age probably, you know, it's good, it's probably okay. But they have elevated TPO or TG B antibodies that no one's ever looking for.

I had a patient several years ago who came into my clinic and she she was orange. Now, I don't know if you've ever seen this in your practice, but she was orange to look like I cared.

I just thinking that she you know, put the spray tan on wrong or you know I asking about that she say now that's just just that just kind of turn this color over the last couple of years.

It turns out that it was her thyroid.

The Murphree Method for fibromyalgia

So her thyroid was so non dysfunctional that she couldn't even convert the carrots and, you know, the the vegetables that she's in particular, carrots into Vitamin Geechee.

And so she turned this this this hair color. And sure enough, once I found that and got her on right thyroid protocol, she turned around and and our thyroid I'm sorry, her fibromyalgia symptoms were dramatically improved and this was probably ten, 15 years ago.

I haven't seen anybody like that since. But what I do routinely see is patients come in, they have all of the symptoms of low thyroid. They're told their bloodwork looks normal.

And then when I look at their bloodwork, they did a TSA maybe did a total T4, that's it. But they didn't check anything else. And time and time again, this used to really upset me.

Now this used to I would see that that they had the beginning of Hashimoto's and I would start to treat them for that. Looking at is it a low vitamin D?

Do they have a problem with anemia? What's their ferritin level? I don't know if you mentioned ferritin or not. That's a big one for me is to look to see what their iron stores are.

You mentioned Epstein-Barr virus. You know, if we're looking at Hashimoto's, you want to know what is it? That's the underlying trigger that's causing the body to attack itself and create this whole autoimmune disease.

But this is so common, like I said, used to make me just really furious because if you catch it, then you can really see significant improvement in these folks with fibromyalgia who are battling these symptoms all all due to really just a low thyroid.

Yeah. And and that's so important to like you said, you know, look at their labs. What did you actually get? Don't take their word that from their doctor when they said, oh, all the labs, look, just make sure you're looking and that it's complete, because a lot of times it's not complete.

And then you're missing an opportunity to find an early diagnosis so you can switch it around. And that's the early diagnosis of any autoimmune disease is so important.

And just to start the healing. So what is the conventional medicine approach for treating fibromyalgia? Well, unfortunately, it's not much. You know, so, again, I've been doing this for two decades, and what I've seen over the last two decades is we were searching for the magic pill like we do for most illnesses out there.

We kept thinking, oh, we'll find it, it'll be some or Cedella or it'll be Lyrica. That'll be the magic pill that will help to dramatically reduce or eliminate the symptoms that people have with fibromyalgia.

But what we've seen is one drug after the next has been a dead end for fibromyalgia over the last decade. And so now we're at the point where most practitioners, conventional practitioners and even a lot of even in functional medicine have pretty much given up on fibromyalgia, because what they've seen is the drug therapy approach alone doesn't yield the positive results that we want.

In fact, what we see with surveys over a 15 year period, those are fibromyalgia that are just using common prescription medications. Their symptoms continue to get worse, not better.

And doctors have realized that the medications really are not that effective, that they are associated potential side effects. And so at this point, really in conventional medicine, what they tell their patients is you've got fibromyalgia.

We don't know a whole lot about it. You're just going to have to learn to live with it. It's gotten so bad, Jennifer, that rheumatologists, which are really the designated supposedly experts in fibromyalgia, most rheumatologists won't even accept the fibromyalgia patient anymore.

They just because they know that they don't have anything to share with them that's really going to be effective. Fortunately, you and I hope we practice functional medicine and we know if we can look for the underlying triggers and we start to address those, we can see dramatic improvements and turnarounds in fibromyalgia.

Patients. Yeah, it's it's very exciting. You want to once you find that root cause. Rodger, I have to pause for a second. Okay. Well, let's talk about the Murphree method for treating fibromyalgia.

Can you explain a little bit about what that is? Well, the name's not real original. No, but years ago, I was teaching other practitioners about what I learned about fibromyalgia, trying to help them, help their patients have fibro, because it's a very as you know, it's a very difficult illness to have. It's also very difficult to treat.

These individuals have so many different issues going on and someone said, well, you need to give it a name. I know. So. So anyway, it's the Murphy method, but I've learned some real common threads about this illness that if we can fix like four things, if we can really focus on four key things, like a puzzle, if you will take a, you know, a thousand piece puzzle and throw it down on the on the ground and you're where do you start?

Well, if you're a puzzle put together, you like to mess around puzzles. You know, if you can get the corners, the four corners of the puzzle now, we can start to put it together from the outside and it becomes a lot easier.

Otherwise it's just a lot. And all this. So what I've learned, number one, is they've got to get this deep restorative sleep. If you're I mean, if you think about it, if you are struggling to fall asleep, stay asleep, can't sleep at night, eventually you're going to start to see you're exhausted mentally and physically.

