PROGRAM STRATEGY BRIEF

Fibromyalgia Live Educational Meeting

Business Development Task | Ken Brandon II, PhD

TARGET AUDIENCE	FACULTY
Primary care physicians (PCPs) with limited recent education on fibromyalgia	A psychiatrist who is an expert on fibromyalgia and an experienced speaker
FORMAT	**SCOPE**
Half-day (about 4 hours), live disease-state educational meeting.	Disease-state education only. The source article does not support a specific agent or indication, so the program includes no product promotion. The closing discussion may address potential therapeutic implications of the proposed mechanism while clearly distinguishing them from established evidence.

Learning Objectives

01 Explain evidence for altered pain processing in fibromyalgia, including the proposed role of reduced descending serotonin (5-HT) and norepinephrine (NE) inhibition.

02 Recognize associated sleep, mood, and anxiety symptoms.

03 Apply this framework to clinical evaluation and patient communication.

Measures of Program Success

REACH	REACTION	LEARNING	APPLICATION
Registration and attendance	Participant ratings of relevance and usefulness	Matched pre/post knowledge and confidence questionnaires	Resource engagement and reported changes at 4-8 weeks

I. Pre-Meeting Recruitment Initiatives

Objective: Recruitment should make the problem immediately relevant to PCPs and preview the questions the meeting will answer.

- **Targeted email campaign built on a clinical hook:** widespread pain, yet no identifiable pathology at the painful muscle and joint sites.
- **Event landing page** with a short faculty teaser video, the learning objectives, and a central question: “When the pain is real but routine evaluation finds no pathology, where is the problem?”
- **Personal outreach** through appropriate client field teams, local health systems, and primary care professional networks to complement the email campaign.
- **Reminder campaign:** follow-up emails one week and one day before the meeting reinforce the clinical question, faculty expertise, and practical value of attending.
- **Simple registration** with a brief pre-event knowledge and confidence check (multiple-choice and 1-5 scale items). It serves as a needs assessment and a baseline for post-meeting comparison.

LIVE EDUCATIONAL EXPERIENCE

II. Proposed Half-Day Live Meeting Agenda

TIME	MEETING COMPONENT	PURPOSE
0:00-0:15	**Welcome and audience polling**	Orient participants and use live polling to surface current perceptions, knowledge gaps, and confidence.
0:15-0:30	**The clinical challenge**	Set the context: painful sites without identifiable pathology, past psychosomatic interpretations, and the resulting diagnostic difficulty. Frames the problem without previewing the mechanism.
0:30-1:00	**The Mystery of Fibromyalgia: Understanding the Biology Behind the Pain**	Deliver the Part 2 slide presentation: evidence that the pain is measurable, how normal descending pain inhibition works, the proposed role of reduced 5-HT/NE inhibition, and links among pain, sleep, mood, and anxiety.
1:00-1:15	**Faculty-guided discussion**	Reinforce key concepts from the presentation and allow participants to clarify questions about altered pain processing and the proposed role of descending 5-HT/NE inhibition before applying the framework in subsequent activities.
1:15-1:30	**Break**	
1:30-2:00	**Small-group discussion**	Groups discuss diagnostic challenges they have faced and whether the mechanistic framework changes their thinking. Each reports back one insight.
2:00-2:55	**Patient case workshop**	Apply the framework to a case of widespread pain without identifiable pathology, then introduce sleep, mood, and anxiety symptoms, which may result from ongoing pain or involve shared 5-HT/NE signaling abnormalities. Discuss evaluation and patient communication. A brief patient testimonial illustrates the lived experience of the diagnostic journey and reinforces the importance of patient communication.
2:55-3:35	**Expert discussion: unanswered questions and future directions**	Discuss remaining uncertainties, future research directions, and possible therapeutic implications. Invite participant questions while distinguishing established evidence from proposed mechanisms.
3:25-4:00	**Post-assessment and closing**	Repeat selected pre-event knowledge and confidence items to measure educational impact and remaining needs. Complete the satisfaction evaluation and close with key takeaways and available follow-up resources.

III. Post-Meeting Follow-Up Initiatives

Objective: Follow-up should extend the meeting's educational value, give participants practical resources, and show whether practice changed.

THANK-YOU EMAIL WITHIN 24 HOURS

Resource hub containing the slides, an on-demand recording or selected segments, a one-page summary of key takeaways, and a downloadable infographic of ascending pain transmission and descending 5-HT/NE inhibition.

PATIENT HANDOUT

A short, plain-language explanation of why fibromyalgia pain is real despite no visible damage, and how sleep, mood, and anxiety relate to it, to support patient conversations.

PRACTICE-IMPACT SURVEY AT 4-8 WEEKS

Whether participants changed their evaluation or patient communication, and what further education they need.