OP-006 https://doi.org/10.5080/61upk.ozt425

POST-TRAUMATIC STRESS DISORDER AND COMPLEX POST-TRAUMATIC STRESS DISORDER IN FIBROMYALGIA: A PILOT STUDY

Cansu Ünsal Mavi[1], Öznur Dilara Tüzün[1], Rabia Bahar Demircan Endeş[1], Asude Ak[2], Meltem Karaatlı Erdoğan[2]

[1]Department of Psychiatry, Health Sciences University Kartal Lutfi Kirdar City Hospital, İstanbul, Türkiye
[2]Department of Physical Therapy and Rehabilitation, Health Sciences University Kartal Lutfi Kirdar City Hospital, İstanbul, Türkiye

BACKGROUND AND AIM: Fibromyalgia is a chronic pain syndrome characterized by widespread pain and multisomatic symptom burden and is frequently accompanied by psychological distress. Within the ICD-11 framework, Complex Post-Traumatic Stress Disorder (CPTSD) includes core Post-Traumatic Stress Disorder (PTSD) symptoms together with disturbances in self-organization (DSO), reflecting affective dysregulation and negative self-concept. While PTSD symptoms have been examined in fibromyalgia, the potential contribution of CPTSD-related self-organization disturbances remains unclear. This pilot study examined probable ICD-11–consistent PTSD and CPTSD symptom profiles and their associations with fibromyalgia symptom severity, hypothesizing that DSO domains would demonstrate additional associations beyond core PTSD symptoms.

METHODS: Adults with fibromyalgia (N = 34; age 18–65 years) completed the Symptom Severity Scale (SSS), International Trauma Questionnaire (ITQ), Patient Health Questionnaire-4, and a sociodemographic form. The ITQ assessed PTSD and CPTSD symptom clusters using validated ICD-11–aligned scoring algorithms. Classifications represented probable symptom profiles rather than formal clinical diagnoses, as structured diagnostic interviews were not conducted. Pearson correlation analyses and hierarchical linear regression predicting fibromyalgia symptom severity were performed. Ethical approval was obtained from the Scientific Research Ethics Committee of Kartal Dr. Lütfi Kırdar City Hospital (Approval: 27.08.2025;20251010.99.1913).

RESULTS: Probable ICD-11–consistent PTSD and CPTSD symptom profiles were identified in 14.7% of participants. Fibromyalgia symptom severity correlated with re-experiencing (r =.397), avoidance (r =.363), affective dysregulation (r =.498), and negative self-concept (r =.461). PTSD symptoms explained 13.8% of variance in symptom severity (R^2 =.138), whereas addition of DSO symptoms produced a modest but non-significant increase (R^2 =.189; ΔR^2 =.051, p =.172).

CONCLUSIONS: Trauma-related symptom dimensions were associated with fibromyalgia severity. Although CPTSD-related disturbances showed limited additional explanatory value beyond PTSD symptoms, findings highlight the potential clinical relevance of trauma-informed psychiatric assessment in fibromyalgia and require confirmation in larger studies using structured diagnostic evaluation.

Keywords: complex, post-traumatic stress disorder, fibromyalgia