And that's what we see with these individuals. They have no energy because they're just not getting any rest because the body can't repair itself. We start to see that.

They start to have things like irritable syndrome, bloating, gas, indigestion, constipation, loose vomit. And that's their inflammatory markers go up by 40%.

So they start to have more pain. We know that if you're not getting deep restorative sleep, your pain goes up, you have more pain. And they tend to develop a thing called central sensitization pain syndrome, where pain becomes more magnified, all because they're not getting this deep restorative sleep.

So that's the focus right there. Number one is that step two is making sure that we provide the right combination, high doses, safe doses of vitamins, minerals, amino acids, essential fatty acids, which are the building blocks of the different hormones and chemicals that they need to make the body run correctly.

We know we've fibromyalgia that they have a deficiency in mitochondria production, so they have less mitochondria. And oftentimes the mitochondria that they have, which are the power plants of every cell, are decoupled.

They're not working in combination together, sometimes in due to a thing called cell danger theory, but they their their energy, their cellular energies, not there.

So we need to provide this high dose of vitamins, minerals, amino acid, essential fatty acids, which is another corner of the puzzle. Then the third corner is to make sure that we're fixing any type of adrenal fatigue.

So if they're if they, they often say their get up and go is got up and went, they just have no energy and their resilience to stress is sabotage. So stress becomes more magnified.

Bright lights, loud noise, it's changes in the weather, things that you and I would take for granted. Any type of

stimulation can really set them into what we call a fibro flare.

And that comes to them because they're stress coping glands. The adrenal glands are not providing the cortisol and the DHEA. They need to be able to handle the stress of fixing.

That is the third quarter. And last but certainly not least, because this is a cornerstone for functional medicine as well as putting a puzzle together is fixing any kind of underlying GI disorders which would sabotage their body for really being able to work correctly.

So make sure that we're looking at what are the underlying causes of them having the bloating, the gas, the malabsorption, the reflux, the irritable bowel and starting them on the right protocols.

But once you get these four corners, that is not the end all be all. But it lays the foundation now to at least be able to start to put the puzzle together.

And then it could be, oh, okay. Well, they got they have Hashimoto's. No one's ever addressed this with them. So we got to fix that as well. They also may have yeast overgrowth there.

They have some type of food allergy that's presenting inflammation. But if you don't get these four corners, the mercury method for fibro, you're just really grasping at straws and treating things that are really probably not going to yield long term lasting results.

Oh, that's awesome. And it's so important because foundationally, you need that. You need sleep, you need good gut health. And a lot of people want to jump in, go on all these fancy peptides or supplements.

And while those are great and they have their place, you have to be working at those basics like you said before you get in the middle of the puzzle. So key.

Yeah. So in the past now I do everything by telemedicine now. So it's that it used to be when I had a clinic, people would come in and they'd have this, you know, like a Sherpa, the spouse usually husband would have this big old pillows, pillow, you know, pillowcase full of supplements.

And they're like a like a Sherpa going up the, you know, the mountain and they dump it down on the table and say, oh, should I, you know, what should I be taking?

And years ago, you know, years ago, I'd go through everything with them and say, Oh, this is good, that's good. Then I got to the point, this is ridiculous.

And I would just take them and I would just knock right into the trash, get a job. You're better off not taking all this. Let's start over and let's figure out exactly what you need.

Because if you're just doing a shotgun approach and that's how most people approach their their condition and particularly fibromyalgia. But most people have a cover for a supplements and drugs and, you know, things that they have tonics and lotions that they've tried over the years that didn't work.

Resources and closing remarks

So, you know, I saw pretty quickly that we really needed to have some type of foundation and then build around that. Every body is different where it is different on the inside as we're on the outside. So there's no one.

This works every time for fibro because everybody's fibromyalgia is different than the next person. But these four corners are are everyone struggles with those those four issues.

They get that right. Then we can start looking at mold toxicity issues or we can look at food allergies or yeast overgrowth or leaky gut or Hashimoto's, which is so common.

So there is a you know, there's a way to set them on the right path that will ensure that they're going to be set up for success with some additional coaching.

Yes, that's so exciting. Well, I love all you do for all the fibromyalgia patients out there. Thank you so much for sharing your expertize. So would you tell us about what you have going on right now, how people can find you, work with you.

It's great. Really appreciate it. So the best place to learn more about fibromyalgia is just go to my website, yourfibrodoctor spell that yourfibrodoctor.com.

You'll see all sorts of free reports. You can download free videos, blogs, podcasts. The Super Healthy Human podcast is also you can access that where I do more of a generalized podcast that that website, there's tremendous amount of resources there available to you and love for you. Check that out.

That's amazing. Well, thank you so much, Doctor Murphree, for joining us today. Thank you. This is going to be a great summit. I'm excited to be a part of it.

I'm really looking forward. You got some great presenters. This is going to be a really a wonderful summit. I'm going to make sure all my my patients tune in.