CHRONIC FATIGUE SYNDROME, FIBROMYALGIA and RELATED CONDITIONS

Rosamund Vallings
MB BS
Tired all the time

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*Conserve energy? Not a problem... not a problem.*
Who gets CFS/FM
PREDISPOSING FACTORS

- VIRAL ILLNESS
- STRESS
- PERSONALITY
- SEX
- OVER-EXERCISE/INJURY
- SLEEP DEFICIT
- GENETIC
CDC Criteria (Fukuda et al)

- Unexplained persistent or relapsing fatigue, of new or definite onset, not due to ongoing exertion, not relieved by rest, and results in substantial reduction in previous levels of activity
- 4 or more of defined symptoms concurrently present for 6 months or longer:
CDC Criteria – defined symptoms

- 1. impaired memory/concentration
- 2. sore throat
- 3. tender cervical or axillary nodes
- 4. muscle pain
- 5. multi joint pain (no redness/tenderness)
- 6. new headache
- 7. unrefreshing sleep
- 8. post-exertional malaise
DIAGNOSIS OF FM

- EXCLUSION OF OTHER DISORDERS
- ASSOCIATION WITH OTHER ILLNESS (eg CFS, PPS, SLE, LYME etc)
- STAND ALONE CONDITION
- CHRONIC PAIN SYNDROME
- VALIDITY OF PRESSURE POINTS
DIAGNOSIS
(CDC criteria)

• History
• Examination
• Laboratory testing
• Other available tests
• Specific symptom related screening
• Psychological assessment
DIAGNOSIS

- A DIAGNOSIS OF EXCLUSION
- SUB-CATEGORIZATION
- ONGOING SURVEILLANCE
- 30% EVENTUAL ALTERNATIVE DIAGNOSES
“Most of your tests are normal... it could be M.E.”
CARDIOVASCULAR RESEARCH

- BP, TILT TABLE (Rowe)
- BLOOD VOLUME (Bell)
- ECG (Lerner)
- RBC RHEOLOGY (Simpson)
RESPIRATORY STUDIES

- HVS (Clifton)
- EXERCISE TESTS (McCluskey)
- SINUS ISSUES (Bartley)
NEUROLOGICAL RESEARCH

• BRAINSCANS: CT, MRI, SPECT (Mena)
• ION CHANNELOPATHY (Chaudhuri)
GASTRO-ENTEROLGY RESEARCH

- E. COLI / ENTEROCOCCUS (Butt et al)
- H PYLORI
- GIARDIA (Snow)
- MOTILITY (Burnett)
- FOOD INTOLERANCES (Burnett)
- NB candida NOT involved
BIOCHEMISTRY

• ELECTROLYTES: Mg (Cox), K (Burnett)
• LIPIDS (McGregor)
• AMINO ACIDS (Dunstan)
• CARNITINE (Kuratsune)
• B12/HOMOCYSTEINE (Snorrasen, Lapp)
IMMUNOLOGY

- CYTOKINES (Klimas)
- NK CELLS (Klimas)
- IMMUNOGLOBULINS (Dwyer)
- RNaseL (Suhadolnik)
- ALLERGY/SENSITIVITY
MICROBIOLOGY

VIRAL

BACTERIAL

Mycoplasma (Nicholson)
Staph toxin (Roberts)
Lyme disease (Harvey)

FUNGAL

PARASITES

Giardia (Snow)
TOXICOLOGY

- CIGUATERA (Pearn)
- MERCURY (Dunstan)
- LEAD
RHEUMATOLOGY

• FM POINTS
• STRENGTH/WEAKNESS
• EXERCISE
  – Muscle fatigue (Natelson)
  – REE (Watson)
  – Lactate
  – Carnitine (Kuratsune)
  – Endurance (Behan)
SLEEP STUDIES

• LOSS OF LEVEL 4 SLEEP (Moldofsky)
• DECREASED REM SLEEP (Moldofsky)
Normal sleep cycle
Psychological testing

