

FASICS: fasciculation anxiety syndrome in clinicians

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Almost 7 years ago, I suffered from fasciculation anxiety syndrome in clinicians (FASICS). I knew nothing about it at the time, not even the name. I was unaware I was the perfect target: a 47-year-old male neurologist.

I was going through a very intense period of work. I had several oral presentations to make at the national congress of neurology, one of which was particularly challenging; I was supposed to discuss a difficult case, after which the pathologist would provide the solution. I spent several evenings and nights, weeks before the event, reviewing carefully the literature, to ensure I would not miss the correct diagnosis. I had other more academic talks to prepare, as well as written or reviewed manuscripts to referee, not to mention routine clinical activity in my hospital, including outpatients, electroencephalogram readings and meetings. And that was only work. I also had several roles in different medical societies and journals. In short, it was a hectic, stressful period.

I was fit, with no medical history, on no medication, with a lovely family, and a sub-3.5-hour marathon to prepare for in the spring. An ordinary man, and quite an ordinary life, but a neurologist, and a 47-year-old man.

Looking back, it was not such a bad period. I was stressed, but I felt this was 'good stress' that would help me get on with the multiple activities ahead, with reduced sleep time, heavy coffee drinking, working hard, jumping from task to task, running early in the morning and gobbling down meals so as not to waste time.

At the congress, one night I was suddenly awoken by a strange sensation in my legs, but it rapidly vanished. I remained alert for a while, then went back to sleep.

Two weeks later, the symptoms recurred intensely. The period of stress was behind me, and I had been feeling rather relaxed. After the peak of my activity, I had focused

on my clinical duties, moving on to other topics within a month. However, that evening while resting in bed, reading before sleep, I felt something abnormal in my legs. It was like small contractions in muscle fibres, just like fasciculation. To be sure, I gazed at my right calf and grabbed it. I saw exactly what I had suspected, and felt dread: I was convinced of crawling with fasciculation in my legs. I asked my wife to confirm this, but she failed to see one. I concluded: just a question of chance. They were real.

Perceiving fasciculation made me tense. I became totally haunted by my muscular sensations, and they were bad, really bad. No chance for me to get a wink of sleep that night. Actually, I could no longer sleep. Lying still on the bed felt agonising. I watched the anticipated twitches in my muscles, which sounded like the fateful death knell. Hyperarousal was accompanied by nocturnal pollakiuria; I kept getting up to urinate only small amounts.

The next day was really painful. I dragged myself to my office, and ruminated. The lack of sleep had a severe impact on my work, but more so, the continuous sensations in my legs were weighing on my mind. The second and the third nights were identical to the first: complete insomnia. The fasciculation kept me awake and would not let me sleep even for 5 min. The next day, I resigned from all the positions I held in various medical societies and started contacting insurance companies. I believed I was suffering from motor neurone disease and that I had to make arrangements quickly. Even having an electromyogram wouldn't have told me anything more than I was already knew for certain. I believed in my clinical expertise: no room for error, I was dying. My priorities were now to protect my loved ones from want.



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Why this urgency to resign from duties that could have been postponed? I have no clear answer. It would certainly have been more appropriate to wait for a firm and definite diagnosis. I guess I had some tasks, which just then seemed unbearable. I had reached this point where everything unrelated to surviving was an insuperable burden.

Alerted by other colleagues who had heard of my resignation, a friend, another neurologist came to my office. I told him about my findings: fasciculation, spastic rigidity (that I felt) in the legs, muscle weakness and fatigue (I thought). I also told him about the 3 sleepless nights.

He stopped me short: 'You should start by getting some sleep', he said. 'Take a diazepam'.

It was the first step to a quick recovery. I didn't have diazepam but took clobazam. Ten milligrams. I slept. The next morning it was over. I no longer felt the fasciculation. Sleep was then restored, even without medication. Within a couple of days, I was back to myself.

It took me a week to answer my question: what had happened to me? By browsing through the literature, I found the recently published paper from Simon and Kiernan on 'FASICS: fasciculation anxiety syndrome in clinicians'.¹ Among 20 clinicians complaining of fasciculation and expressing fear of being diagnosed with motor neurone disease, 70% were finally classified as FASICS. Not motor neurone disease, but anxiety.

Heavy coffee drinkers, as I was. Among the patients with FASICS, 79% were male, and their average age was 46.8 years. Most were specialist physicians and half were neurologists. I was fascinated to read how the average portrait of the FASICS victim looked like me.

Without knowing it, I had been the perfect target.

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