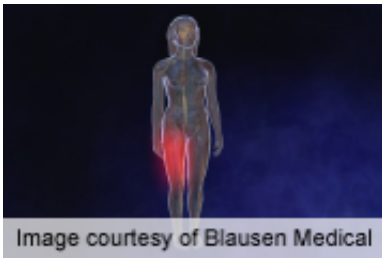


# Modified ACR criteria effective for fibromyalgia diagnosis

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(HealthDay)—The 2011 modification of the 2010 American College of Rheumatology (ACR) preliminary criteria for the diagnosis of fibromyalgia (2011ModCr) has acceptable diagnostic accuracy compared with the 1990 ACR criteria, according to research published in the September issue of *Arthritis Care & Research*.

Robert M. Bennett, M.D., from the Oregon Health & Science University in Portland, and colleagues validated the 2011ModCr and developed alternative criteria in a sample of patients with pain disorders. Data were collected from eight clinicians from geographically varied locations in the United States. Complete data were assessed for 321 patients.

The researchers found that 135 patients had [fibromyalgia](#), based on the 1990 ACR criteria, and 186 patients had 16 common chronic pain conditions. The sensitivity and specificity of the 2011ModCr versus the

1990 ACR were 83 and 67 percent, respectively, with a correct classification of 74 percent. In alternative criteria, the maximum diagnostic accuracy was based on  $\geq 17$  pain sites from the 28-area pain location inventory (PLI) and a Symptom Impact Questionnaire (SIQR) symptom score of  $\geq 21$ . The diagnostic sensitivity and specificity of these alternative criteria were 81 and 80 percent, respectively, and the correct classification was 80 percent.

"The 2011 ModCr had robust operating characteristics," the authors write. "Alternative criteria based on symptom items from the SIQR and pain locations from the PLI had comparable operating characteristics, with somewhat better specificity and ease of use."

One author disclosed financial ties to Pfizer.

**More information:** [Abstract](#)  
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