- COGNITION (de Luca)
- REACTION TIMES
- DEPRESSION/ANXIETY SCALES
- BIPOLAR DISORDER
GENETIC STUDIES

• TWINS (Buchwald)
• FAMILY TREES (Levine)
• SPECIFIC GENES (Behan, Kerr)
• LINKS WITH OTHER DISEASES
• GENE ARRAY (Kerr, Gow)
HORMONE STUDIES

- HPA (Cleare, Demitrack))
- GROWTH HORMONE
- THYROID (Teitelbaum)
- OESTROGEN (Studd)
TESTS OF LITTLE USE
(Shepherd)

- HAIR ANALYSIS
- SALIVARY TESTS
- MERCURY AMALGAM
- EAV
MANAGEMENT

• CORRECT DIAGNOSIS
• ACKNOWLEDGEMENT/SUPPORT
• EDUCATION
• LIFESTYLE
  – Stress (Friedberg, Sharpe)
  – Exercise/rest (Fulcher&White, Lapp)
  – Nutrition
  – Supplements
  – Sleep management
STRESS MANAGEMENT

• ACKNOWLEDGE
• DEFINE
• CATEGORISE
• MANAGE
• RELAXATION STRATEGIES
• COUNSELLING
EXERCISE

- NONE LEADS TO POOR OUTCOME
- TOO MUCH LEADS TO RELAPSE
- NEEDS TO BE REGULAR/OUTSIDE
- START AT LOW LEVEL
- LITTLE and OFTEN
- PREPARATION and REST
- BUILD SLOWLY
- AVOID CRASH and BURN
NUTRITION

- BALANCED DIET/VARIETY
- SMALL REGULAR MEALS
- MINIMISE ALCOHOL, CAFFEINE
- AVOID RICH FATTY FOODS
- PLENTIFUL FLUIDS (not excess)
- SALT
- SUNSHINE
SUPPLEMENTS

• BETTER ABSORBED VIA FOOD
• DEFICIENCIES IN BLOOD
• DEFICIENCIES IN DIET
• TREATMENT OF CONDITION
• OMEGA 3/OMEGA 6 OILS
• B VITAMINS (B12 INJECTIONS)
• MAGNESIUM (MALIC ACID)
• COENZYME Q-10
• AVOID VIT C EXCESS
SLEEP MANAGEMENT

• GOOD ROUTINE
• SLEEP HYGIENE
• TRICYCLICS
• MELATONIN
• ANTIHISTAMINES
• MUSCLE RELAXANTS
• BENZODIAZEPINES
MEDICATION

- SLEEP DEFICIT
- INCREASE BLOOD VOLUME
- PAIN CONTROL
- DEPRESSION and ANXIETY
- HRT (Studd)
- CENTRAL ACTIVATION
- ANTIMICROBIALS (Straus, Nicholson)
- AMPLIGEN
- ISOPRINOSINE
PAIN CONTROL

• WARMTH, MASSAGE, RELAXATION
• ACUPUNCTURE, HYPNOSIS
• SIMPLE ANALGESICS
• STRONG ANALGESICS
• OPIOIDS
• RELAXANTS
• ANTI-EPILEPTICS
NATURAL/HERBAL MEDICATION

- BEWARE OF FALSE CLAIMS, EXPENSE
- CARE WITH MIXED CONCOCTIONS
- SLEEP (kava, valerian)
- PAIN (willow bark)
- DEPRESSION (St Johns wort)
- COGNITION (gingko)
- AVOID: adrenal support, immune boosters
- ?DHEA
ONGOING ISSUES

• AVOIDANCE OF RELAPSE
• REGULAR REVIEW
• MULTIDISCIPLINARY TEAM
• RECOVERY RATES
• GENE STUDIES
PATIENT PROFILES

• GENUINE CLASSIC CFS/FM
• FIT CRITERIA but SUBCATEGORISED
• CFS/FM + PSYCHIATRIC PROBLEM
• THICKFILE COMPLEX PATIENT with FUNCTIONAL SOMATISATION DISORDER
• OTHER DIAGNOSIS
Rehabilitation